“I WAS SICK AND YOU VISITED ME:” THE HOSPITAL OF SAINT JOHN IN
BRUSSELS AND ITS PATRONS

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by
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hereby certify that, in their opinion, it is worthy of acceptance.

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Professor Anne Stanton
I would like to dedicate this work to my family, who has stuck beside me, encouraged me, and supported me through this entire process. Despite the distance between us, the endless phone calls, letters, and cards were just what I needed to remind me of who I was, where I came from, and of what I was capable. Finally, I would like to extend a special thanks to my most immediate family member, my husband, Michael, who has been by side in every step of this process. From Nebraska, to Texas, to Missouri, Michael has been there, in times of good and bad, to make sure that I finished what I originally set out to do. I owe you!
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ABSTRACT

Prior to the twelfth century, medieval Europe was generally rural. Few substantial settlements existed on the continent, and the trade of goods and the exchange of ideas virtually came to a halt. It was only in the twelfth century that a “renaissance” occurred. As postulated by historian Charles Homer Haskins in the early twentieth century, this renaissance meant that in many areas what had once been unclaimed lands and farmlands could be reclaimed. Dikes and canals pushed rivers and seawaters back into their banks in order to clear lands for crops. Towns blossomed, and in many places quaint settlements exploded into formidable cities. With the rise of towns and cities, the creation of the many urban organizations soon followed. While some of these groups grew out of the religious traditions of the Middle Ages, other organizations were tied strictly to the rebirth of towns. Thus, several new groups emerged, many for which the traditional divisions of medieval society did not account. Most prominent of these organizations was a new merchant, burgher class (the burgenses), who not only created a social upheaval, but who also began to dictate a new set of social norms. As society moved from a land based economy and a barter society to a cash society, land and rents, once limited to only the upper nobility, were freed up. As a result, mid-level and lower nobility were able to participate in some of the customs and traditions, especially in regards to land donations, that were once limited to only the upper nobility.

Yet, social upheaval through the creation of a new urban class was not the only consequence of urbanization. For the first time since the fall of the Roman Empire, the poor and sick alike began to plague the streets, many of whom were victims of the
success of urbanization. The poor and sick who had once benefited from the structure of rural society were now forced into despair through the creation of towns and proto-industry. Thus, the crisis of urbanization not only precipitated social and communal evolutions but also new social structures, many of which came as responses by local churchmen and nobles to remedy the unforeseen urban problems.

To understand all these urban, societal, and economic changes, one only has to look to hospitals, which were the recipients of donations from the medieval burgenses, refuges for the sick and poor, and places where local churchmen and nobles sought to deal with the crises of urbanization. While care for the sick and poor seems like a significant enough reason to study hospitals, a study of a single medieval hospital in one city also demonstrates the manner in which societies behaved and interacted. Several social levels of people are identified through the study of one hospital, giving historians a better understanding of town life and the ways in which townspeople interacted in the Middle Ages. Thus, hospitals are at their simplest levels a microcosm of town life in the Middle Ages. They provide a snapshot of medieval life and demonstrate the everyday workings of medieval people.

The hospital of Saint John in Brussels is an exemplar of medieval hospitals, and this study examines the hospital in conjunction with its development during the high Middle Ages. While previous histories of hospitals have been concerned with the hospital itself, the patients, and the care that the brothers and the sisters gave to the inmates, my work moves beyond the institution itself to consider the social, economic, and political context into which the hospital was born. By exploring the many
developments that were taking place in society via the hospital’s extant documents, I am better able to understand—and I hope, demonstrate—the cultural transitions that transpired in the high Middle Ages.
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INTRODUCTION: LOCATING THE HOSPITAL OF SAINT JOHN
WITHIN THE CONTEXT OF THE HIGH MIDDLE AGES

Introduction

In 1234 the county of Champagne grew in size and power when Thibaut IV (1201-1253) inherited the crown of Navarre. That same year, crusades on the European mainland, especially in the Baltic region and Germany, continued as the Teutonic Knights pushed their way into Prussia during the Prussian Crusade. In addition, Holy Roman Emperor Frederick II (1194-1250) suppressed his son Henry, who incited a rebellion of the German towns, only to imprison and depose him a year later. In the Middle East, Ibn al-Athir (d. 1234), drew his last breath, but his legacy lived on as Arabic works continued to flow into the West and stimulate thought and education. Finally, in Venice, construction on an enormous red-brick gothic basilica, dedicated to Saints John and Paul, began under the Dominicans.

In 1234 in every corner of the Medieval World, growth was occurring. Territories grew into formidable provinces and kingdoms, both peacefully and under the banner of war. The rulers of the new lands united the people and their newly-formed cities into common cause and purpose. As territorial augmentation slowed, townspeople were free to settle and trade, as well as to expand their minds, thanks namely to the influx of texts now coming into the West. Religious and ethnic crusades cleansed and unified, and everywhere one turned, newly-rebuilt churches, the visible reminder of Christianity, civilization, and progress, dotted the landscape.

Indeed, throughout the medieval world, civilization blossomed in the twelfth and thirteenth centuries. The constant reminders of this growth were not limited to the major
powers of the period: the territorial agglomerations of France, Germany, England, and Italy, and the religious force that was the medieval church. In 1234, in the rather small city of Brussels on the edge of Christain Europe, a woman named Wiliarde, the widow of Jean Coude d’Obbrussel, provided a charitable gift to the hospital of Saint John. Half of the bequest was to go to the care of the sick and the other half to provide for lighting of the hospital.\(^1\) Although her gift would not be viewed as great as the contributions that Arabic scholars made to the stimulation of thought in the West, although her donation would never be as historically important as the Crusades, and although her bequest would certainly be trumped by the exploits and heroic deeds of Frederick II, Wiliarde was just as much a woman of her time as were the more famous and celebrated enactors of large political events. She was engaged in some of the same activities and evolutions that had allowed the medieval world of the high Middle Ages to bloom. As the wider medieval world was expanding politically, religiously, and territorially, Brussels provides us with a lens through which we can see the social, cultural, and communal evolutions of the period occurring all at once.

Like the great powers and provinces of the Medieval World, Brussels, its rulers, and its people flourished in the twelfth and thirteenth centuries. Dukes and local nobles brought prestige to Brussels, incorporating new lands, both peacefully and through war.

\(^1\) “...notum fieri volo quod ego [contuli] pauperibus hospitalis beati Johannis in Bruxella de consilio virorum proborum undecim solidos [Brux]ellensium annuatim solvendos in Nativitate Domini, medietatem ad refectionem infirmorum, aliam medietatem ad luminaria hospitalis, de domistadio sito in platea que dicitur Smalebeca, inter domum lapideam Meinardi bone memorie et domum Henrici Lieveoghe. Ut autem census dicte collationis legitimaretur pro remedio debitorum meorum et mariti mei Johannis, hanc elemosinam ordinavi coram Willelmo, filio Hospitis, et Rubino Meier, scabinis, ceterisque viris bonis et burgensibus perpetuandam...” Cartulaire de l’Hôpital Saint-Jean de Bruxelles (Actes des XII\(^{\text{e}}\) et XIII\(^{\text{e}}\) Siècles), Paul Bonenfant, ed. (Bruxelles, Palais des Académies, 1953), SJ 47, p. 73. CPAS, SJ 33, fol. 47.
Bishops and local religious figures pushed for reform of Christianity generally and of their orders particularly, especially in their creation of new offices, new institutions, and new charities. Finally, local townsmen participated in the revival of trade, commerce, literature, and culture. In the midst of all these changes, the hospital of Saint John was founded and began to flourish, and within a short time, it would develop into one of the most important institutions in Brussels and perhaps even the whole of Europe. The hospital served the community of Brussels, gave respite to the poor and sick, garnered income from both the most important people of the region and those relatively unknown, and finally was immersed in all of the evolutions of the urban scene—be it political, religious, cultural, or social, Saint John’s touched its community and community members unlike any other institution. Thus, it is within the confines of this one hospital that we can see the composition and activities of people at all levels of society during the high Middle Ages.

Despite its profound importance and despite the fact that this hospital intersected every group in this newly-flourishing society, few contemporary accounts discuss the institution, its staff, and its patrons, and few modern historians, archivists, and historians of medical, social, and cultural history have considered the hospital as a starting point for their studies. While Brussels and the hospital of Saint John have not been traditionally thought of as being at the center of cultural, political, religious, and social growth during the high Middle Ages, the town and the institution should not be ignored. The hospital of Saint John, situated in the context of urban Brussels, provides historians with knowledge
that better helps us to understand all of what was occurring in the high medieval centuries.

This dissertation, therefore, seeks to explore the hospital of Saint John and its patrons. The overall aim of the work is to evaluate the hospital and its patrons in their proper historical context. In order to perform this study, I thought it was best to approach Saint John’s and those who gave to the institution by dividing the donors into groups and their donations into case studies. I have divided and analyzed the extant documents according to various cohesive units of patrons and participants and then put them back together in a historical framework. Included in those groups are the upper nobility, the mid-level nobility, the hospital brothers and sisters, local religious groups, the local bishops, the papacy, the beguines, the town châtetain, the hospital provisors and mambours, lay women, towns craftsmen, and tradesmen. The case studies examine the effects of urbanization, poor relief, the lay spiritual movement, and the profit economy on the people in and around Brussels; an exploration of the religious patrons and participants from in and around Brussels; a situating of the hospital’s religious activities within the context of the events of the local bishopric and the papacy; and a look at the many patrons of the urban landscape, some of whom made generous donations to the hospital and some of whom simply saw to the well-being of the institution.

Each group and their story provides a different layer of the historical context of both the hospital and the town of Brussels, and each group helps to define the unusual situation into which the hospital was born and grew. Indeed, through the groups, their donations, and their interactions, we can see the social hierarchies of Brussels emerge, as
well as the inner workings of town life during the high Middle Ages. These case studies help us not only to better understand Saint John’s and Brussels, but they also provide a microcosm for understanding the cultural, social, political, and religious transformations that were occurring throughout the European continent during the high Middle Ages.

A Tenuous Beginning: The Hospital of Saint John and Its Founding

Hospitals were not an invention of the high Middle Ages. Prior to the twelfth and thirteenth centuries, hospitals and hospital-like establishments could be found throughout Europe, and their origins can be traced to the hospitals of the Roman Empire and to the monastic institutions of the early Middle Ages. Despite their existence, public hospitals were not popular, that is not until society necessitated them. The need for hospitals arose toward the end of the early Middle Ages and the beginning of the high Middle Ages. In some ways, religious and cultural movements spurred their foundation, while later, mass numbers of the poor and philanthropic movements contributed to hospital growth.

The eleventh century was a pivotal time for the history of hospitals. In the wake of the Peace of God movement, more pilgrimages occurred alongside the rise of the *vita apostolica*, and there was a general increase in the practice of *pellegrinatio*, especially to the Holy Land. Motives to go on treks to the Holy Land and to other holy locations and motives to create institutions dedicated to ‘health care’ were manifested in what can be

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2 The majority of this section relies upon Paul Bonenfant’s *D’Histoire des Hôpitaux*. The purpose in using Bonenfant exclusively is twofold. First, he is the only source on the early history of the hospitals of Belgium to this day. Second, he was the leading scholar on this particular hospital, the hospital of Saint John, for which his work still proves invaluable. See Paul Bonenfant, *D’Histoire des Hôpitaux* (Bruxelles: Annales de la Société Belge, 1965).

3 The hospital movement will be more fully explored in chapter three.


5 Ibid.
characterized as the ‘Hospitaller Movement’, which occurred in not only the Holy Land but also throughout Europe in general and in Belgium, Brabant, and Brussels specifically. Late in that same century (1099) the Hospitallers of Saint John of Jerusalem also made their first appearance in order to aid the preexisting hospital of Saint-Sépulcre in the Holy City. Well founded and funded, the Hospitallers of Saint John of Jerusalem eventually promoted movements on the continent, leading to what has been classified as an ‘international order’. In Belgium specifically, the movement resulted in the creation of Afflighem (1083), a Belgium monastery, and a hospital at Wanze, created between 1109 and 1137 by the countess of Namur, Ermesinde. Of the many hospitals and hospital-related associations that arose in the movement, most of them would eventually lose their Hospitaller character. Afflighem, for example, soon transformed into a Benedictine Abbey after its initial creation.

While the ‘international order’ of the Hospitaller movement did incite the creation of some institutions in the Brabant region, a greater development of hospitals soon followed. In general, the entire hospital movement in Brabant was dictated by the creation of three types of hospitals: hospitals for pilgrims and poor travelers (or hospitals related to the ‘Hospitaller movement’), hospitals for the sick, and leprosarium. The rise and fall of the first group of institutions, however, only tells half of the story. At the

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6 Ibid.
7 For more information, see Edgar Erskine Hume, Medical Work of the Knights Hospitallers of Saint John of Jerusalem (Baltimore, 1940); Edwin James King, The Knights Hospitallers in the Holy Land (London, 1931); Hospitaller Women in the Middle Ages, Anthony Luttrell and Helen J. Nicholson, eds., (Burlington, 2006); and Jonathan Riley-Smith, The Knights of St. John in Jerusalem and Cyprus c. 1050-1310 (London, 1967).
8 Bonenfant, D’Histoire des Hôpitaux, 13.
9 Ibid.
10 Ibid., 14.
11 Ibid., 22.
same time, a parallel movement was occurring in the region, one that focused on the creation of hospitals for peasants by the burgher class. These institutions would be more characteristic of later public hospitals.

The oldest hospital in this group in the region can be dated to 1090 and was located in Louvain. A similar institution was founded in Brussels in 1127: the Hospital of Notre-Dame et les Douze Apôtres, which was placed under the jurisdiction of the chapter of Sainte-Gudule and thus sometimes takes the name of the hospital of Sainte-Gudule. In addition, two other hospitals appeared in Brussels around the same time. Before 1129, the hospital of Saint-Nicolas arose thanks to the burgher citizens, and the hospital of Saint-Jacques owed its foundation to the burgher class and the dukes of Brabant—both of the groups saw to its creation before 1162.

But even with all these new institutions, the area still lacked hospitals purely dedicated to the care of the sick. Many of the hospitals of the early ‘Hospitaller movement’ had lost their Hospitaller character and had transformed into monastic institutions. The lay hospitals that were created early in the twelfth century simply did not meet the needs of the sick, and since they were formed as waystations for pilgrims and poor travelers principally, the hospitals were difficult to staff and resource. Finally, leprosaria were limited in who could receive care. Fortunately, much of this problem was remedied in the late-twelfth century with the appearance of confraternities dedicated to

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12 Bonenfant, *D’Histoire des Hôpitaux*, 14-15. This subject will be more fuller explored in later chapters.
14 Ibid., 15.
15 Ibid.
16 Ibid.
17 Ibid., 23.
the care of the sick and with the establishment of true hospitals.\textsuperscript{18} Included in the new group of confraternities was the confraternity of Saint-Esprit, which soon created the hospital of Saint John.

The beginnings of the hospital of Saint John can be traced back to 1186,\textsuperscript{19} when a confraternity of the Holy Ghost, made up of the clergy, laity, and burgher citizens, formed an association dedicated to care for the poor. While the confraternity in Brussels was modeled upon another institution from Cologne committed to poor relief, almost from its founding, the new hospital of Saint John separated itself from its counterpart. We know, for example, that the hospital was probably the “first to be designed for care of the sick and not merely as an almshouse.”\textsuperscript{20} The group took the name for the institution from their confraternity, and the hospital was promptly placed under the name of Saint-Esprit in 1195.\textsuperscript{21} Only later did the hospital receive the name of Saint John, probably after the dedication of an adjoining chapel\textsuperscript{22} by the same name.\textsuperscript{23} By 1207, the original confraternity was completely in the hands of the \textit{fratres hospitalis Bruxellensis},\textsuperscript{24} and the group had beseeched the papacy for protection.\textsuperscript{25} In 1209 the group and the brothers, but

\begin{itemize}
\item \textsuperscript{18} Ibid., 19.
\item \textsuperscript{19} There is documentation regarding the hospital earlier than 1186, but the charter that mentions the hospital in 113 is classified as “faux” by Bonenfant and several others. Issues surrounding this charter will be discussed in more detail later. See \textit{Cartulaire de l’Hôpital Saint-Jean}, 1.
\item \textsuperscript{20} Charles Johnson, “Review of \textit{Cartulaire de l’Hôpital Saint-Jean de Bruxelles (Actes des XII\textsuperscript{e} et XIII\textsuperscript{e} Siècles)} by Paul Bonenfant,” in \textit{The English Historical Review}, Vol. 69, No. 273 (October, 1954), 625.
\item \textsuperscript{21} Bonenfant, \textit{D’Histoire des Hôpitaux}, 19-20.
\item \textsuperscript{22} See \textit{Cartulaire de l’Hôpital Saint-Jean}, and Johnson, “Review of \textit{Cartulaire de l’Hôpital Saint-Jean}, 625.
\item \textsuperscript{23} Early in the thirteenth century, the confraternity of Saint-Esprit changed its name to Saint John. The change in name came during an event was probably (“sans doute”) in the imitation of Saint John of Jerusalem, which tied the hospital back to the original Hospitaller movement. See Bonenfant, \textit{D’Histoire des Hôpitaux}, 20.
\item \textsuperscript{24} Bonenfant, \textit{D’Histoire des Hôpitaux}, 20.
\item \textsuperscript{25} In 1207 Pope Innocent III extended his protection over the brothers of the hospital and their holdings. See \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 6, p. 13. CPAS, SJ 4, fol. 1.
\end{itemize}
not the hospital itself, received protection as the *fratres et sorores hospitalis beati Johannis in Bruxella*. By 1211, the hospital of Saint John had received its statutes, the rules of which were granted by the Bishop of Cambrai. Of the 37 total articles, 27 were devoted specifically to the rules for the community associated with the hospital. While the hospital was fully functioning in 1211, a doctor could not be called upon in cases of *particularis infirmitas*. From this fact, Paul Bonenfant, the leading authority on Saint John’s hospital, inferred that the hospital was dedicated to more than just pilgrims or travelers and thus to overseeing the care of the sick.

Most hospitals prescribed that “the Church, usually represented by the diocesan bishop, was responsible for the rule and statues by which a hospital guided.” This was certainly case with Saint John’s, with some variation. The statutes of the hospital of Saint John dictated that the bishops of Cambrai would not only be the spiritual supervisors of the hospital, but also the temporal advisors. In addition, the rules of the hospital specified that the community was to be headed by a *procurator domus*, who was selected by one of the brothers and a council made up of two of the other brothers and four of the sisters. It was the bishop, however, who reserved the ultimate say in decisions regarding the hospital, especially the final nomination of the *procureur*. The extraordinary position of the bishops of Cambrai would mean serious consequences for

31 Ibid.
32 Ibid., 28. The naming of the *procureur* appears in point thirty-one of the statutes: “Satuimus quod, com procurator predicte domus obierit vel alias decesserit, alius procurator, de consilio Cameracensis episcopi vel ejus officialis substituatur.” Cartulaire de l’Hôpital Saint-Jean, SJ 10, p. 24.
the hospital of Saint John, both good and bad. Because the bishops were so involved in local affairs, whatever the bishops did outside the hospital would have a later and profound impact on the hospital itself. Thus, the statutes helped to inextricably link the hospital to outside dealings and to bring the hospital into situations that would have probably have never occurred if it had not been for their declaration, situations that came on the heels of other developments in the medieval world.

Such was the early development of the confraternity of Saint-Esprit and the hospital of Saint John. Survival of the hospital into the thirteenth century, however, would depend on the support of the local community. Although groups of citizens in the form of a confraternity first oversaw the needs of the institution, the later developments were taken up by local dukes and bishops, and even local citizens. Yet, prolonged function and success were limited in the twelfth century and early thirteenth centuries. Thus, changes and a flowering of the hospital came later, especially in the mid-thirteenth century. During this time, the regional hospitals experienced what has been called an efflorescence; many of the hospitals continued to grow because they ‘reinvented’ themselves.33 For Saint John’s, the reinvention included the establishment of a chapel and its offices, enabled by the dukes, bishops, and middling nobles of the region. The chapel helped to garner funds that assisted in the continuation of the hospital. The creation of the attached chapel also allowed for the hospital to collect indulgences, which prompted a rebuilding of a new hospital facility in the mid-thirteenth century.

After its “reinvention,” the hospital continued to grow steadily and successfully, namely thanks to its generous donors. The donations and agreements regarding land leases that the hospital received would turn the hospital into a mini empire and make it one of the largest hospitals—in terms of land holdings—in the entire region. In some ways the hospital would rival several of the most known and important political and religious institutions in the region. While the donations did ensure the growth and success of the hospital, the type of gifts were idiomatic of societal changes. Nearly every level of the social hierarchy came together to see to the success of the hospital. From the butcher, blacksmith, and fisherman, to the town alderman and the city representatives, it seemed that everyone fostered this nascent institution. This was such the case that the donations also ensured that the hospital existed for nearly seven centuries.

In addition to more donations and gifts, the hospital also began to grow as a medical facility. For example, we know that during the Burgundian regime, a city surgeon visited the hospital once a day and a city doctor once a week, and that “an ordinance of 1501 stipulated patients had to be placed in a bed with clean sheets and a blanket and be suitably clothed in winter.” Late in the seventeenth century, however, the hospital was leveled in a bombardment by the Marshal of Villeroi, a bombardment that rained over 3,000 cannonballs onto the city. The hospital was rebuilt, but it took

35 Ibid.
36 This bombardment occurred on 13 August 1695 the Marshal of Villeroi and his army. On 11 August 1695 the marshal and his 70,000 forces occupied the area of Anderlecht near Brussels. As Paul Sate explains, “the bombardment began on the evening of 13 August. More than 3,000 assorted cannonballs and shot rained down on the city, setting afire to close to 4,000 buildings.” While he goes on to note that most of the damages were “made good within five years,” the extent of the destruction to archives and some
time for the institution to recover. By 1780 Saint John’s “counted 135 beds but no operating room.” Eventually, though, the hospital “became cramped and outdated. A modern facility was built between 1838 and 1843 at a site along the boulevard du Jardin Botanique, which was later demolished, and the facilities were integrated with those of Saint-Pierre.” Yet, this fine and up-to-date building itself was also demolished in 1950, only to be superseded by today’s Brugmann hospital.

While one only has to briefly examine the multi-faceted history of the hospital of Saint John to appreciate its importance, one is left wondering, why the hospital of Saint John should be the focus of a detailed study? The answer to this question can be found in history of urbanization. During the twelfth and thirteenth centuries, a “crisis of urbanization” blanketed the towns and cities of Europe. From Italy to England and from France eastward into the Slavic regions, towns blossomed and village settlements exploded into formidable cities. While the immediate effects of urbanization included more croplands, better diets, increased trade and commerce, better learning, and an overall “renaissance,” the long-term benefits were not always immediately realized. Although not entirely accurate, traditional early medieval society has been classified as a

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37 State, Historical Dictionary of Brussels, 145.

38 Ibid., 146.

39 Brugmann hospital was constructed in another location in 1923 according to the designs of Victor Horta before Saint John’s had been destroyed.

40 For this development in the region of Brussels, see Alexandre Henne et Alphonse Wauters, Histoire de la Ville de Bruxelles (Bruxelles, 1968).

“tripartite society”\(^{42}\) of those who pray, fight, and work. The rise of cities, however, precipitated the growth of trade and commerce, and created professions for which the traditional divisions did not account. As a result, a new merchant-burgher class was created, who not only challenged the bounds of tripartite society and created a social upheaval, but also began to dictate a new set of social norms.\(^{43}\) Furthermore, social mobility emerged as a viable option for many, middling and lower classes alike. These transitions were just as visible in Brussels as they were in the rest of Europe.

In addition, as society moved from a land-based economy and barter society to a cash society, lands and rents once limited to only the upper nobility were freed up and a profit economy was born.\(^{44}\) As a result of greater overall affluence, mid-level and lower nobles were able to participate in some of the customs and traditions, especially in regards to land donations that had been limited to the upper nobility. One of the most notable opportunities came on the heels of the lay religious movement. With a surplus of cash, middling nobles and even some peoples of the lower classes were able to distribute charitable funds. Monasteries, churches, religious orders, and of course hospitals, including the hospital of Saint John, benefited.

\(^{42}\) Traditionally, this phrase is attributed to one of two sources, the first of which comes from Bishop Aldabero of Laon on 1027/31. The second author was Bishop Gerard I (1012-51) a canon of Cambrai on 1023/4. This is extremely significant considering that within one-hundred years, the social structure would fall into transformation, making the distinction of three classes void. For more on both men, see Giles Constable, *Three Studies in Medieval Religious and Social Thought* (Cambridge: Cambridge University Press, 1998), 283-4.


\(^{44}\) See especially, Lester K. Little, *Religious Poverty and the Profit Economy in Medieval Europe*, (Ithaca: Cornell University Press, 1978). In addition, see chapter three, which details more fully the transitions that occurred in society.
Social and economic advancement, however, was not the only result of the crisis of urbanization. While increased urbanization did indeed lead to the creation of better towns and cities, more significant fortifications, plentiful farmlands, astonishing architectural structures, and capable municipal governments, not everyone would benefit from the newfound changes. For the first time since late antiquity, socially displaced poor and sick people began to plague the streets of European cities. These people were victims of the success of urbanization. Recently forced both into despair and the view of the public through the loss of personal ties that had been a hallmark of village society, the displaced poor and sick became constant reminders that with all its wonders, urbanization also brought serious problems. The best way, however, to deal with the poor and the sick was to create and build institutions dedicated to their care. This was the initial purpose of the hospital of Saint John. With newly found means through which several classes could support needy institutions and with so many lost in the urban transition, it seems only logical that a community movement would be necessary to solve these newly-found problems.

Thus, historians have argued that throughout Europe urbanization often created a loss of community, forcing people to reconsider to what groups they belonged and to whom they could turn in times of need. At a point at which the traditional social structure was crumbling, new social divisions were also emerging. In no place is this more evident than in the twelfth and thirteenth century hospital of Saint John. Simply stated, beyond health care, the importance of Saint John’s was that it functioned as a point of intersection of all the groups, old and new, in the citiescape. Upper nobility,
upper clergy, lower classes, and the people not traditionally included in tripartite society—the new urban burgher class, the mid-level nobility, and women from all walks of life—either benefited from the services offered by the hospital or benefited from the new community generated by the urban crisis. Those who sought care and shelter were provided for, and those inspired by the lay movement and with the cash to do so provided for their community’s care, and thus articulated, furthered, deepened their own sense of security and belonging in the new society that was being formed.

Those associated with the hospital of Saint John formed a nucleus of patrons, from which we can then discern the course and direction of social, cultural, religious, and political evolutions. While the patrons of Saint John’s hospital were never on the level of Frederick II and while the events that concerned the hospital were never as significant as the Crusades, the events that occurred at the hospital and the people with whom the hospital was associated all help us to understand better what life was like in a high medieval town. They also help us to understand the transitions that occurred during this tremendous period and give life to a region that remains somewhat neglected in the history of the twelfth and thirteenth centuries.

An updated study of Brussels and the


hospital of Saint John in English is paramount to understanding the developments of the twelfth and thirteenth centuries in every corner of the medieval world.

Outline of Dissertation Chapters

In order to conduct this study, I have chosen to approach the subject chronologically and topically. At times, I examine the political or religious side of the story separately in order to provide detailed, albeit, segregated views of the period in question. The purpose is simple: to provide the background for the history of Saint John’s hospital in Brussels so that we can fully understand the historical context of the institution. I have also chosen to divide the chapters into sections analyzing different groups of people, and the majority of the chapters have become case studies on certain individuals or groups.

Chapter one looks at the hospital of Saint John both historically and historiographically. The literature review provides the basis for the history of the hospital, as well as introduces the methodology that will be employed throughout the dissertation. The second chapter explores the city of Brussels and its foundations from the Palaeozoic Era until 1106, and it considers land formations, political developments and the rise of the inhabitants located in the city. The focus of the chapter is on what could be called the “upper and middle” classes, and it shows the political and municipal developments of the city. Included in this discussion are the dukes of Brabant and other powerful politicians, such as city aldermen, since these people prove important in later developments of the hospital—the dukes would go on to become some of most successful and important patrons of the hospital, and an alderman was almost always present as a
witness for a hospital charter. This chapter also considers the physical environment in which the institution emerged. Buildings, city sections, and streets all materialized in the high medieval city during the time of transition. Few institutions aside from Saint John’s hospital had the distinction of being at the center of all the new developments. Finally, in chapter two, I will argued that Brussels is the quintessential example of a city of the “Twelfth-Century Renaissance.” Although peoples had inhabited the area for over a thousand years, it was not until the eleventh and twelfth centuries that Brussels began to arise as a power in Europe. Many of the changes that previous scholars have noted in better explored cities, such as in culture, commerce, economics, and religion can also be observed within the town, the peoples, and the institutions of Brussels. In fact, I will argue that it is only with the changes during the “Twelfth-Century Renaissance” that Brussels could evolve into the modern city that it has become, and it was only with those changes that Saint John’s could emerge.

Chapter three provides a continuation of the second chapter in its exploration of the environment into which the hospital grew; it examines the religious and social foundations upon which the hospital was built. Of special concern are the bishops and other religious figures associated with Saint John’s, all of whom had roles in its creation and function. The chapter also considers the poor and ideas concerning poor relief. Finally, I explore the rise of philanthropy and the creation of hospitals, including the hospital of Saint John. The hospital emerges as a microcosm for other religious and cultural events, many of which are explained in greater detail in later chapters.
Chapter four concludes the contextualization of the hospital of Saint John, setting forth the political developments between 1106 and 1312 and the social and communal evolutions of that same period. A great portion of the chapter is dedicated to the careful explanation of Duke Henry I’s reign (1190-1235), since he would be one of the most important patrons to the hospital. I also outline the development of the city of Brussels, its trades, its people, and its composition, such as streets, markets, and waterways, all of which were important to the hospital of Saint John.

The remaining chapters analyze the patrons of the hospital of Saint John. The focus is on the patrons rather than the hospital’s clients, since when dealing with the poor we know little about how the sick lived and survived, and “we have virtually no comprehensive studies of the total number and collective impact of the formal charitable institutions of a single community.”47 This does not, however, mean that we cannot examine the poor or the institutions that cared for them; there are ways to view the poor, or at least to learn how they were cared for. Historians have sought to understand the poor via records of alms-giving, as well as hospital archives. While records of alms-giving are often inaccurate, hospital archives of medieval charters prove more fruitful in providing evidence about the institution’s patrons, who provided charity on behalf of the poor and sick.48

47 Farmer, Surviving Poverty in Medieval Paris, 6.
48 See Michel Mollat, The Poor in the Middle Ages: An Essay in Social History, Arthur Goldhammer, trans. (New Haven: Yale University Press, 1978, 1986), 10. In addition, we have no lists that name the nurses, the priests, or the patients, and there are no inventories or medieval paintings of the hospital. Some later paintings do certainly exist, and since little changed with the hospital over seven centuries, they are indeed invaluable. Thus, we cannot know exactly who worked in the hospital, what kind of care was given, or who even benefited from the care that was provided.
Fortunately, most of the hospital collection from Saint John’s appears in a twelfth- and thirteenth-century cartulary, while most of the surviving charters are held at Centre Public d’Action Sociale de Bruxelles, or CPAS. Originally, however, the archives were titled, archives de l’Assistance publique de Bruxelles. While the archives collected at CPAS are extremely organized and accessible, there is no centralized system of archives in Belgium. Instead, most archives are organized by province. For the hospitals of Belgium, many of the documents stayed with the welfare organizations in their towns with which they were associated. Thus, the Centre Public d’Action Sociale de Bruxelles became the home to the archives of Saint John’s hospital. The rationale to include archives with their welfare organizations dates back to the French Revolution and a French system of administration and organization. Under the French, the archives of Brussels were rationalized under the notion that welfare belonged to the state.

While CPAS is home to most of the extant documents pertaining to the hospital of Saint John, not all the existing documents were used in this study, since many pertain to the years after 1300, a period outside of this particular study. The fonds (fonds de l’hôpital Saint Jean) examined were limited to the following: SJ 2, SJ 4, SJ 5, SJ 6, SJ 19, SJ 20, SJ 22, SJ 23, SJ 27, SJ 28, SJ 29, SJ 30, SJ 31, SJ 32, SJ 33, SJ 34, SJ 35, SJ 36, SJ 37, SJ 38, SJ 39, SJ 40, SJ 41, SJ 42, SJ 43, SJ 44, SJ 45, SJ 46, SJ 47, SJ 48, SJ 50, SJ 83, and SJ 85. In addition, I used the cartulary, as well as archives from the Archives Générales du Royaume (AGR) and the Bibliothèque royale de Belgique.

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49 Today, the center is located at Rue Haute 298a, 1000 Bruxelles. One can contact the archives via phone, fax, or the web: Phone: +32(0)2.543.60.55; Fax: +32(0)2.543.61.06; and Website: www.cpasbru.irisnet.be. Currently, the center is headed by Mr. David Guilardian, who can be contacted at DGuilardian@cpasbru.irisnet.be.
The recreated cartulary contains 278 acts issued between 15 October 1131 and 19 December 1300. Of those 278 acts, the author, Paul Bonenfant, breaks down the documents into three categories: ecclesiastical, lay, and author undetermined. Among the lay and ecclesiastical figures, dukes, lords, knights, sires, bishops, popes, abbots, deans, priests, mistresses, masters, nuns, monks, brothers, sisters, husbands, wives, uncles, widows, grandfathers, bakers, and blacksmiths all can be found in the cartulary, which were not necessarily noted by Bonenfant in the categories. The acts were all issued from various locations, including Montefiascone, Brussels, the Lateran, Rome, Santbergen, Soignies, Anderlecht, Cambrai, Rieti, Mysee, Tervueren, Spoletto, Viterbo, Lyon, Anvers, Liège, and Thun-l'Évêque. Generally, the number of surviving acts issued increased gradually over an approximate one-hundred year period from 1186 until 1280. There was a small decline in the numbers of acts between 1281 and 1290, and in 1291 the number sharply increased.

We know that most medieval charters were a “single piece of parchment; charters that were to receive a seal usually have a fold at the bottom (called a plica) through which the cords or parchment tag were inserted to attach the seal.” This is certainly true of the extant documents of Saint John. Many of the charters take this form with some variation, including size, medium, and seal composition. While most of the documents are plain with little textual decoration, many of the extant seals are quite

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50 For a complete list of the archives used, see the bibliography.
51 Some of the locations are duplicated in several of the charters, and not all the locations of all the charters can be identified. The cities listed represented only a small portion of the locations about which we know for certain (about 14%).
52 More will be discussed on the frequency of the issuance of the acts and by whom later.
elaborate. Also included in the collection are several papal bulls with their attached *bullae*. Most of the *bullae* are fastened to their documents with a decorative string or hemp, whereas the non-papal documents have their seals pressed directly into strips of parchment.\(^{54}\) While some of the documents have writing on the reverse, the majority are one-sided. Finally, some of the charters are collected in other late-medieval and early-modern editions of cartularies, which are composed on parchment, but not on single sheets. Rather, these works are bound together and collected between bindings.

Although they had numerous functions, charters generally documented the transfer of property or rights from one individual or group to another. The transactions recorded could be perpetual or limited in duration. This is the nature of most of the documents in the Saint John collection. More narrowly, the documents of the cartulary tend to be either secular or religious in nature. Those that are secular certainly can be defined as legal documents, whereas the religious documents often concerned various other events and matters. For example, several of the documents that are religious in nature concern the bestowing of certain religious rights onto the hospital, such as the ability to form the group under ecclesiastical supervision, or the right to administer the sacraments even under interdict.\(^{55}\)

While we are fortunate to have such a well-preserved collection, the documents are not without their problems. Because of their importance, charters were also liable to be forged, and over time several methods were developed to protect these documents.

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\(^{54}\) For more on this subject, see Bernard Bischoff, *Latin Paleography: Antiquity and the Middle Ages*, Dáibhí Ó Cróinín and David Ganz, trans. (Cambridge: Cambridge University Press, 2007), 35.

\(^{55}\) All the documents were, however, spiritual in nature, albeit lay or religious. For more on this topic, see the later chapter on patron donations, which address the spiritual undertones in donations, rents, and leases.
against forgery, although forgers were usually able to adapt innovations designed to thwart them.  

Because of the possibility of forgery and because of other issues surrounding them, it has been noted that “at best, Latin charters represent lay interpretations of these transactions only though a multilayered screen of linguistic and cultural translation. At worst, charters tell us nothing about lay attitudes and present only retrospective and self-interested views.” This being said, one must be cautious when recreating the events surrounding a particular charter and trying to establish the people associated with the charter. This is especially true of charter witnesses, some of the most visable figures in the history of Saint John’s hospital.

There is some debate as to whether or not witnesses of charters are valuable sources. Leonard E. Boyle explains that “witnesses have a prominent place in both public and private acts, whether to add solemnity to the occasion or to validate an act by their presence, their signatures, or their seals,” and that “the social status of the witnesses is usually noted with care, yielding valuable information for the historian on rank and occupation.” But the use of witness lists is still debatable. David Bates, for example, in a review of C. Warren Hollister’s Monarchy, Magnates and Institutions in the Anglo-Norman World argued that

Hollister’s prosopographical methods rely to some considerable degree on counting witnesses in the witness-list of charters. These are methods which frequently work extremely well, as in “The Rise of Administrative Kingship” where they are used as a means of identifying administrative servants based

56 Clemens and Graham, Introduction to Manuscript Studies, 222.
59 Ibid.
mainly in either Normandy or England. In other contexts, however, they need refinement to take account of the character of the evidence from which the statistics are drawn. It is important to recognize that a high proportion of the charters of the Anglo-Norman period are writs with a limited number of witnesses, sometimes only one or two. Such documents cannot be used as evidence for who did or did not attend the royal/ducal court regularly; the only documents which are likely to do this are diplomas drawn up on ceremonial occasions and writs which resemble diplomas in having long witness-lists. Conclusions which do not take account of these basic diplomatic facts will be misleading.  

In addition, Emma Mason, like Bates, takes up the issues surrounding witness lists. She argues that “in the later eleventh century, writs were sometimes issued with minimal attestations, or even none. Twelfth-century archivists, accustomed to handling witnessed documents, occasionally ‘improved’ these older texts with a witness list.” She concludes by adding that “no credence can be lent to the attestations, however.”

While Mason may be correct in her attestation that “comparable disparities between the authenticity of text and attestations face most editors of Anglo-Norman charter collections,” we cannot altogether stray away from these sources, especially since not all twelfth-century sources were “improved.” Bates and Mason certainly make valid points and their cautions must be taken into consideration, but the careful use of charters, witnesses, and witness lists provides invaluable information. The witnesses to the charters of Saint John’s hospital show association with various peoples, as well as the structure of the social hierarchy in Brussels. Furthermore, it is through the extant charters

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62 Ibid.
63 Ibid.
of the hospital of Saint John that hundreds of people found a common voice in their gifts to the hospital. Dukes, bishops, popes, priests, middling nobles, the burgher class, common people, and even women all appear in the charters. In their roles we can discern, to an extent, their motives, which in some ways were tied to the environmental, physical, political, religious, cultural and social changes of the day.

Chapter five, therefore, is the first chapter to really employ the charters themselves. Although the hospital of Saint John in Brussels existed for nearly seven hundred years after its initial creation in 1186, and although the city of Brussels functioned as an *exemplum* in medieval health care throughout the high Middle Ages, the hospital and the city have not been the focus of studies on charity and health care except in two cases, those of Paul Bonenfant and his student, Paul Evrard.⁶⁴ Paul Evrard noted that the foundation of the institution could be contributed to three groups: the dukes of Brabant, the bishops of Cambrai, and local citizens.⁶⁵ Of these, the dukes of Brabant have been studied the most, which has led to the belief that in general the dukes of Brabant, and specifically Duke Henry I, were fully responsible for the creation and continued success of the hospital. These same studies also argued that when the dukes no longer contributed to the hospital it was because the bishops of Cambrai had taken over both religiously and administratively. Finally, these works go so far as to suggest that by the late thirteenth and fourteenth century, the local citizens who were identified as

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⁶⁴ See the literature review (chapter one) on Bonenfant and Evrard for the details of their findings.
playing a role, if only small, in the creation of the hospital, were hardly responding to the needs of the hospital and the charitable mission for which it stood.\textsuperscript{66}

While the previous studies help us to better understand the dukes of Brabant and perhaps the bishops of Cambrai, they do not fully take into consideration the role of the local burghers and mid-level nobles, nor do they take into consideration the social and political context of the hospital. The dukes of Brabant were pivotal to the success of the hospital. All the aid that the dukes gave to the hospital, however, would have fallen by the wayside if it had not been for the establishment of a chapel within the hospital, which saw to the prolonged success of the institution.\textsuperscript{67} This chapter argues that while the dukes and the bishops were important to this development, the chapel could have not have been created if it had not been for one local lay citizen: Guillaume of Ledebergh, prominent in the first third and first half of the thirteenth century.

In addition, chapter five also notes that while the dukes of Brabant and the bishops of Cambrai both played a pivotal role in the creation and success of the hospital, many lay mid-level noble citizens played even greater roles, such as Guillaume of Ledebergh and Arnoul of Meysse. Long after the dukes of Brabant ceased to actively fund and participate\textsuperscript{68} in the hospital, actions by people like Guillaume and Arnoul allowed the hospital to grow and prosper. Finally, I detail the donations of two local

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\textsuperscript{66} Ibid., 1.

\textsuperscript{67} The creation of the chapel occurred precisely at a time during which the hospital was ‘reinventing’ itself. Bonenfant has noted that the hospitals and similar institutions in the region were forced to reinvent themselves to prevent closure. Reinvention came in many forms, but for Saint John’s the creation of a chapel allowed the hospital to collect indulgences. See Bonenfant, \textit{D’Histoire des Hôpitaux}, 24.

\textsuperscript{68} The term ‘active’ is used here because, as will be shown, Duke Henry I was significantly active in the affairs of the hospital of Saint John. While other dukes of Brabant would grant donations and privileges to the hospital, they were never as prolific as Henry was.
lords, Gautier II, the lord of Aa, and Gautier de Bodeghem, as well as several other knights, many of whom benefited from newly-found money and freedoms that developed in the transition to a profit economy.

Chapter six explores the religious patrons of the hospital of Saint John beginning with the creation of a confraternity in 1186, but also considers a “faux” 1131 charter. After noting the birth and early development of the hospital, I turn to the local religious patrons, who, somewhat unusually, granted charitable donations and privileges to the hospital. The donations first came into the hospital from other religious organizations, such as local monasteries, but gradually increased to include gifts from larger religious organizations from further away, such as the Dominicans in Germany. In addition, later in the mid- and late-thirteenth century, donations expanded to include not just gifts from other religious organizations, but also gifts from individual priests and monks, as well as from religious leaders and their own families. The overall argument of chapter six is that the unusual stem of donations into the hospital of Saint John created what I call a “geography of charity.” Like concentric circles in a still pond, the first donations occurred near Brussels and on a smaller scale. As Saint John’s increased its holdings, as it received protection from the papacy, as it grew physically with the construction of a new building, and as it became known as a center of poor and sick care, the places that donated to the institution grew, expanding the network of donations.

Chapter seven continues along the same lines, in that it is an exploration of the religious figures and leaders associated with the hospital. Divided into two principal chronological sections, each seeks to understand the impact that religious figures had on
the institution and the impact that the institution had on the religious figures throughout the thirteenth century. In both sections, the principal figures associated with the hospital include the local bishop of Cambrai, several popes, the hospital brothers, the hospital sisters, and the beguines. I note numerous trends in the reading of the charters in which these figures were involved. For example, almost every thirteenth-century pope to occupy the papal throne for longer than a single year was concerned with the hospital of Saint John. All the bishops of Cambrai, with one notable exception, appeared in the hospital’s documents during his tenure.

The division between the two sections marks a particularly notable development in the hospital’s history. The sections are divided with the year 1248, after which the hospital began to display more “autonomy.” I argue that the hospital, thanks to its statutes, relied principally on the bishops of Cambrai, as well as the papacy, for support. The bishops and the papacy guarded the hospital, granted protection, and even saw to the creation of a new building, a hospital chapel, as well as gardens, walkways, and courtyards. While the papacy and bishops continued to play a role in hospital administration after 1248, the brothers and sisters, as well as lay members of the community, began to take over administratively. This takeover had an immediate effect on the sisters. Many of the hospital sisters, and especially the hospital mistress, had found a voice through the hospital’s administrative deals. One mistress in particular, Ide—prominent during the mid-thirteenth century—was personally responsible for many new acquisitions. When, however, the brothers began to take over, the sisters were pushed out of the picture. While the sisters disappeared from the documentation for
some time, another group of women, the beguines, emerged, demonstrating that the hospital remains a vital source for understanding women and women religious during the thirteenth century.

The final two chapters, chapters eight and nine, turn back to the lay community to focus on the everyday people of Brussels. Just as the profit economy had created a situation where mid-level nobles could donate gifts and grant privileges to the hospital of Saint John, the rise of the profit economy, coupled with new town life created several classes in the social spectrum, all of which could be found in the records of Saint John’s hospital. Chapter eight looks at those lay individuals who were part of the town’s administrative structure and who also provided assistance and gifts to the hospital of Saint John. Included in this group are the town châtelain and town burghers who served as provisors, representatives, and mambours of the hospital. All of the individuals are analyzed independently to see the types of donations granted by one person, the frequency with which the donations appeared, the role played by the participant (either donor or administrative personnel), as well as donations made by the donor in conjunction with his family or donations by the donor’s family.

The last chapter continues to explore the many different types of people who participated in the gifts to the hospital of Saint John. Considered in this chapter are the townspeople of Brussels: the craft and tradesmen. Butchers, cobblers, candlemakers, dyers, weavers, blacksmiths, and many more people appear in the documents. Some of them, despite their lower place in the social hierarchy, made donations to the hospital of Saint John. Others simply appeared as witnesses or representatives. The chapter also
considers donations by lay women, which make up a significant amount of the extant charters. The women, like the above provisors, representatives, and *mambours*, are explored individually. Yet, because of the nature of the documents, most women did not appear more than once. Thus, they are divided in categories: joint donations (with husbands and relatives), donations in honor of women, and single donations. While the categories differ, a common element of the women’s donations was that most either had a husband, brother, father, or uncle who appeared in the documents at an earlier time, suggesting that most of the families in Brussels acted in “solidarity” in their gifts to the hospital of Saint John. The final topic of the last chapter brings us back to the beginning of the dissertation, which started with an examination of the natural and man-made formations in and around Brussels. The last section explores the many natural formations named in the charters, such as rivers, ponds, streams, and lakes, as well as the man-made and man-produced structures, such as walls, mills, breweries, farms, and vineyards. Several of the formations and structures are named in order to locate certain properties that the hospital received, but several of the structures and formations made up part of the holdings that belonged to the hospital.

**Terminology**

Before turning to the first chapter, it is necessary to note a few technical issues. All of the charters, with the exception of a few composed in either old French or Flemish, are in Latin. Anytime I have used a charter I have provided the original language in a footnote. In discussing the charters in the text, I have mostly chosen to retain the original Latin, especially for terms of weight and measurement and for terms referring to
property. In addition, the majority of the secondary sources are written in French. In most cases, I have translated the work into English, but in those cases where the wording in French does not translate well or is better said in the original French, I have left it that way. For example, *dîme* is used throughout this work—it is better left in the original language. Also, the word *châtelain*, equivalent to a *castellan*, is simply referred to as a *châtelain*, since most of my sources use *châtelain*. But, rather than use the French *bourgeoisie*, I have chosen to use *burgenses*, simply because the word *bourgeoisie* carries modern connotations not meant here.
LITERATURE REVIEW

Introduction

The study of hospitals has been both purposeful and incidental. James Brodman, one of the many historians working on hospitals in the Middle Ages, explains on the one hand “some scholars have come upon hospitals incidentally.” On the other hand, “others have become interested in various examples of laic or nonclerical associations, such as confraternities, parish institutions, and municipal councils, and have subsequently discovered and addressed the assistance such organizations rendered to the poor.” In their study of hospitals, many scholars examine the origins and the character of hospitals while others look at the medieval church and the changes spurred by the Gregorian reforms. There are also studies of civic institutions by local historians, and finally, studies by historians exploring welfare reform, such as for children and the elderly.

More specifically, the first modern studies of European hospitals, which came from the late nineteenth century, focused on the formation and development of the institutions and were authored by people like Rotha Mary Clay and Léon LeGrand. In

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1 While several different studies and authors will be illuminated here, it is important to note that there are numerous other works that can be tangentially linked the hospital of Saint John that are not mentioned in this section. Many of these types of works are described in detail in the sections in which they appear. This includes works such as the great histories of Brussels by Henne and Wauters, and the great social and religious studies of hospitals and philanthropy, such as that by Michel Mollat. See Henne et Wauters, Histoire de la Ville de Bruxelles (Bruxelles, 1968); and Mollat, The Poor in the Middle Ages, respectively. Also not included in this section are basic histories of the period in question, such as Lester Little’s work, that demonstrates the transitions that were occurring in society socially and religiously. See Little, Religious Poverty and the Profit Economy in Medieval Europe. Also, for more on these works, see their corresponding sections.
3 Ibid.
4 Ibid.
5 Ibid.
the mid-1900s there was a turn to the exploration of the social context of hospitals as well as the legal framework, and “since 1970, there has been an explosion of interest in the subject along two principal lines of investigation.” One is on urban societies and groups and the other has been on the under classmen and social elites.

The earlier studies of hospitals used “theological tracts, literature, civil legislation, canon law, and art” to get at poverty, which led to difficulties and weaknesses in the works the studies produced, simply since these sources did not provide the direct evidence needed when evaluating hospitals and their interaction with townspeople. In the 1970s historians began to use charitable institutions, from which they were able to rely on archives, cartularies, rentals, accounts, etc., to bridge the work in order to get to the poor. Soon after these changes, the field exploded, especially with combined studies. For example, the rise in the study of hospitals occurred in conjunction with the study in urbanization, such was with Brian Pullan’s *Rich and Poor in Renaissance Venice.* But it was not enough, as “a pioneering scholar in the study of charitable institutions, Paul Bonenfant, expressed his view of the state of research in these words: ‘Despite its

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8 Although Clay is an important figure, her work has been contested to a degree. Edward Kealey, for example, believes that Rotha Mary Clay “underestimated the healing mission of the medieval hospital by declaring that it was “an ecclesiastical not a medical institution.”” For more on this issue see Kealey, *Medieval Medicus: A Social History of Anglo-Norman Medicine*, 83.  
7 Brodman, *Charity and Welfare*, ix.  
8 Ibid., ix-x.  
9 *The Hospital in History* Lindsay Granshaw & Roy Porter, eds. (New York: Routledge, 1989), 41.  
10 Michel Mollat was working around the same time at the Sorbonne. His work will be discussed in detail later. See *The Hospital in History*, Lindsay Granshaw & Roy Porter, eds. (New York: Routledge, 1989), 41. For the work of Mollat see Michel Mollat, *The Poor in the Middle Ages: An Essay in Social History*, Arthur Goldhammer, trans. (New Haven: Yale University Press, 1978, 1986.  
11 *The Hospital in History*, Granshaw & Porter , 42.
multiple interests the study of medieval hospitals has not yet given rise to works of general synthesis.***12

Even with growing work on hospitals, many historians, such as Lindsay Granshaw and Roy Porter, believe that hospitals are only now receiving the necessary attention they deserve, and that [hospitals] have been neglected in the scholarship. While we have numerous social critiques on institutions like prisons, schools and factories, there are relatively few works on hospitals. As a result, “historians are looking beyond the mere act of lay philanthropy and asking who gave, why they gave, and what their relationship to the hospital was.”13 Historians are also proposing some of the most basic questions in their quest to understand hospitals: who were the patients and what did they do in the hospitals (eat, drink, sleep, etc.)? Finally, historians have made a recent turn to highlight those involved with the hospital, such as doctors, staff, nurses, porters, etc.

Still, even with the most recent developments, historians have only begun to place hospitals in their social and geographic context[. I]t can no longer be assumed that they were necessarily where the most needy poor were to be found, nor in the largest towns and cities, nor founding in response to epidemics. […] For some historians, a social control is a significant feature of hospitals, like other institutions. Were they part of an elaborate system of keeping the poor in their place, sweeping them off the streets and into the hospital, ensuring that they were speedily returned to work, or do other social reasons lie behind their foundation?14

In this pursuit to understand hospitals and their social context, modern historians are only now turning to medieval hospitals in asking these questions. Granshaw and Porter respond:

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12 Paul Bonenfant founded the Belgian Society for the Study of the History of Hospitals in 1963. For more information on this see The Hospital in History, Granshaw & Porter, 41.
13 The Hospital in History, Granshaw & Porter, 2.
14 Ibid., 3.
at their best, studies of medieval hospitals can lead us to an improved and indeed new understanding of social commitment, of attitudes toward the poor and towards the clergy, and to an appreciation of the ways in which a resonant message of charity interacted with prevailing and developing economic factors to produce the changing forms of relief.\textsuperscript{15}

It is these ideas that push to understand and interpret hospitals as “microcosms in history,”\textsuperscript{16} and it is these ideas that inform this study on the hospital of Saint John.

Studies on the Hospital of Saint John

There have been several smaller studies that refer to the hospital of Saint John. Outside of brief mentions in larger studies on other hospitals or events during the period before the hospital’s destruction in the nineteenth, almost all of the work on Saint John’s was conducted by the scholar and archivist Paul Bonenfant. Bonenfant, a leading scholar, historian, and archivist of Belgium in the tradition of Henri Pirenne\textsuperscript{17} and Guillaume Des Marez,\textsuperscript{18} focused mostly on charitable institutions in the Low Countries rather than on hospitals in particular or even on the hospital of Saint John specifically. Bonenfant’s career was marked by his significant and prolific works on charity and poor relief, as well as the history of Belgium and its relation to law and science, but even so, his rudimentary, yet profound work on the hospital of Saint John has gone largely

\textsuperscript{15} Ibid., 42.
\textsuperscript{16} Ibid., 4.
\textsuperscript{17} Pirenne, of course, is known beyond his works on Belgium. Some of his most important works include: Pirenne, \textit{Medieval Cities}; and Henri Pirenne, \textit{Mohammed and Charlemagne} (New York: W. W. Norton & Company, Inc., 1939, 1954, 2001). For some of his most significant works on Belgium, see Henri Pirenne, \textit{Bibliographie de l’Histoire de Belgique} (Bruxelles: Gand, 1902) and Henri Pirenne, \textit{Les villes et les institutions urbaines} (Bruxelles et Paris, 1939).
\textsuperscript{18} Marez’s best-known work is an illustrated guide on the city of Brussels. See Guillaume des Marez, \textit{Guide Illustré de Bruxelles, Monuments Civil et Religieux}, 5th ed., revised and updated by A. Rousseau (Bruxelles, 1979).
unknown. Although he was only 66 years old when he died of a heart attack in 1965, Bonenfant’s contribution left its mark on the field and on the people of Belgium. In a memorial article on Bonenfant, J. Gilissen chronicled the historian’s life and work, much of which will be explored here.

Ten years after entering the program at the University, Bonenfant concluded his studies and obtained the title of doctor after having “brilliantly defended a thesis on poverty in the Austrian Low Countries.” After finishing his schooling, Bonenfant entered the department at the University of Brussels where he was described as being a “professeur remarquable pour les futures historiens.” This fact is recognizably true: up to his death, he worked with his student, Paul Evrard, on Evrard’s thesis. Without Bonenfant’s leadership, the thesis was never finished.

Beyond his work as a professor in one of the leading schools in Belgium, Bonenfant was also important for the ways in which he synthesized history of the poor, charity, and hospitals with science and medicine. His work gave medievalists a new way to critique sources relating to the poor and hospitals. Because of his methodology, Bonenfant quickly rose to become one of the leading scholars of charity; even today, new principal scholars in the field reference his work. In addition, Bonenfant demonstrated in his own work and teachings how to use medical sources that were auxiliary to the

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19 While several other historians and authors have commented on the history of the hospital of Saint John, many times they defer to Bonenfant and his work on the re-created cartulary. See below for examples, but see especially Paul Evrard’s introduction to his thesis and the short news article about the hospital on its 750th anniversary: Evrard, “Formation, organization generale et etat du domaine rural;” and Roel Jacobs, “Plutôt vaste, l’ancien hôpital Saint-Jean,” La Capitale, 18 November 2003.
21 Ibid.
22 For more on Evrard, see below.
23 For example, to just name a few, see Miri Rubin, Charity and Community in Medieval Cambridge (Cambridge: Cambridge University Press, 1987) and Mollat, The Poor in the Middle Ages.
study of charity as important sources in evaluating the history and context of a particular situation or event. Today, studies on medicine and charity are still in their infant stages and some are just now reaching the conclusions that Bonenfant made over fifty years ago. He indeed set the stage for present studies.\textsuperscript{24}

Bonenfant’s contributions are clearly meritorious, and his completed works number upwards of 150 titles, which include several books that are now considered to be central to the history of Belgium, Brussels, and the philanthropic and scientific fields.\textsuperscript{25} Upon his thirty-fifth anniversary at the University of Brussels, thirteen of his works were assembled into “Mélanges Paul Bonenfant,” published posthumously. Collectively titled, \textit{Hôpitaux et bienfaisance publique dans les anciens Pays-Bas des origins à la fin du XVIIIe siècle},\textsuperscript{26} the work proves to be an exquisite collection of Bonenfant’s projects, many of which were previously unpublished. While not all of the articles are of concern to this study, a few particular pieces stand out: “Les Hôpitaux en Belgique au Moyen Age,”\textsuperscript{27} “Apreçu sur l’Assistance Publique de Bruxelles des origins à la fin de l’Ancien Régime,”\textsuperscript{28} and “Les Origines de l’Hôpital Saint-Jean. Son Importance.”\textsuperscript{29} The remaining articles all relate to this project tangentially. For example, one work addresses the hospital after the fourteenth century and another outlines the contents of the archives

\textsuperscript{24} Within the last year, Professor Monica Green at the Arizona State University created a listserv (MEDMED-L) for historians interested in medieval medicine and related fields to help to facilitate scholarship and communication. While more and more interest groups like this one are arising, the history of medicine and its relation to charity is still in its infancy.
\textsuperscript{25} Gilissen, “In Memoriam Paul Bonenfant, 1899-1965,” 494.
\textsuperscript{26} Bonenfant, \textit{D’Histoire des Hôpitaux}.
\textsuperscript{27} This article appeared first at several conferences, and it is also discussed by Bryce Lyon later.
\textsuperscript{28} This work originally appeared as “Apreçu sur l’Assistance Publique de Bruxelles des origins à la fin de l’Ancien Régime,” \textit{le Palotin}, Vol. 4 (Dec. 1944), 2-3.
\textsuperscript{29} This article is also the introduction of the re-created cartulary of the hospital of Saint John with no changes. See both Bonenfant, \textit{D’Histoire des Hôpitaux}, 57-78; and \textit{Cartulaire de l’Hôpital Saint-Jean}, VII-LI.
of Saint John and others at the archives de l’Assistance publique de Bruxelles. In addition, there are several works on other charitable institutions present in the city, such as the leprosarium of Saint Pierre, the Beguinage, and the infirmary of Pachéco.

While the tribute to Bonenfant proved to be a remarkable collection of his works, the homage paid to the historian did not stop there. For the history of hospitals in Europe, the two most prominent figures before Bonenfant were Siegfried Reicke for Germany, upon whom Bonenfant relied extensively, and Jean Imbert for France. Apart from these two men, the works collected in the tribute to Bonenfant represent the history of medieval and early modern hospitals and charity in the Low Countries, what Bryce Lyon calls “social history” of the institutions and area. In 1969 Lyon pointed out that the first article in the collection is the “only available and reliable account of hospitals in the mediaeval Low Countries.” In this regard, he may still be correct. Although there

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30 Siegfried Reicke, Das deutsche Spital und sein Recht im Mittelalter (Stuttgart, 1932).
31 Jean Imbert, Histoire des hôpitaux français (Paris, 1947). Jean Imbert along with M. Candille created in France a society for the study of hospitals. Bonenfant also created such a society, and he modeled it off that of Imbert and Candille. In Belgium it was called the Société d’Histoire des Hôpitaux, and it was founded with the help of G. Leroy. The group was responsible for the printing of Bonenfant’s D’Histoire des Hôpitaux. In creating the group and in his study on hospitals, Bonenfant had desired (beginning in 1959) to place the institutions of Belgium in their proper historical and social contexts and to give each their needed attention. While it was a worthwhile project, Bonenfant never saw it through. He died six years after the group began. See Bonenfant, D’Histoire des Hôpitaux, xv.
33 While Lyon may be correct in this classification to some extent, it is probably more of a political or institutional history. Some of the articles do indeed read as “social histories,” but it is hard to classify the works as social history before the field really took off. For example, the introduction to the re-created cartulary that appeared again in the collection does a good job in situating the foundation of the hospital in its social and political context. Bonenfant also used the cartulary to identify members of the community, their rank and status, but the people and their positions were not elaborated upon in detail. It seems that Lyon might be correct in calling it a social history, but it is an early and not complete social history. Bonenfant left much work to still be done, but the work he did do must be commended as well.
are currently several accounts of hospitals being completed, studies of the hospitals of the Low Countries are still lacking.

While much of Bonenfant’s research was collected into the tribute work, some of Bonenfant’s greatest works were too large for the edition. In 1934 Bonenfant had published his thesis: *Le problème du paupérism en Belgique à la fin de l’Ancien Régime*, which clearly would aid in the development of the later cartulary of Saint John’s hospital. Charity and poor relief were his scholarly strengths, but simultaneously Bonenfant was working on other topics. In 1931 he published in the *Atlas de géographie historique de la Belgique* an article titled “Duché de Lothier et marquisat de Flandre à la fin du XIᵉ siècle (1095).” This work was followed by a history and research on the principality of the Bourgogne Dukes in a history of France in the fifteenth century. Bonenfant continued to produce this kind of work after he became a member of the “Commission royale des Anciennes Lois et Ordonnances (C. R. A. L. O.)” in 1949, and one of his students, M. Uyttebrouck, authored *Liste chronologique provisoire des ordonnances du Brabant et du Limbourg: règne de Jean IV (1415-1427).* Bonenfant also completed works that ranged from the reign of Charles V (1515-1555) to the Ancien Régime and works that spanned topics during the reign of Marie-Thérèse (1740-1780). Another work includes a study on the eighteenth-century manuscripts of the church in

37 Bonenfant was also a member of the Classe des Lettres de l’Académie royale de Belgique, l’Académie de Dijon, Historisch Genootschap d’Utrecht, the Commission royale d’Historie (which published the cartulary), and Commission de la Biographie nationale. See Gilissen, “In Memoria Paul Bonenfant, 1899-1965,” 496. Furthermore, Gilissen does not mention that Bonenfant founded the Belgian Society for the Study of the History of Hospitals only two years before his death.
Belgium, as well as a “pioneering stud[y] of the Jesuits in the Low Countries,” which won him great recognition.\(^{38}\)

Perhaps Bonenfant’s greatest achievement, however, was the recreation of a cartulary that had previously been destroyed. In 1953 Paul Bonenfant recreated the cartulary\(^{39}\) of extant documents pertaining to the hospital of Saint John in Brussels.\(^{40}\)

The *Cartulaire de l’Hôpital Saint-Jean de Bruxelles* is a product of the Académie Royale des Sciences, des Lettres et des Beaux-Arts de Belgique and the Commission Royale d’Histoire. Written in French, it begins with a fifty-one page introduction,\(^{41}\) which includes the state of the archives of the hospital at that time, a description of the method Bonenfant used to reconstruct the cartulary, the locations and archive collections of the documents he used to complete the cartulary, lists and categories of those mentioned in the documents or those creating the documents (such as lay, ecclesiastical, and undetermined), the dates of the issuing of the documents, the language of the documents,

\(^{38}\) Lyon, “Review of *Hôpitaux et bienfaisance publique*,” 270.

\(^{39}\) There have been a few useful reviews on the cartulary despite its little known existence. Two of the reviews include reviews by Bryce D. Lyon and Charles Johnson. Lyon, “Review of *Cartulaire de l’Hôpital Saint-Jean*, 499-500; and Johnson, “Review of *Cartulaire de l’Hôpital Saint-Jean*, 625-626. In addition to the review of the cartulary, Lyon notes that Bonenfant was an accomplished archivist, who [Bonenfant], before publishing this collection, produced a number of books and articles on charitable institutions and services that focused on Belgium before the French Revolution. Johnson’s review is not as good as Lyon’s. In fact, while one would not immediately pick up on the problem, Johnson may have made an error in noting the dates of one of the charters that he sites. Johnson comments that “a grant of Henry I, duke of Brabant, of 1295, exempting old men who have returned to the hospital from taxation and military service, appears to indicate that his hospital also was originally an almshouse.” While he is correct in his assertion, the date should be 1195.

\(^{40}\) In fact, it is a recreation of a previous cartulary titled, *Boeck metten Hare*. The issuances were copied into the cartulary in 1589, and Bonenfant’s purpose was to recreate the cartulary up until 1300. Bonenfant provided in the first annex of the cartulary a table of the charters and their corresponding position in the *Boeck metten Hare*. See *Cartulaire de l’Hôpital Saint-Jean*, XXXII, 335-340.

\(^{41}\) The introduction to the cartulary appears in a work of collected articles published after Bonenfant’s death. The article in the collection, titled “Origines de l’Hôpital Saint-Jean. Son Importance” is an exact copy. See Bonenfant, *D’Histoire des Hôpitaux*, 57-98. In addition, the study is in French and is not widely available to English-speaking scholars. Also, since the article in the collection published after Bonenfant’s death also details the history exactly, I will use the two interchangeable. See, *Cartulaire de l’Hôpital Saint-Jean*; and Bonenfant, *D Histoire des Hôpitaux*. 
and finally some brief details concerning the creation of the edition of the cartulary.\footnote{Cartulaire de l’Hôpital Saint-Jean, VII.} Careful and complete footnotes document this information. For example, he located a mention of the foundation of the hospital in the works of Jacques de Vitry. In a footnote, the volume not only provides the citation, but also the text of the original document that chronicles the founding of the hospital. Another benefit of the source is its detailed indices.\footnote{Cartulaire de l’Hôpital Saint-Jean, SJ 167, pps. 212-213. Also, CPAS, SJ 46 fol. 26.}

While the cartulary itself is a remarkable work that brings together over one-hundred years of history of one hospital, outside of basic introduction to the documents the cartulary moves little beyond description of the hospital or the people mentioned. Bonenfant, with the exception of the brief introduction on the hospital and its importance, did not comment extensively on the documents or their authors.\footnote{This is stated with some reservation. Bonenfant was an extraordinary archivist and historian. All the documents in the cartulary are described to some extent. In addition, Bonenfant included several footnotes on each document, many of which provide a basic outline of the donors or participants. For example, he may provide information about the individual witnesses, who they were and what their status was in society. He also provided references in regards to the people mentioned and where they can be located in other sources. Thus, Bonenfant’s work is excellent for what it is and does in terms of locating people during a some-what tenuous time, but it does not contextualize the documents or place them in a larger history.} There is some effort to place this hospital in its social context by identifying those who were involved by name and location in society. There is, however, little historical context surrounding the documents and the people involved in such an important hospital. This should not come as a surprise, though, since the purpose of a cartulary is not to provide context.

Despite the importance that Bonenfant saw in the creation of the \textit{Cartulary}, J. Gilissen only mentions one of Bonenfant’s works that was related to the hospital of Saint
John: an article titled, “Saint-Jean de Bruxelles ou Saint-Médard de Soissons.” Gilissen does not even mention the Cartulary, which was reconstructed during Bonenfant’s thirty-plus year employment at the archives de l’Assistance publique de Bruxelles. Indeed, although he notes the publication of the collection of Bonenfant’s work after his death, Gilissen does not allude to Bonenfant’s work on Saint John.

Paul Evrard, Bonenfant’s student, used the same archives at the then archives de l’Assistance publique de Bruxelles (now CPAS) at which Bonenfant worked to produce his own study. Evrard’s work was part of his unpublished and unfinished thesis, which fell to the wayside after Bonenfant died. Titled, “Formation, organization générale et état du domaine rural de l’hôpital Saint-Jean au Moyen-Âge, the thesis focused specifically on the fonds de l’Hôpital Saint Jean, particularly fonds SJ 2, SJ 10, SJ 11, SJ 17, SJ 18, SJ 19, SJ 20, SJ 34, SJ 39, SJ 49, SJ 50, SJ 52, SJ 53, and SJ 54. While some of these fonds do contain documents from the high and late Middle Ages, the majority of the fonds hold documents from the seventeenth and eighteenth centuries. The documents were employed to reconstruct the holdings of Saint John’s hospital during the fourteenth

46 These works might have been included in the short paragraph where Gilissen identified that Bonenfant also composed several works that were centered specifically on Belgium history and on the history of urban institutions, of which the hospital of Saint John’s hospital could certainly be incorporated. Furthermore, many of the publications not identified were works on the urban history of Brussels, which may have “matched that of Guillaume Des Marez,” perhaps the greatest archivist Brussels has ever seen. While one cannot fault Gilissen for touting Bonenfant’s strengths in terms of legal history, especially since this memorial appeared in a legal history journal, one has to wonder why someone who was important not only to the study of hospitals and charity, but also to the study of the history of Belgium, has gone largely unnoticed in the world outside of Belgium and Brussels. Even more so, one has to wonder why the medieval hospital of Saint John in Brussels has gone even more unnoticed. See Bonenfant, Saint-Jean de Bruxelles ou Saint-Médard de Soissons?. Regarding the quotation, see Lyon, “Review of Hôpitaux et bienfaisance publique,” 270. Marez’s best known work is probably an illustrated guide on the city of Brussels. See des Marez, Guide Illustré de Bruxelles, Monuments Civil et Religieux.
47 Evrard, “Formation, organization generale et etat du domaine rural,” IV.
century. In working on the hospital, Evrard had hoped to contribute to Belgian history by adding to Ph. Godding’s work: *Actes relatifs au Droit régissant la propriété foncière à Bruxelles au moyen âge.* This work, being of limited scope and geography, prompted Evrard’s desire to expand Godding’s views by offering work that analyzed and demonstrated the vast territorial holdings of the hospital of Saint John from the later Middle Ages into the early Modern period.

The first pages of Evrard’s work outline the history of Saint John’s, which Evrard probably gathered from Bonenfant’s work. The high medieval history of the hospital in Evrard’s introduction is limited to only a few pages, and in a work on the hospital in general, devotion to the early history of the hospital is summed up in nine pages. This is mostly because Evrard was concerned neither with the contextual history of the hospital in association with some of its earliest patrons nor its donors and staff, but rather with the demographic and political interactions between the two. In addition, a lengthy summary was simply not a necessity for his study.

Evrard noted that the demographic situation in Brussels at the end of the twelfth century allowed a charitable confraternity to form. He also determines that three hospitals had preceded Saint John’s hospital. Similar to Bonenfant, but perhaps in more understandable terminology, Evrard explains that originally, the hospital was a donation as “l’hôpital Saint-Jacques aux Hospitallers de Saint-Jean de Jérusalem.” Only later did it lose its character in relation to the Hospitallers. Evrard then moves forward to describe

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48 Evrard, “Formation, organisation générale et état du domaine rural.”
49 Ibid., 1.
50 Ibid.
the founding of the hospital, which was created by a group of priests, clerics, and bourgeois of Brussels. He explains that the majority in the group of the bourgeois *(sic.)* very rarely or hardly ever—*ne guère*—responded to the needs for which the original confraternal group was founded.\(^{51}\) While this dissertation owes much credit to the work of Evrard and while it agrees on most levels with Evrard, it is upon this point that this dissertation and Evrard’s thesis diverge. Based on the political and social environment at the time, we can be certain to some degree that many of these members were indeed concerned with the social and charitable mission upon which the group was founded.

While donors may not have been principally worried about the poor, while the donors may have in fact been looking to political aggrandizement, and while they may have been engaging in efforts to save their own souls, to dismiss lay donors as not being concerned for charity is misleading. If nothing else, these men and women were concerned for their own souls and providing and founding a confraternity was a way to receive absolution for their sins.

After outlining a donation by the duke of Brabant in 1195 and the reception of the statutes in 1211, Evrard then describes how Innocent III (3 August 1207) placed the hospital under papal protection. It was at this point that the organization grew to support 13 people, 3 brothers and 10 sisters.\(^{52}\) Little by little, the community passed from one that was dominated by the sisters to one that was dominated by the *maîtresse ou prieure*.\(^{53}\) Evrard next presents a list of the documents that name certain brothers related

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\(^{51}\) Ibid.
\(^{52}\) Ibid., 2.
\(^{53}\) Ibid., 3.
to the hospital in the fourteenth century.\textsuperscript{54} Because of its focus, his study neglects an enduring history of women aside from the sisters who were involved in this hospital.\textsuperscript{55}

There were several women, \textit{Beguines}, widows, wives, mothers, daughters, granddaughters, and more, who either participated directly as sisters or indirectly as donors.

Evrard adds that the transition of the thirteenth century into the fourteenth saw general increase in the temporal inheritance or patrimony of the hospital, which required a specialization of functions. By this point, the masters or prosecutors only really appeared in acts related to \textit{“droits réels”} or \textit{“real laws,”} or \textit{“rem laws.”}\textsuperscript{56} He even includes a chronology of the mentions of the hospital masters and \textit{procureurs} in the fourteenth century.\textsuperscript{57} At the beginning of the fourteenth century masters of the community coexisted, and the masters were in charge of the temporal affairs. These members, he notes, were appointed by the bishop of Cambrai, who in essence assured the increase and later apex of temporal administration.\textsuperscript{58}

On several occasions, the bishop of Cambrai did intervene in hospital affairs, which helped to develop the hospital both physically and administratively. This intervention included granting of the hospital’s first statutes, and a case where the bishop intervened in the transfer of \textit{dîmes} of the hospital to confirm the concession of

\textsuperscript{54} Ibid., 2.
\textsuperscript{55} See chapters seven and nine for more elucidation on the topic.
\textsuperscript{56} \textit{Rem} laws do not grant or guarantee personal rights, but rather are laws that allow the holder of the property the right of utility. Evrard, “Formation, organization generale et etat du domaine rural,” 3.
\textsuperscript{57} Evrard, “Formation, organization générale et état du domaine rural,” 4.
\textsuperscript{58} Ibid.,” 5.
indulgences collected.\textsuperscript{59} Without providing much detail, Evrard makes similar comments about the intervention of several popes and their roles in the rise of the hospital.\textsuperscript{60}

After commenting on the roles of religious figures in the aggrandizement of the hospital and its political and territorial claims, Evrard turns briefly to the role of the territorial princes, specifically the duke of Brabant, in the rise of the hospital. Evrard mentions the few documents that relate specially to the dukes and then moves on to his final comments. He expresses that the priests, the \textit{bourgeois (sic.)} and the territorial princes were the three principal authorities who were credited with the origin of the hospital and its rise to fame and power. While this is correct, focus on these three groups neglects the middling nobles, merchants, commoners (i.e. blacksmiths and bakers), and women, whom we shall see were intimately connected with the function of the hospital in the city.

While Evrard would go on to use some of the twelfth, thirteenth and fourteenth century documents from the hospital to show and reconstruct the formation of the hospital’s considerable domain,\textsuperscript{61} the focus of the thesis itself was on the large holdings of the hospital, the \textit{dîmes}, most of which only developed in the fourteenth century. While he was able to show the increase in lands and power via these three large groups from the

\begin{itemize}
\item \textsuperscript{59} Ibid.
\item \textsuperscript{60} Evrard, “Formation, organization générale et état du domaine rural,” 5-6.
\item \textsuperscript{61} The domains that Evrard reconstructed are as follows: Bodeghem, Tournepe, Pepinghen, Ransfoert, Ter Vleest, and Lovenberg. In the final part of the thesis he examines the domains after having reconstructed them. Evrard divides the lands into two groups in the fourteenth century: those on the right banks of the Senne and those on the left banks. While most of what Evrard finds has little bearing on this work, it is important to note that his discoveries were profound in terms of identifying the size of the holdings of the hospital of Saint John. By the fourteenth century its properties were some of the greatest, making the hospital perhaps one of the most powerful ‘feudal’ lords in the region. While most of the holdings were between 1 and 10 hectares, one holding was as large as 95 hectares and several were between 40 and 80 hectares (one hectares is approximately 2.471 acres and 107,639 square feet). For more on this information see Evrard, “Formation, organization générale et état du domaine rural,” legende.
\end{itemize}
foundation of the hospital onward, he provides little sense of who these people were or what it meant for one of them to provide a donation to the hospital. Evrard cannot be faulted for not addressing these questions, and his initial findings pertaining to later centuries of the hospital set the stage for an understanding of the events and people in the twelfth and thirteenth centuries. This examination will begin where Evrard left off.

In addition to Evard, Walter John Marx also composed a work that was influenced by the writings of Bonenfant. As a study of the municipal hospital in Louvain, Marx’s work provides a point of comparison for work on the hospital of Saint John. In 1936, Marx claimed that the study of “medieval charity has been strangely neglected by American scholars.”62 This lack was also evident in Europe until the works of Michel Mollat and his followers. In addition, Marx cites Lallemand’s *Histoire de la Charité* (Paris, 1906) and Rotha Mary Clay’s mid-century work as those that have tried to fill the gaps of missing scholarship on charity in the Middle Ages. Yet, nearly seventy-five years later, Marx’s statement about the study of charity is still relatively true. Although some inroads have been made, charity is still an infant topic in the United States. While Marx commented on the state of charitable studies in the US, his disdain was probably more directed toward studies of charity in Belgium, which were also not as prevalent in historical discussions as they could have been.

Thus, Marx set out in 1936 to write a synthesis of Belgian charity “as complete in scope as Lallemand’s work but stressing particularly the historical development of

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charity rather than its actual organization at any stated period.” He explained, however, that “contrary to the advice of Professor Bonenfant, the leading Belgian authority on medieval charity, [he had] attempted to carry out this original purpose only to discover after much lost time [Bonenfant] was correct in insisting that such a study was impossible.” Without a “whole series of good monographs dealing with separate institutions in the different towns of Belgium,” hence, the creation of the modern-edition of the cartulary of Saint John’s hospital in Brussels.

While such a synthesis of this very type had been completed by Alberdingk-Thijm in 1883 (*De Gestichten van Liefdadigheid in Belgie*), it was not sufficient, especially since it was “based partly on printed documents but mainly on monographs dealing with the history of local institutions and on general town histories written for the most part around the middle of the last century.” Essentially, it was out of date and full of secondary sources of “doubtful value,” and it may have also have been full of myths and errors. Instead of pursuing the sources Alberdingk-Thijm chose, Marx argues that we need to begin with the secondary sources, because it is “obviously impossible to examine the archival materials presented in dozens of Belgian towns, materials which for the most part have not yet been arranged systematically and inventoried to facilitate research.”

With the advice of Bonenfant and with the lesson of Alberdingk-Thijm taken, Marx composed a monograph on charity in Louvain, because there the archives had

63 Ibid.  
64 Ibid.  
65 Ibid., viii.  
66 Ibid., vii-viii.  
67 Ibid., viii.  
68 Ibid.
already been systematically catalogued. To compare his findings to other towns, he relied on secondary sources, especially Bonenfant’s, which thus make this study important for understanding Saint John’s hospital. The overall purpose of the study quickly became “to trace the historical development of charity in medieval Louvain.”

Before, however, settling on medieval Louvain, Marx had to consider the history of the Low Countries and medieval Louvain.

Similarly to Brussels, the area around Louvain had been agricultural and the people had been manorial. But town life was already appearing in the twelfth century: “the town was walled with sod palisades […], and by the end of the same century, as in the case of Brussels, [the town] exchanged these for walls of stone.” Walls equaled protection, which meant that more people could faithfully locate within the town. How many, however, choose Louvain as their home is difficult to discern, since, “as in the case of most medieval cities, it is impossible to give an accurate estimate of the population of Louvain during the major part of the Middle Ages.”

In addition to rising populations, the growth of towns also spurred the rise of a new class of people, which Marx calls the “proletariat” and the “free laboring class.” The hierarchy of peoples in Louvain was also determined by a classification into two groups: les grands and les petits, or the rich and the poor. The dukes were generally supportive of the patrician ruling class (les grands), but they also tried to break their power at other times.

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69 Ibid., xi.
70 Ibid., 16-17.
71 Ibid.
72 Ibid., 1.
73 Ibid., 17.
74 Ibid., 19.
With the rise of a new class oriented to trade and urban business, “the economic organization of the town worked remarkably well in normal times.”\textsuperscript{75} It was, however, interrupted by war, famine, flood, fire, plague, etc., many of which also affected Brussels. While Louvain was marked by floods and famine, the area did resist war thanks to the dukes of Brabant,\textsuperscript{76} which was also the case in Brussels. Marx believes that the recovery of Louvain from these multiple disasters, from war and famine, from fire, plague, and inundation, would have been impossible without a system of private and public relief for the victims. Although cash savings were lacking among the individuals of the working class and even the middle class, we have seen that the medieval burgher [which he defines as “every citizen in the town, wealthy merchant as well as humble craftsman”] lived in fairly easy circumstances. It was from his surplus wealth that the organization of charity in medieval Louvain was financed.\textsuperscript{77} Louvain’s recovery and the prosperity of trade also owed much to the fact that the city, like Brussels, was situated on the important Bruges-Cologne trade route.\textsuperscript{78} In addition, the town grew up around the cloth trade. The rise of new classes, increased trade, and a heightened awareness of those in need all allowed Louvain to grow into a profitable and substantial medieval city.

With the basis of town life in place, Louvain eventually grew to support a town government. Marx explains that “Louvain was ruled by a mayor, the court whose members were known as the scabini, and a council composed of the scabini supplemented for judicial and administrate purposes by new members called jurati, aided by the merchant gild or cloth gild.”\textsuperscript{79} Like Brussels, “the scabini were appointed by the

\begin{footnotes}
\textsuperscript{75} Ibid., 4.
\textsuperscript{76} Ibid., 6.
\textsuperscript{77} Ibid., 6-7.
\textsuperscript{78} Ibid., 10.
\textsuperscript{79} Ibid., 11-12.
\end{footnotes}
duke from among the burghers of the town.”

There was no popular government in Louvain, and eventually the *scabini* became town functionaries; only later did the burghers actually intervene in the nomination of the *scabini.* While this system was similar to that of Brussels, other aspects of the town’s organization diverged, especially in regards to the mayor: “the special representative of the court (the count soon became the Duke of Brabant) was the *villicus* or mayor. He presided over the court of the *scabini,* originally a purely feudal court, which short time developed into the supreme tribunal of the town.”

The formation of town life set the stage for later charitable evolutions—“the poor were aided by their relatives and friends, animated by a feeling of solidarity and by the teachings of Christ, while a certain amount of help was given by the chapter of the church of Peter.” While charitable gifts to the poor and sick had been initially headed up by local monasteries and the local church, eventually “lay proprietors of the parish began to take part in the administration of the revenues of the *matricula* and gradually confiscated them to their own profit. Before the tenth century, two-thirds of the tithes, that is, the portions meant for the relief of the poor and for the support of the church, had passed into the hands of the lay proprietors.” Slowly, the old system of poor relief disappeared completely.

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80 Ibid., 12.
81 Ibid., 15-16.
82 Ibid., 11-12.
83 Ibid., 20.
84 Ibid., 21.
85 Ibid.
While charity increased after the tenth century in Louvain, the municipal hospital begins to appear in the towns of Western Europe during the second half of the twelfth century with real development beginning after the thirteenth.\footnote{Ibid., 25. Marx takes this information from Reicke, but the information is also supported by Bonenfant findings.} Similarly to the rise of charitable gifts, “the origin of this hospital [the municipal institution] can be traced in the growing consciousness in each community of its own personality.”\footnote{Ibid., 25.} Whereas the laity did help to fund and maintain hospitals, municipal hospitals were not necessarily lay hospitals. Rather, the “real origin of the hospitals of the Middle Ages lies in the community spirit of the time combined with a fervent piety, with an apparently sincere desire to help one’s fellow-man, and must be confessed, in a fear of the hereafter. Even when hospitals had passed into the hands of the town authorities, these institutions were not necessarily secularized.”\footnote{Ibid., 25-26.}

The hospital of Louvain was founded in 1080, which is described in a document written between 1131 and 1140, approximately the same time at which a\textit{faux} charter from Saint John’s hospital in Brussels was supposedly composed. The hospital in Louvain was founded by a Brother Heryward, as well as citizens of the town, similar again to Saint John’s. The hospital would go on to receive “many important donations from the nobles and burghers of the town. These gifts consisted mainly of landed properties in Louvain and the neighborhood of the town, but it would seem that the hospital also received certain gifts in the form of money.”\footnote{Ibid., 27.} Marx explains, however, that “the motive behind this generosity on the part of the people of Louvain, while religious,
was not altogether altruistic for the donations were made for the ‘salvation of their souls’. This was even true of Duke Henry and his father.

Like Saint John’s, little is known about the hospital of Louvain and its organization during the thirteenth century. By the end of thirteenth century, it had twenty beds, and we know that “the direct administration was in the hands of a Mother Superior. The external affairs of the hospital, particularly the administration of its landed property, were in the hands of two trustees. They were laymen and by a charter of John I, Duke of Brabant (1261-1294), given in 1282, the sisters of the hospital were granted the privilege of electing them.” Both Marx and Bonenfant agreed that the granting of the ability to the sisters to elect the trustees was exceptional. Also similar to Saint John’s hospital was the fact that the hospital of Louvain was “an autonomous institution in the sense of being able to possess and inherit property, and in having a distinct administration presided over by two trustees, with a mother superior in direct charge.” The brothers and sisters of the hospital in Louvain followed a Rule based on that of Saint Augustine. Although the brothers and sisters staffed the hospital, the institution was under the protection of the duke, the authority of the Bishop of Liège and related to the church of St. Peter. Outside of the authority of the Bishop of Liège, Saint John’s fell under a similar jurisdiction. The difference, however, between the two was in the creation of offices for laymen. The hospital of Saint John’s temporal affairs were overseen by “four trustees, pious laymen appointed by the Bishop of Cambray, while the trustees of the

90 Ibid.
91 Ibid., 31.
92 Ibid.
93 Ibid., 33-34.
94 Ibid.
The hospital of Louvain were probably appointed by the duke until 1282 when they were elected by the sisters."

The institutions in Louvain and Brussels were also alike in their composition and mission. The hospital in Louvain was granted a chapel in 1222 and Saint John’s one in 1226. Saint John’s received its first cemetery in 1237, whereas the hospital of Louvain was granted a cemetery in 1260. Saint John’s received its statutes in 1211 under the Bishop of Cambrai. While a priest was named in 1211 at Saint John’s, there was no mention of a priest at Louvain. One, however, must have been assigned with the construction of its chapel. At Louvain, all that is known is that the hospital was established for the relief of the poor in the town, but there is reason to believe that the regulations of the hospital were quite similar to those of St. John’s of Brussels. This latter institution was reserved for those poor who were unable to move about and beg from door to door, for pregnant women who were without shelter, and finally, for foundlings, though all of these last were not admitted for fear of encouraging the abandonment of newborn infants.

While there were certainly other similarities and differences between the hospitals of Brussels and Louvain, the comparisons will have to wait for later chapters.

The works of Paul Bonenfant and his followers are a starting point for a history on the hospital of Saint John. There are, however, few works that examine the hospital in its medieval context and only a limited examination of the post-medieval hospital of Saint John in context. Perhaps the best known and most recent is the work of Jaak Ockele: *De gasthuiszusters en hun ziekenzorg in het aartsbisdom Mechelen in de 17de*

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95 Ibid., 36.
96 Ibid., 37.
97 Ibid., 35.
Ockeley focused on nurses and sisters in monastic congregations and in hospitals, and the work takes into consideration the nuns and nurses at the hospital of Saint John during the above-listed periods. While we are fortunate to have the documentation about the sisters during these periods, such documentation simply did not exist for the twelfth and thirteenth century. Thus, Ockeley’s contributions to a historical understanding of the hospital are limited to the early modern and modern age. Ockeley also produced a short history on the hospital, including a small section on the Middle Ages, in the larger work *Momenten uit de geschiedenis van Brussel*. The article included, titled “Ziekenzorg te Brussel van de 12de tot de 19de eeuw, inzonderheid in het Sint-Jansgasthuisop-de-Poel,” briefly surveys the history of the hospital but only in two facing pages, largely consisting of information referenced from Bonenfant.

Bonenfant’s wife, A. M. Bonenfant-Feytmans, published an article titled “La reception des maladies dans les hôpitaux de Bruxelles avant 1914.” Brief mentions of the hospital of Saint John, the *Cartulary*, and Bonenfant’s work at the *archives de

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100 Jaak Ockeley, “Ziekenzorg te Brussel van de 12de tot de 19de eeuw, inzonderheid in het Sint-Jansgasthuisop-de-Poel” in *Momenten uit de geschiedenis van Brussel* (Centrum Brabantse Geschiedenis: Brussel: 2000), especially 143-146.

101 A. M. Bonenfant-Feytmans, “La reception des maladies dans les hôpitaux de Bruxelles avant 1914,” Notice historique (Archiviste de la Commission d’Assittance publique de Bruxelles: Bruxelles, 1963), especially 37-39. In a recent trip CPAS, I visited with the current archivist, David Guilardian. Mr. Guilardian informed me that until most recently A. M. Bonenfant-Feytmans still maintained contact with the archive and with projects relating to the topics in which both her and her husband had been interested. An unfortunate fall has limited her mobility and communication.
l’Assistance publique de Bruxelles all find their way into her work, although again, the scope of the work and the details concerning the hospital of Saint John in the Middle Ages are limited. There is only a brief mention of the institution and little to no details are provided about the building, its staff, its donors, or the recipients of the care of the hospital during the Middle Ages.

The only other works that mention the hospital are those that do so in passing. Sometimes brief allusions to the hospital can be found in newspaper and journal clippings. A local journalist, Roel Jacobs, published a piece in La Capitale in 2003 titled “Plutôt vaste, l’ancien hospital Saint-Jean.” The article was in honor of the 750th anniversary of a particular document and event regarding the hospital of Saint John. Fifty years after the publication of the cartulary by Paul Bonenfant, Jacobs repeats Bonenfant’s words as they appeared in the cartulary regarding the day and its events. On that day 750 years ago the Abbot of the monastery of Saint-Sépulcre of Cambrai, the patron of the church of Notre-Dame, and the presbytery of their church made an agreement (accord) with the Mistress of the brothers and the sisters of the hospital to “exercice des droits paroissiaux sur les personnes [qui] habitant la partie de la paroisse de la Chapelle [que est] comprise dans l’enclos de l’hôpital.”

Jacobs’ use of the document is rather misleading. He was drawing on the citation to talk about funeral rights that the hospital would receive, which would split up the jurisdiction of the hospital between the first and second city walls. While the hospital

102 Jacobs, “Plutôt vaste, l’ancien hospital Saint-Jean.”
103 The sentence comes from Bonenfant, Cartulaire de l’Hôpital Saint-Jean, 123. The brackets indicate the two places where Jacobs changed the wording slightly. Otherwise, it is a word-for-word translation.
itself would remain within the first city walls, the church of Notre-Dame would be
outside those walls. Jacobs then uses these facts to note that this agreement, in addition
to the basic facts on the establishment of the church of Notre-Dame, has led some
specialists to consider and debate when the second city wall was constructed. Any
remaining history on the medieval hospital of Saint John is overlooked to highlight the
hospital in 1846 when it was destroyed after falling into disrepair. He returns only briefly
at the end of the article to note that the hospital was one of the oldest to receive statutes
from the bishop of Cambrai, and that the contemporary Jacques de Vitry\textsuperscript{104} and the great
Brussels historians Alexandre Henne and Alphonse Wauters\textsuperscript{105} all cited the hospital.

Some contemporary accounts from the seventeenth and eighteenth century also
exist. Whereas the hospital itself lacks significant study, the chapel and church that were
attached to the hospital and allowed the hospital to flourish, have merited more attention.
It is not surprising that the hospital chapel has received so much consideration whereas
the hospital has not received as much.\textsuperscript{106} Even still, most studies on the church begin as
early as the seventeenth century but promptly end with the works of Bonenfant in the
twentieth century. Many, if not all, neglect the medieval foundations of the chapel.
Included in these works are a \textit{Plan de l’Hôpital et de l’église} by De Bruyn in 1708,\textsuperscript{107} a
1808 \textit{Plan terrier de l’Hôpital Saint-Jean}, and a 1836 \textit{Plan de l’Hôpital Saint-Jean}.

Exterior views of the hospital include \textit{Souvenirs de l’Hôpital Saint-Jean} from 1845 in

\textsuperscript{104} See John Frederick Hinnebusch, \textit{The Historia Occidentalis of Jacques de Vitry: A Critical Edition}
(Fribourg: The University Press, 1972) and R.B.C. Huygens, \textit{Lettres de Jacques de Vitry: Edition Critique}
\textsuperscript{105} Henne et Wauters, \textit{Histoire de la Ville de Bruxelles}.
\textsuperscript{106} As mentioned earlier, the legal journal memorial neglected the hospital itself, but referenced
Bonenfant’s work on the hospital chapel.
\textsuperscript{107} See SJ 1, CPAS.
pencil, an 1843 lithograph by F. Stroobant titled *L’église Saint-Jean à Bruxelles*, a reproduction drawing by J. Van Moer titled *Ancien Hôpital Saint-Jean*, a *Vue intérieure de l’Hôpital Saint-Jean* by P. Lauters, and an anonymous painting conserved at the Hôtel de Ville in Brussels of the *Congrégation des Hopitalières Augustines de Bruxelles*.108

There are also several ‘travel journals’ that note the hospital in their contents.109 The mentions in these works are normally brief, incomplete, and sometimes inaccurate. They also often lack full publication information. In a 1782 work titled *Description de la ville de Bruxelles*, Saint John’s hospital is described as being located on the *rue de l’Hôpital*. The author explains that the hospital was established and endowed by Godfrey II.110 More recent sources, however, suggest that Godfrey III’s son, Henry I was actually responsible for the foundation and establishment. The journal also notes that the hospital was consecrated in 1130 by Pope Innocent II, which is not entirely true. Several historians and archivists have shown the charter relating to the 1130 consecration to be “*faux.*”111 Not only that, the date given on the charter is 1131 and not 1130.112 Despite these inaccuracies, the account explains that the monks were under the *Rule* of Saint

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108 The remaining article is more of an art history, and it surveys the plan and the design. In Thibaut de Maisières, “L’ancienne église Saint-Jean-au-Marais à Bruxelles,” from the collected material of CPAS, Brussels, Belgium. Also, see map 3 of the early modern hospital of Saint John, which was based on the medieval plan.

109 While all of these accounts come from the early modern and modern eras, it has been widely recognized and accepted that the hospital of Saint John and its adjoining chapel changed little over the years. In 1695 the hospital was destroyed by the marshal of Villeroi, but it was rebuilt similar to its medieval counterpart. It was this medieval form that survived until it fell into disrepair in the modern era. Thus, the accounts, no matter how brief, incomplete, or late in time, are still somewhat valid for understanding the medieval hospital and chapel.

110 I have found no source that names Godfrey II as the founder.

111 For more on why the document is considered false, see Bonenfant, *Saint-Jean de Bruxelles ou Saint-Médard de Soissons?*. For the charter, see *Cartulaire de l’Hôpital Saint-Jean*, 3.

112 See Cartulary, SJ 1, pps. 3-5. CPAS, SJ 4, fol. 12.
Augustine and notes that the church of the hospital also held several copies of Rubens paintings.\textsuperscript{113}

Another journal cites the church, hospital, and convent all together as St. Jean-Baptiste \textit{au-marais}. It places the founding in 1131 and lists the years 1131, 1201, 1211, 1580, and 1694 as important years to the hospital’s history.\textsuperscript{114} A final journal describes the hospital as being “\textit{plus grand et le plus beau de la Ville}.”\textsuperscript{115} The journal notes that the bishop of Cambrai reconfirmed the statutes of the hospital in 1220. Again, there are problems as the journal attributes the founding to Henry I and also the consecration of an adjoining chapel under the name of Saint John by Innocent II in 1131.\textsuperscript{116}

Finally, the most recent account that takes the hospital of Saint John into consideration comes from a conference paper later developed into an article. David Kusman’s “Les hôpitaux et le crédit dans le duché de Brabant XIIIe-XVe siècles” examines the hospital of Saint John, along with several other regional Brabant hospitals, with an eye to the economic developments of the thirteenth and fourteenth centuries. The economic and demographic growth of the thirteenth and fourteenth centuries led to the large patrimonies that were financed by the various regional hospitals.\textsuperscript{117} Within this

\textsuperscript{113} See \textit{Description de la ville de Bruxelles} (1782), 13-14.
\textsuperscript{114} See M. Mann, \textit{Abrégé de l’histoire ecclésiastique civile et naturelle de la ville de Bruxelles, et de ses environs; avec la description de ce qui s’y trouve de plus remarquable, partie seconde} (Lemaire: Bruxelles, 1785), 16, 152, 154-5. Also, see previous descriptions of the hospital for the importance of these years.
\textsuperscript{115} G. Fricx, \textit{Description de la ville de Bruxelles} (Bruxelles, 1743), 97.
\textsuperscript{116} Ibid.
\textsuperscript{117} David Kusman “Les hôpitaux et le crédit dans le duché de Brabant XIIIe-XVe siècles,” in \textit{Institutions de l’assistance sociale en Lotharingie médiévale, Actes des 13\textsuperscript{e} Journées Lotharingiennes, Luxembourg, Octobre 2004}, M. Pauly éd., (Luxembourg, 2008), 355. The hospitals with which Kusman is concerned include Sainte-Elisabeth in Anvers, the grand hospital of Bois-le-Duc, the hospital of Saint John in Brussels, the leprosarium of Saint-Pierre in Brussels, the leprosarium of Terbank in Louvain, and the hospital of Notre-Dame of Malines. Kusman “Les hôpitaux et le crédit dans le duché de Brabant XIIIe-XVe siècles,” 358.
urban environment, hospitals became administrative machines, which were indispensable to the economic relations of towns. Seeing these developments, Kusman became concerned with hospitals enclosed in the commercial circuits of towns, as well as those integrated into regional economic networks.

Similarly to others, Kusman situates his study in the growth of the urban poor and sick and the efforts by the urban population, particularly the urban burgher class, the patricians, and the nobility, to cure the problems. Overall, Kusman shows on the basis of various hospitals, the possible hold that charitable institutions had on the commercial infrastructures and banks of the town that they accommodated. Before, however, detailing the financial operations of each hospital, Kusman examines the sources of credit for the various institutions. For Saint John’s hospital, Kusman traces the sources back to the initial creation of the confraternity of Saint-Esprit in 1186 and to the nobles and burgher citizens of Brussels. He also finds that between 1204 and 1229, the hospital of Saint John received the right of tonlieu, or a levied tax, which provided a source for credit for the charitable institution. Kusman provides later examples to the hospital of Saint John of the variety of operations that occurred in the rural outskirts of Brussels. It is from the several examples that he then questions whether the Brussels managers (the tenanciers) of Saint John’s hospital were not really the true agents of commercialization.

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118 Ibid., 356.
119 Ibid.
120 Ibid., 357.
121 Ibid., 359.
122 Ibid., 361.
123 Ibid., 363.
124 Ibid., 364-365.
of the products of the countryside. If he is correct, then there was a relationship of financial collaboration between the hospital and the magistrate of the town.

From this idea, Kusman turns to the examination of the finances of the hospitals in the study. In all the regions, the urban elite imposed quickly their management and co-management of medieval hospitals. To explain this imposition, Kusman looks at the mambours, provisors, and other lay members of the community, and suggests that confraternities, such as the original confraternity of Saint-Esprit, played the role of a bank in the urban community. This notion is augmented by the fact that many of the hospital were located in the proximity of urban commercial centers. Thus, thanks to their sources of credit that came in the institutions’ establishment, their location in the cities, their involvement in the charitable movements of the high Middle Ages, and their ties to the urban elite, Kusman concludes that the hospitals of Brabant were some of the best funded and endowed banks of the region.

Overall, the sources for the hospital of Saint John are few but valuable. Bonenfant and his student Evrard both carefully outlined certain elements of the hospital and its history, and Marx and Kusman suggested other avenues of exploration for the hospital of Saint John and its neighbors. While there is still work to be done, it is from their works that any study must begin. Beyond the works of Evrard, Bonenfant, Marx, and Kusman, the secondary sources for the hospital are limited to brief mentions and elaborations on only portions of the entire facility.

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125 Ibid., 366.
126 Ibid., 371.
127 Ibid.
128 Ibid., 376.
129 Ibid.
The Theoretical Background and Methodology

The history of Saint John’s hospital was not unlike its counterparts in the rest of the Medieval World. In fact, the hospital can be linked to other hospitals and monastic institutions. The commonalities among the religious organizations help to provide the basis for understanding the hospital of Saint John. For this understanding, I will examine the works of two well-known historians: Stephen D. White and Barbara Rosenwein, as well as the works of several others. The techniques of White and Rosenwein provide the cultural and social lens through which the hospital will be explored, while the other historians presented help to situate the hospital in its proper social, cultural, economic, and religious context.

In 1988 Stephen D. White wrote *Custom, Kinship and Gifts to Saints: The Laudatio Parentum in Western France, 1050-1150*. His work was part of a group of studies in legal history, and it was produced in association with the American Society for Legal History. In his preface White notes that he had planned on writing a “brief, narrowly focused study that would be securely located in the field of medieval legal history,” but gradually he realized that he “could make better sense of this subject by broadening and reconceptualizing [his] approach to it.”130 He indeed expanded his approach, and while he stayed true to many of the legal aspects of the study, he also considered the subject in relation to several other topics in the history of kinship and monasticism. His work, as well as the works of others, forms the theoretical basis for this study on the hospital of Saint John.

130 White, *Custom, Kinship, and Gifts to Saints*, xiii.
In the opening pages of the first chapter White provides a number of examples of grants by knights to monastic establishments. All acted with relatives.\textsuperscript{131} All the grants prove important in that “in making gifts of land with the approval of relatives, rather than acting unilaterally, these benefactors of Marmoutier were conforming to an established pattern of behavior found throughout France during the eleventh and twelfth centuries;”\textsuperscript{132} it is what White means by the phrase \textit{laudatio parentum}.\textsuperscript{133} Although throughout the work White refers to the acts as gifts of saints,\textsuperscript{134} the expression refers simply to the “act by which a person’s relatives (\textit{parentes}) gave their approval (\textit{laudatio}) to his or her conveyances of landed property.”\textsuperscript{135} The practice was not common in France until about the year 1000 and it died out around the year 1200.

The context for understanding White’s systemic study is straight-forward. In terms of the location and period in question the documents provide “rare glimpses of how, on certain occasions, medieval people acted together with their relatives as members of kinship groups, whose size, compositions, and structure are hardly ever revealed so clearly in other contemporary texts.”\textsuperscript{136} When an act is viewed in this context the practice of donation to an institution becomes more than simply a transfer of land or a family coming together to make a contribution.\textsuperscript{137} The actions and their results were

\textsuperscript{131} Ibid., 1.
\textsuperscript{132} Ibid.
\textsuperscript{133} That is a study about a specific area and a specific time; it can yield answers, but as White says, other research needs to happen as well to expand on the details and get a full idea of what was going on in terms of the \textit{laudatio parentum}. In addition, the \textit{laudatio parentum} seems fairly unique to this time and region of France, and thus, while we can draw some parallels, we are simply not going to find exactly the same situation in Brussels.
\textsuperscript{134} White, \textit{Custom, Kinship, and Gifts to Saints}, 2.
\textsuperscript{135} Ibid., 1.
\textsuperscript{136} Ibid., 2.
\textsuperscript{137} Ibid., 4.
what Max Weber called “status contracts,”” which he believed to be so encompassing that greater attention must be paid to the entire context in which the contracts were conveyed. As White demonstrated, this kind of study means moving away from a strictly legal or economic perspective. These notions are also based on the ideas of the English anthropologist E. E. Evans-Pritchard and the French ethnologist Marcel Mauss, and White calls the actions “total social movements or activities,” because they are “at the same time economic, juridical, moral, aesthetic, religious, mythological, and socio-morphological phenomena.”

From White’s discoveries and his methods one may draw many parallels to the hospital of Saint John and its associated donations, even though the hospital was located hundreds of miles away and established centuries later. Although the phrase laudatio parentum does not appear in the documents of Saint John, some of the practices made by the donors are still analogous, especially in terms of family function, family donations, social interaction, and female donations. The practice of laudatio parentum, like contracts in general, can reveal social ties, social networks, and social contracts. Given this context, the hospital of Saint John can be viewed in a manner similar to White’s study of laudatio parentum in Western France. The charters can indeed be read and understood from a sociological and cultural perspective, one that allows us to better

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138 Ibid. Weber has three views or approaches to law: The moral attitude toward law, dogmatic jurisprudence, and sociological understanding. Out of all three, it is really the sociological approach that concerns this study. For more information, see T. Kronman, Max Weber (Sanford: Sanford University Press, 1983), 8-14.
139 White, Custom, Kinship, and Gifts to Saints, 5.
140 Ibid., 4.
141 Ibid.
142 Ibid., 6.
understand the world in which the donors lived and the reasons for which they gave generously to this institution. It shows that there was a communal movement in Brussels at this time.

These notions are furthered when one looks to social ties and kinship. Kinship is one of the major factors in the laudatio parentum charters of White’s study, and it was certainly an issue that was present at the hospital of Saint John. About kinship relationships, White asks four questions: “First, what sorts of relatives belonged to these groups? Which kin appeared in them?” In his second question, White inquires, “What kinds of kin groups approved gifts to saints? Which one did so most often?” After identifying the groups and their actions when they came together, he then suggests that “we should try to discover whether any rule or principle specified which kin were supposed to give the laudatio or were at least eligible to do so.” This then leads to the final question: “What conclusions about kinship can we draw from the study of consenting groups.” White then isolates and identifies the relationships (between fathers, brothers, sisters, mothers, wives, etc.), all of which are discovered by examining a legal document within its social context. Similar processes can be used for the hospital of Saint John to identify basic social customs and practices. For example, in Brussels, as was in France, the unit of basic kinship relationship revolved around males. Yet, collectively, lay women alone account for nearly 25% of the donations with Saint

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143 Ibid., 86-7.
144 Ibid.
145 Ibid.
146 Ibid.
147 Ibid., 97.
148 See chapters seven and nine for an expanded and detailed explanation of the women involved.
John. Thus, there is something that can be said about the influence of women in Brussels in relationship to the hospital.\textsuperscript{149}

In addition, White’s work demonstrates how the study of donations can also be used to identify elements of medieval family life\textsuperscript{150} or even medieval society in general.\textsuperscript{151} White argues that increased percentages of charters indicate a multiplication in documents and hence an augmentation in “family solidarity.”\textsuperscript{152} During certain periods, there were indeed increases in percentages of charters that were issued by a particular family or group connected to the hospital of Saint John. The family of Guillaume of Ledebergh and the family of Arnoul of Meysse serve, along with several city aldermen and their families, were repeat donors to the hospital.

\textsuperscript{149} Some of the basic factors that may have contributed to a larger participation by women in Brabant and Low Countries area include the ratio of men to women and the overwhelming majority of Beguines in the location. See especially Walter Simons, Cities of Ladies: Beguine Communities in the Medieval Low Countries, 1200-1565 (Philadelphia: University of Pennsylvania Press, 2001). Also, we know, for example, that in the course of the twelfth and thirteenth century at least five issuances related to the hospital of Saint John came specifically from beguines or the local Beguinage. The names of the women and groups involved are as follows: Hedwige van der Maerct, beghina, the Infirmary of the Beguinage, begghinarum, of the Virgin and Margareta, the mistress of the infirmary, Ide Scattinne, beghina, and Marguerite of Uccl, begina. See CPAS, SJ 42 fol.19, CPAS, SJ 46 fol. 26, Bonenfant, Cartulaire de l’Hôpital Saint-Jean de Bruxelles, 240, 318-19.

\textsuperscript{150} It is important to note, as White does, that some things can be determined about the nature of the kin relationships in giving gifts. Not everything, however, can be deciphered, especially in the case of Saint John’s, of which we only have 54% of the extant documentation. In addition, charters can be narrowly written, in that they could just be telling us what a scribe thought (if composed by a scribe). The only way to really get at some of the intricate relations is to view the ceremonies since charters “rarely explain the significance of the rituals though which gifts to saints were made, and when they do so—usually in formulaic preambles—they may be presenting only a stereotyped view of transactions that other contemporaries interpreted differently.” See White, Custom, Kinship, and Gifts to Saints, 10-11.

\textsuperscript{151} White, Custom, Kinship, and Gifts to Saints, 8.

\textsuperscript{152} The basis for all the above claims lie in the works of Georges Duby, for the Middle Ages, Robert Fossier, who has “framed general hypotheses both about female status during different segments of this larger period and about the degree to which actual family practice conformed to medieval ecclesiastical doctrines holding that a married couple should be considered the core of every family,” and Marc Bloch who identified the practice “as a function of “economic solidarity.”” White, Custom, Kinship, and Gifts to Saints, 8. See also Marc Bloch, Feudal Society, L.A. Manyon, trans. (Chicago: University of Chicago Press, 1939, 1974); and Georges Duby, The Early Growth of the European Economy: Warriors and Peasants from the Seventh to the Twelfth Century (London: Weidenfeld & Nicolson, 1974).
The idea that one can understand family and kin relationship by examining legal documents has also been developed by Barbara Rosenwein, who completed a study for the monastery of Cluny. In her work, Rosenwein explores the foundation of the monastery of Cluny (910) and the changes that occurred to it later in the eleventh century. Most important to these evolutions was the shift from an amorphous to a tight patrilinear family identity and the rise of a monetary and market-oriented economy, the net effect of which was, “by the twelfth century, to tie people into new and tightly woven networks defined by their parish, their family lineages, their lords or retainers, and their economic roles.” To this we can also add a later identity associated with urban areas.

As a whole, Rosenwein claims that “Cluny was not simply affected by these movements but was itself part of them. […] Cluny] became a seigniorial lord, holding a monopoly of command over particular men and lands.” She goes on to argue that Cluny’s “new political and economic position had far-reaching consequences: on institutions of peace, on the ideology of the three orders, and, indeed, on the very ideas

154 Rosenwein, To be the Neighbor of Saint Peter, 10-11.
155 In order to understand these and other developments at Cluny, Rosenwein also takes into consideration the work of Marc Bloch. She examines his classification of the tenth and the eleventh centuries as the “first feudal age” in discussing medieval communities. Then, she turns to Pierre Duparc who in 1958 wrote that “community confraternities were “the basic cells of medieval society.”” See Pierre Duparc, “Confréries du Saint-Esprit et communautés d’habitants au moyen-âge,” Revue historique de droit français et étranger, 4th ser., 36 (1958): 349-67 at 349; published in English in Lordship and Community in Medieval Europe: Selected Readings, ed. Fredric L. Cheyette (New York: Holt, Rinehart and Winston, 1968), pp. 341-54. About the works, Rosenwein comments that “rather than exploring hierarchies of lords and vassals, such studies focus on the continuous ebb and flow of enmities and friendships and of community groups igniting and defusing quarrels.” As a result, historians have taken up new studies on the meaning of collective activities in medieval communities. In placing her study among these other studies, Rosenwein contends that “the questions that such historians pose are influenced by those put by anthropologists, particularly by legal anthropologists.” While most of these studies have focused on the early Middle Ages, Rosenwein’s included, a similar argument could be made for the High Middle Ages and for the hospital of Saint John. See Rosenwein, To be the Neighbor of Saint Peter, 6-7.
156 Rosenwein, To be the Neighbor of Saint Peter, 11.
about virtue that animated the monks.”157 The parallels between Rosenwein’s study of Cluny and this study on the hospital of Saint John emerge even in this brief contextualization. In identifying Cluny’s new relationships, Rosenwein recognizes that similar institutions were not immune to these changes. The networks into which people fell were not only identifiable via the hospital or monastery and the donations to it; they indeed both dictated and influenced the institution’s success. For the hospital of Saint John, family networks were important, but so also were economic networks and administrative networks, such as those tied to the local regional aldermen. More importantly, though, was the economic and political transition in society, especially the rise of the profit economy, the dissolution of the notion of the “three orders,” and the rise of middling nobles with new incomes.

The overwhelming success of the hospital of Saint John and of Cluny was only possible thanks to their donors, the majority of whom received their means to provide for the institutions thanks to social change. In terms of understanding the success of Cluny, Rosenwein argues that “the ideas and practices at Cluny were responses to its world. This is no doubt partly because Cluny, like other institutions, was dependent upon a public. Simply for its survival, Cluny needed donors.”158 Much of Cluny’s success came from the fact that Cluny was funded by a layman and not a religious man. This layman “stipulated what style of life Cluny was to have from the beginning. It was dependent on its benefactors, too, for the opportunity to spread its brand of monasticism

157 Ibid.
158 Ibid., xix.
to other houses.”  

Similarly, Saint John’s was largely funded by laymen, especially during the second half of the thirteenth century. Without support, both institutions would have failed, but with support, both institutions grew profoundly spreading ideas and practices throughout Europe.

Overall, though, the question that drives both Rosenwein’s study and this study is finding meaning behind the collective activities and gifts given to a medieval community. Rosenwein posits that the gifts of one donor may “serve as a window onto the social nature of land transactions with Cluny up to the mid-eleventh century,” similar to the arguments of White as explained previously. In this system, “giving and taking [became] social events in which relatives, associates, and neighbors participated.” And since everyone participated, the event displayed economic and family solidarity—it was truly a “family affair.” In order to understand the transaction, though, one must look not to

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159 Ibid.
161 Rosenwein, *To be the Neighbor of Saint Peter*, 51.
162 Ibid., 56.
163 Ibid., 75.
the monastery or the institution, but rather to the community involved. Members of the community, key family members, and neighbors thus dominated the events.

While this community building was certainly the case at Cluny, many of these same conclusions apply the hospital of Saint John. Indeed, from the duke to the local members of the community, there was a wide-range of people who gave donations to the hospital. The majority of them were key members of the local community. Some were clustered around a traditional family and others were clustered around a new, non-traditional family, such as those who had ties to neighborhood monasteries, such as Ninove, and those who were linked to the office of the aldermen. Often, the groups participated as a family giving to the hospital, which cared not only for pilgrims and travelers, but also for the sick in their community, or their extended family. For this reason, the donations tell us as much about the community and the social atmosphere of the time as they do about the hospital. If donors, traditional and non-traditional, single and joint, were indeed acting in the ways in which White and Rosenwein have described, the people and families of Brussels, at least in association with the hospital of Saint John, maintained either “community solidarity” or “family solidarity.” Donors of many backgrounds gave generously to see to the success of a hospital that might never serve them personally, and in doing so the donors found a common purpose in their donation.

Whereas White and Rosenwein provide the methodology for understanding patronage and donations to religious institutions, neither patrons nor donations materialize out of thin air. Other works need to be explored to better comprehend the

164 Ibid.
165 Ibid.
institution within its historical context. Another root of this particular study on the city of Brussels and the hospital of Saint John is grounded in the works of Charles Homer Haskins (1870-1937), particularly his 1927 groundbreaking work, *The Renaissance of the Twelfth Century*,\(^{166}\) which reshaped the course of medieval studies from the nineteenth century onward. Haskins, in opposition to earlier views espoused most famously by Jacob Burckhardt,\(^ {167}\) sought to demonstrate that the high Middle Ages and the Italian Renaissance were not that dissimilar, and indeed, from c. 1070 onward, periods of light, culture, and civilization could be found in the towns, cities, and even in the countryside of Europe. Haskins found evidence for these radical changes in the birth of towns, the rise of basic bureaucratic states, the creation of the Romanesque and the Gothic styles, the revival of Greek and Arabic studies via texts imported from the Crusades in the Holy Land and the *Reconquista* in Spain, the rise of Canon Law, and the birth of universities, scholasticism and vernacular literature.\(^ {168}\)

These claims shaped the way in which the Middles Ages would be viewed in the future; other historians could now follow in Haskins’ steps and break from the works of Burkhardt. Other scholars soon elaborated. Writing almost simultaneously with Haskins, Henri Pirenne, a Belgian historian, published *Medieval Cities: Their Origins and the Revival of Trade*.\(^ {169}\) At the heart of this work was the idea that from the wreckage of the Scandinavian invasions arose municipal centers. These centers ushered in the creation of a new merchant class. In addition, industry began to flourish, and eventually merchants

\(^{166}\) Haskins, *The Renaissance of the Twelfth Century*.


\(^{168}\) Haskins, *The Renaissance of the Twelfth Century*.

\(^{169}\) Pirenne, *Medieval Cities*.
formed guilds and confraternities, all of which vied for political autonomy and local self-government. Pirenne considered these creations to be the formation of municipal democracy and the basis of early modern European cities and municipal life, all of which demonstrated that people in the Middle Ages were also part of a ‘renaissance’.

By the 1960s, the trend to relight the Middle Ages had expanded to such a degree that art and religious historians also enlarged their foci concerning ‘renaissances.’ Erwin Panofsky brought new attention to the artist styles of the Middle Ages with *Renaissance and Renascences in Western Art*. In this study Panofsky posited that there was not one Renaissance, but that history was filled with various renaissances, including those that occurred in the Middle Ages. In the second half of the twentieth century some scholars, such as Giles Constable, have turned to religion and monasticism for evidence of a rebirth in the high Middle Ages. Some of Constable’s works include *Three Studies in Medieval Religious and Social Thought: The Interpretation of Mary and Martha*, *The Reformation of the Twelfth Century*, and an edited volume with Robert L. Benson titled, *Renaissance and Renewal in the Twelfth Century*. Constable saw that a monastic renaissance could be located within the confines of the high Middle Ages. Constable argued that in the early Middle Ages the dominant image of Christ was that of a superhero, which served as a model for the religious world. The twelfth century (beginning as early as 1070), however, witnessed a change to this model, as men and women began to imitate the humble and devote life of Jesus or the life of the apostles: the

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171 Subsequently, this turn to finding and classifying “renaissances” as opposed to one renaissance allowed other scholars to think in terms of other renaissances in history, such as a Carolingian Renaissance, the Ottonian Renaissance, and the Islamic Renaissance, just to name a few.
This change led to an evolution within the monastic orders, how they were defined and how they functioned. It became the debate between the inner and the outer and the divide between active and contemplative. Clearly, something had profoundly evolved in monastic life during this period.

A final example can be cited in Lester Little’s *Religious Poverty and the Profit Economy in Medieval Europe*. Although based on Marc Bloch’s idea of the ‘second feudal age,’ the work also considers the relationships in society c. 1000 that led to the commercial revolution, an idea that can be clearly traced back to the works of Haskins. Little saw a transition from a gift economy to a profit one. In this transition, the developments in the economy and in religion in the first millennium led to the creation of new orders, namely friars, and new situations in society, many of which led to paradoxical difficulties by the fourteenth century, such as the reconciliation of urban commercial life with the mendicant orders and the rise of some of the most profitable monastic organizations, such as the Cistercians, in a desire to escape the growth of urban commercial life. Despite the changes, the proof was clear: a vital profit economy spurred cultural and religious developments.

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172 While some of the imitations should not come as a surprise, such as poverty and religious devotion, others followed the model to the extent of voluntary crucifixions.

173 Little, *Religious Poverty and the Profit Economy*.

174 The above-brief survey of works that discuss the “Twelfth-Century Renaissance” is certainly not exhaustive. It does take into consideration a recent article in titled “The revolt of the medievalists”. Directions in recent research on the twelfth-century renaissance,” which considers first the studies on the twelfth century since Haskins in terms of individuality, rationality, and secularization. The article then questions what effect exactly the linguistic turn had on such studies. Some of the great benefits of such studies include interdisciplinary approaches, a turn to understand Islamic sources, and a quest to find the origin of events for which historians did not previously have answers. See Leidulf Melvea, “The revolt of the medievalists”. Directions in recent research on the twelfth-century renaissance,” *Journal of Medieval History*, Vol. 32, Iss. 3 (September 2006), 231-252.
Overall, the idea that the Middle Ages were dark, damp, and devoid of progress has certainly changed over the last century, and now many historians fully accept the idea of a “Twelfth-Century Renaissance.” In recent years, however, some historians are questioning whether the idea of a “Twelfth-Century Renaissance” remains valid. Indeed, in seeking to posit yet another ‘renaissance’ in the twelfth century, for the sake of demonstrating the value of a particular period or area, historians have created (visible or not) arbitrary categories, boundaries, and classes. The language of ‘constructed boundaries’ evokes a number of arguments and criticisms. Boundary construction can mean anything from actual demarcation of national lines between sovereign entities, to the invisible division between men and women, to the lines that mark change in the epochs of history. In forming these boundaries, are we not developing a social construction, placing upon one culture or another what we see as revolutionary, new, and/or inviting? Perhaps. And perhaps by attributing a ‘renaissance’ to one culture or another we are being reductive and assuming. Even so, one cannot dispute that something changed, for better or worse, c. 1070 in European society. Those changes must be appreciated, despite historical trends, for their application to modern society. Modern towns, cities, and municipal life cannot be studied without looking to the past, and more specifically at what occurred during the so-called “Twelfth-Century

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175 One must be careful when discussing history in these terms, as Patrick Geary warns in Patrick Geary, *The Myth of Nations: The Medieval Origins of Europe* (Princeton: Princeton University Press, 2002, 2003). Geary has seen the debate concerning ‘nations’ as central to the Middle Ages, c. 400-1000. For him, the history of the Middle Ages is anything but academic; indeed, it has become a political discourse. Here, rather, I only wish to use the term to prove a point. Constructed or not, there is some sort of change or evolution during the “Twelfth-Century Renaissance.” While it cannot be measured or touched, it can be understood through the historical evolutions that occur in that very period.

176 Criticisms include those related to the twelfth-century renaissance and the designation of it as a category. See Melvea, “The revolt of the medievalists.”
Renaissance.”\textsuperscript{177} While this method of inquiry has been accepted for some of the most
well-known cities of Europe such as Paris, London, and Cologne, the time has come to
include Brussels in the scheme.\textsuperscript{178}

The above-outlined approach and the above-noted secondary works create the
context for examining the twelfth- and thirteenth-century hospital of Saint John. While
some authors, primarily Paul Bonenfant and Paul Evrard, have examined the hospital
with an eye to its legal documents in an economic context, a social and cultural approach
is still needed. In this approach, historians, such as Stephen D. White and Barbara
Rosenwein, provide the contextual lens from which the hospital will be explored,
whereas the works of Charles Homer Haskins, Henri Pirenne, and Giles Constable serve
as social and cultural starting points for the study. All of the works suggest that it is
possible to look beyond the charters to the people who issued them and who were
involved with them. In doing so, one can garner information pertaining to the people, the
social and cultural innovations of the period and the importance of the hospital. The
studies also suggest that through out the twelfth century and beyond, Europe was
undergoing profound changes. Brussels cannot be ignored in that context—it too showed

\textsuperscript{177} This idea will build on later chapters. For example, I am taking a similar position to what has already
been articulated by Edward J. Kealey in England after the Norman Conquest. According to Kealey, “early
twelfth-century people were unusually creative individuals. Their sparkling developments in ecclesiastical
architecture, manuscript illumination, university education, scholastic philosophy, and romantic poetry
enlarged the lives of generations to come. [...] Indeed, the new hospitals were a principal way in which
the century’s highest ideals achieved concrete reality.” See Kealey, \textit{Medieval Medicus}, 82.

\textsuperscript{178} For example, see the following: Timothy Baker, \textit{Medieval London} (Cassell, 1970); Gwyn Williams,
\textit{Medieval London: From Commune to Capital} (Taylor & Francis Group, 2007); Barbara Hanawalt,
\textit{Growing up in Medieval London: The Experience of Childhood in History} (Oxford University Press, 1995);
Mildred Priça Bjerken, \textit{Medieval Paris, the Town of Books} (Scarecrow Press, 1973); Anna Cazzini
Tartaglino and Nanda Torcellan, \textit{Medieval Paris} (Raintree Steck-Vaughn, 2001); and Joseph P. Huffman,
\textit{Family, Commerce, and Religion in London and Cologne: Anglo-German Emigrants, C. 1000-C. 1300}
the signs of advancements of the twelfth century. It is thus with all these ideas in mind that we turn to Brussels in order to survey these very developments.

Introduction: The Years before Man

Studies on medieval urbanization in general or on particular medieval cities have not been uncommon over the last several decades. But even with this proliferation of research, a number of cities are missing from the analysis. Cities that were not the seat of a bishopric, those that were not integrally linked to the political workings of a king or a prince, and those that lacked economic stability and prosperity, especially in the tenth, eleventh, and twelfth centuries, have often been neglected. The high medieval city of Brussels falls within these categories. Thus, the goal of this chapter is to briefly narrate a history of the city of Brussels in order to understand the growth of the hospital of Saint John in context. First, though, it is necessary to examine Brussels’ origins, including land

2 While Brussels lacked many of the specifics in the Middle Ages that attract scholars to the study of cities, Brussels’ modern history may also help to explain why historians have neglected the medieval period in favor of the more contemporary. As a modern city Brussels only really gained importance and notoriety with the economic boom of the later Middle Ages (fifteenth century onward), and the real flourishing of the city only occurred after Belgium gained its independence in the first third of the nineteenth century. Since Belgium’s independence, Brussels has achieved popularity, sometimes good and sometimes bad. Its colonial empire of the Congo sparked intense debate, it was one of the greatest victims during WWI and WWII, and it is the current seat of the European Union. Thus, with such important modern consequences, both good and bad, it probably should not come as a surprise that the city’s high medieval origins have been somewhat neglected.
3 This does not mean that historians have not explored the city at all. In fact, several great historians have researched the city in recent years. Among them can be cited Paul Bonenfant, Mina Martins, Henri Pirenne, Paul State, and Alphonse Wauters. Of these four, Bonenfant, Martins, Pirenne and Wauters all focused on various periods of the Middle Ages. Many of them, however, often exceeded the medieval bounds to discuss institutions in early modern period, and many are dated. Most studies on the city have been conducted in French, and there are relatively few, studies on Brussels in English.
formations. Brussels thrived on trade and commerce, both of which arose because of its unique territorial composition. Thus, we must work from the ground up, literally.

To place the country into perspective, modern Belgium is one of the smallest countries in the world covering only 30,506 square kilometers or about 11,755 square miles.\(^4\) It is comparable to Maryland or Wales, and about half the size of Scotland. As for Brussels, the city lies at latitude 50°50' north and longitude 40°20' east in the center of the country. It is situated slightly north—distances vary from approximately 10 km (6.2 mi.) to 3 km (1.8 mi.)—of the language border that runs through the center of Belgium dividing Dutch-speakers in the north from French speakers in the south.\(^5\)

Belgium is also one of the “smallest but most densely-populated of European counties.”\(^6\)

The dense population was not, however, always characteristic of the small country.\(^7\)

Thousands of years of geological formation, foreign invasion, and territorial wars would pass before Belgium would stabilize to allow for a greater population increase, which substantially occurred with each renaissance-like period of development.

A brief examination of the geological formations in the Palaeozoic, Mesozoic, Tertiary, and Quaternary Eras will illustrate the characteristic developments before human inhabitation. Brussels is composed of several rock formations, all of which produced characteristic differences in the four eras. During the Palaeozoic Era (between

\(^4\) Belgium, J. H. Godfrey and E.G.H. Rushbrooke, eds. (Naval Intelligence Division, 1944), 1. Most commentary on the geological formations of Brussels and Belgium will be limited to secondary sources. There are little to no written sources before the arrival and conquering of Caesar. While archeology can offer some information, it too is limited. Some archeological sources will be considered later.

\(^5\) State, Historical Dictionary of Brussels, xxxi.

\(^6\) Margot Lyon, Belgium (New York: Walker and Company, 1971), 10. There were about 9.5 million inhabitants at the time of the publication of this work.

\(^7\) Explanation as to why it is densely populated in this area will occur later on in this chapter.
570 and 250 million years ago) formations including slates and quartzites appeared. These rocks are not presently visible because other later rock formations have covered them. Their presence in the rocks, however, has been long recognized, as many of the “igneous rocks in them have been extensively quarried for road-metal and paving stones.”

The area also saw the depositing of limestone, shale, and sandstone. Limestone is part of the Devonian system, which creates a favorable human environment, yielding “good arable soils” and abundant well water. Similarly, these rocks consist of the Carboniferous system, which like the Devonian system, “give[s] rise to characteristic conditions of surface drainage and water supply.” Both systems provide the water supply to Brussels, one in the Hoyoux Valley and the other in the Bocq Valley. In addition to water supply, the Palaeozoic rocks literally provided the foundation and territorial divisions of much of Belgium: “Palaeozoic rocks are intensely folded, for they were involved in the mountain-building movements that produced a great chain across what is now central Europe in Upper Carboniferous times—the so-called Hercynian mountains,” whereas the Cretaceous rocks, which were formed during the Mesozoic

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8 The period spans nearly 320 million years, during which most invertebrates came to life, including insects, fish and reptiles. This was also the age in which Pangea was formed.
9 Belgium, Godfrey and Rushbrooke, eds., 1.
10 Ibid., 2.
11 Ibid.
12 Ibid.
13 Ibid., 3.
Era, between 251 and 65.5 million years ago, have been cited as “relatively unimportant in Belgium”\textsuperscript{14} in terms of physical formation.

The Tertiary period, which occurred roughly 65.5 to 1.8 million years ago,\textsuperscript{15} includes rock formations from both the Old and New Tertiary periods. The Old Tertiary Period saw the formation of the \textit{Eocene} and the \textit{Oligocene} sea deposits of sand and clay, while the New Tertiary Era witnessed \textit{Miocene} and \textit{Pliocene} deposits. It was also during this time that the North Sea covered most of northern part of Belgium for the last time. Eventually, though, the Sea retreated, which allowed the Rhine River to flow and join the Thames River. From this point forward, the land saw the “beginnings of landscape sculpture[, all of which] date from the upheaval of this early Pliocene sea-floor.”\textsuperscript{16}

The final period of geological development is that of the Quaternary, coinciding with the Ice Age and occurring about two million years ago.\textsuperscript{17} During the Ice Age, Belgium and neighboring countries were “buried beneath a fine-grained wind-blown dust” called \textit{limon}.\textsuperscript{18} This dust gave “rise to highly distinctive conditions of soil, settlement, and agriculture,”\textsuperscript{19} the effects of which can best be seen in the high Middle

\textsuperscript{14} Ibid., 3. While the rock formations may have been relatively unimportant, this was the period that saw the arrival of mammals. In addition, Pangea split, and dinosaurs predominately ruled most areas of the earth.
\textsuperscript{15} Most modern birds, reptiles, fish, amphibians, invertebrates, and flowering plants species and animals evolved during this era.
\textsuperscript{16} \textit{Belgium}, Godfrey and Rushbrooke, eds., 4.
\textsuperscript{17} This was the period of great global climate change, i.e. the Ice Age, and the development of human species.
\textsuperscript{18} \textit{Limon} is similar to silt. It is a thin deposit of fine dust that changes the ph levels of the soil, and it is characteristic to the Paris Basin. This topsoil would allow for good crop production later in the Middle Ages and beyond. See also \textit{Belgium}, Godfrey and Rushbrooke, eds., 14.
\textsuperscript{19} \textit{Belgium}, Godfrey and Rushbrooke, eds., 5.
Ages during a proto-renaissance of crop production and industry. In addition, other deposits of fertile soils and minerals also occurred: “les alluvions, les tourbes, les depots ferrugineux et calcareux,” as well as deposits of the marine, mud, and peat soils, all of which were integral to the development of farmlands and crops.

Farmland, however, would be of little use if water conditions could not be controlled. While the coastline during this period fluctuated with the moving of ice sheets, it was not until Roman occupation in the first century C.E. that stabilization occurred. Only after the fifth century did the area see “a slow reclamation […] as a result of natural sedimentation supplemented by artificial draining and dyking.” Indeed, artificial draining and dyking would characterize the area, Brussels included, for much of the medieval and early modern periods—in order to survive, the inhabitants of the area would have to manipulate the land. The last stage of land formation in this period was the depositing of course sand and gravel by the Meuse, which was key for drainage and development of lands in the medieval and modern periods.

Other developments and divisions—physical and geographical—were already solidified in the Quaternary Period. For example, the area also hosts North and South divisions characterized by a southern upland and a northern plain and plateau, and there

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20 Sometimes, the old Paleozoic rocks come to the surface because of the small depth of the limon sands. This is because the sands are “pervious,” and thus they do not sustain underwater drainage. But there are also impervious rocks. These rocks hold water and are “within the reach of the more deeply cutting rivers,” while “spring-fed streams flowing in steep-sided valleys are frequent.” Alphonse Wauters, Histoire des Environs de Bruxelles: Description historique des localités qui formaient autrefois l’Ammannie de cette ville, tomes 1-3 (Bruxelles: Impression Anastaltique, 1855, 1968), XI.
21 Wauters, Histoire des Environs de Bruxelles, XI.
22 Belgium, Godfrey and Rushbrooke, eds., 5.
23 Ibid.
24 Ibid.
25 Ibid., 6.
are a number of subregions with individual characteristics. The subregions consist of Belgian Lorraine, the Ardenne Plateau, the Southern Low Plateau, the Northern Low Plateau, which includes Brabant and Hainaut, and the Northern Lowland. Because this is a study on Brussels, commentary will be limited to the Northern Low Plateau.

The Northern Low Plateau is lower in elevation in comparison to some of the other regions, because it gently declines toward the plains. The average elevation in the area is between 100-200 meters (330-650 feet), with the highest points being around 200 meters along the Sambre-Meuse furrow. The entire plain is covered with limon, “which provides one of the finest arable soils in Europe.” This fact helps to explain why inhabitants congregated around the area that would become Brussels.

Even with the ideal soil deposits, it would take some time for the land to develop into fertile farm ground, since most of the land was covered with trees. Fruit trees such as apple, pear and cherry trees, arrived with the Romans during the first century. In terms of cereals and grains, most of the common crops made their way into Brussels and

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26 Ibid., 7.
27 Ibid.
28 Ibid., 12.
29 Ibid.
30 See above for an explanation.
31 Belgium, Godfrey and Rushbrooke, eds., 12.
32 In modern times, the concentration of population would not be because of the fertile soil, but rather because of the rise in industry and the industrial revolution in the area. Belgium, Godfrey and Rushbrooke, eds., 12.
33 Wauters, Histoire des Environs de Bruxelles, XIV. A wide variety of trees already existed in the area during the time of Guicciardini and after. Wauters offers no insight as to who exactly this person is. Guicciardini (Francesco) may have been an Italian statesman in the employment of the Medici. He was also a historian who worked both in and out of Italy. The above statement may have been an observation he made about Brussels during the sixteenth century. While it is certainly later than the starting point of this section, his statements do provide some context. Many of these species of trees would have had to been in the area for some time before Guicciardini’s reports.
34 Wauters, Histoire des Environs de Bruxelles, XVI.
Belgium with the Indo-Persian Celts in the second and third centuries BCE. Finally, upon the arrival of Caesar, local animals, such as the bear, beaver, and wolf inhabited the forests and the area.

Brussels and Belgium owe much of the variety in produce, grains and animals to their river systems, which act as arteries connecting Brussels and Belgium to the rest of Europe. Thus, a few words must be said on the river systems in the area: the Meuse and the Scheldt (or Escaut). The Meuse is a “longitudinal stream—that is, it follows the direction of the geological grain of the country.” This river “has cut itself deeply in the older rocks of the massif [Ardenne], flowing in a gorge which is perhaps the most notable scenic feature of Belgium.” Despite its beauty, the river is subject to flooding downstream in the winter and late summer.

The second system, the Scheldt, is one of the most important systems in the Low Countries. The Scheldt River flows through Belgium, France, and the Netherlands, and it is part of the Rhine-Meuse-Scheldt Delta, an enormous delta that covers much of the Low

35 Ibid.
36 Ibid., XIX. There are also numbers of birds, fish, lizards, and insects.
37 The area is incredibly complex in terms of river systems. Alphonse Wauters spends nearly two full, typed pages naming the rivers and their tributaries. For this study, it is not necessary to go in such detail, but rather to identify the complex nature of the river systems and how it would eventually shape the land and the peoples. See Wauters, Histoire des Environs de Bruxelles, VIII-X.
38 Many of the geological secondary sources use Escaut (the French name) when discussing the river system. Most of the historical documents, however, list the Scheldt, which I will also use. The Dutch is Schelde.
39 Belgium, Godfrey and Rushbrooke, eds., 17.
40 Ibid.
41 See the section on climate and rainfall for a better explanation of this occurrence. See Belgium, Godfrey and Rushbrooke, eds., 18. In addition, it might be significant to note that the flow of most of the rivers is slow, less than two to three feet per minute. However, in times of great rainfall, such as winter and late summer, the flow exceeded twenty to thirty feet per minute. See Wauters, Histoire des Environs de Bruxelles, X.
42 See the last section for more information pertaining to the Scheldt River system and its importance to Brussels, especially in the rise of industry.
Countries, France, and Germany. It was on the banks of the little River Senne, a tributary of the Scheldt, that Brussels grew. The Senne, which runs for 103 kilometers (64 miles) may have been derived from the Celtic word “Sonia,” while other sources simply called it “Sin.”\(^\text{43}\) The interwoven nature of the Scheldt Delta has led to the creation of a number of small islands over the years. The 350 kilometer river (271 miles) has also been extensively dyked\(^\text{44}\) and canalised so that it joins the basins of the Rhine, Meuse, and Seine, namely for agricultural ease and for simplifying of living needs, but also to prevent flooding. The flooding of the river can be attributed mostly to physical formations located along the banks of the waterway. Especially along the coast line, there is a stretch of sand dunes where “the land is flat and needs dykes to prevent flooding; it is now well-drained and intensively farmed, but in earlier centuries was a marshy and water-logged plain.”\(^\text{45}\)

Thanks to canal work, the river also connects a number of cities industrially, including, but not limited to, Brussels, Liège, Cambrai, Colonge, and Lille. During Roman occupation, the river was used to ship supplies through Britannia. Later, the Franks took over the area and the river. From the reign of Charlemagne onward, the river served as a boundary between France and the Empire, while during the high Middle Ages, the river system and Brussels functioned as an important commercial highway.

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\(^{44}\) Wauters makes the comment that the dyking allowed for the arrival of culture: “livrés à la culture.” Wauters, *Histoire des Environs de Bruxelles*, XI.

\(^{45}\) Lyon, *Belgium*, 11.
between Cologne and the Low Countries. The river appears in some of the Saint John charters, mostly for orientation purposes.

In addition to the creation of farmland and river trade routes, geological formations have helped define the climate of Brussels. For example, the uplands and lowlands have different climates: “the north-west lowland, relatively dry, has a uniform climate, the only variations being slight ones due to increasing distance from maritime influence; the south-east upland, much wetter and cloudier, has a more varied climate with sharp local differences due to changes of altitude and exposure.”

Belgium, like the other countries around the North Sea, lies in a transition area between the Icelandic low-pressure area to the north-west, the ‘Azores High’ to the south-west, and the continental pressure system, high in winter and low in summer, to the east. Any of these may temporarily extend its influence over the country, but on the majority of occasions, Belgium lies in a stream of air flowing between two or more of the centers.

Wind is normally slight, and temperatures vary according to coastal areas and inland areas. Brussels has about 60 days of frost and about 28 days of fog, with winter being the foggiest. Rainfall amounts to between 800 and 1000 millimeters per year, and snow, thunderstorms, and hail are all possibilities. Summers tend to be mild, as too do winters, but some winters can be quite cold. While these are all modern observations, they are generally true to describing the climate of the high Middle Ages as well.

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47 Belgium, Godfrey and Rushbrooke, eds., 39.
48 Ibid.
49 Ibid., 41.
50 Ibid.
51 Ibid., 43.
52 Ibid., 52-3.
53 Lyon, Belgium, 11.
The First Inhabitants: The rise of an amalgam of peoples and cultures

Having explored the land and climate, we can now turn to examine the first people of Belgium. While the area that would become Belgium was not ideal for habitation at first, it was still the home to many peoples from many backgrounds, all of which make up the composition of the Brussels region. Thanks to the discoveries made in the area, historians and archeologists now know that Neolithic peoples inhabited the areas of Schaerbeek, Boitsfort, and Uccle c. 2250-1900 BCE.\textsuperscript{54} Beyond their known habitation, however, what is known about these people is largely a mystery. The first identifiable and permanent inhabitants to the area were the Belgae, an Indo-European group that migrated and settled between the Rhine and the Elbe between 1000 and 800 BCE.\textsuperscript{55} Remnants of their language suggest that the language of the Belgae was similar to Irish and Welsh and “provides the basis for many current Belgian place names, such as the Ardennes (Celtic ard or high).”\textsuperscript{56} Some have contended that the Belgae “cohabited the area with the still numerically superior Celts”\textsuperscript{57} Others, however, argue that the Belgae came to dominate imposing “leur domination aux populations bretonnes, dont ils se distinguaient comme race, comme langue et comme moeurs.”\textsuperscript{58} Regardless of the superiority of one group over another, we do know that in the early centuries of

\textsuperscript{54} State, \textit{Historical Dictionary of Brussels}, xxiii.
\textsuperscript{55} Ibid.
\textsuperscript{57} Ibid.
inhabitation that trade occurred to some extent in the area—remains of gold, silver and bronze coins of the *Belgae* have all been found.\(^{59}\)

Beyond the mysterious *Belgae*, much of the evidence concerning the early inhabitants of Brussels is limited to the conquests and chronicles of Julius Caesar. Upon his arrival, Caesar discovered a group of Gauls,\(^{60}\) who were probably related to an Indo-European family of prehistoric times, most likely that of the *Belgae*.\(^{61}\) These peoples were fairly developed socially and they had fortified towns.\(^{62}\) While Caesar did record his findings, he was not the first to encounter the inhabitants. Earlier Roman missions, such as that by Q. Fabius Allobrogicus, had led a subduing of the area.\(^{63}\) But the Roman subjection of the Gauls was only temporary. Indeed, while some areas flourished under Roman ‘civilization,’ others remained ‘uncivilized,’ lacking cities, art, and commerce. These ‘less-civilized’ areas included the areas of Gaul in the east and north (what would later be the Low Countries) and Britain.\(^{64}\)

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60 These same peoples had probably in part conquered the island of the Britons. They [the Gauls] were composed of powerful, belligerent tribes. See Wauters, *Histoire des Environs de Bruxelles*, XIV
61 *Caesar’s Gallic War*, James B. Greenough, Benjamin L. D’Ooge, and M. Grant Daniell, eds. (Boston: Ginn & Company, 1886, 1898), xlvi. In thinking about origins, it is often the case that those writing about Brussels and Belgium mention Caesar and his commentary, but no one really seems to elaborate on what he says. Despite the bias of the source, it is important to include this eyewitness view of the early inhabitants, especially when it is one of the only written accounts that we have. This edited edition is an excellent printed copy of the *Gallic Wars* with annotations and a bibliography. In the work the editors often interchange Gaul and Celt. They explain that the name ‘Gaul’ was applied indiscriminately to those who were not Roman. The authors also explain that the name is geographical and not racial. I will not follow the editors’ suggestion, but rather follow what Caesar says: “*Gallia est omnis divisa in partēs trēs; quārum ūnam incolunt Belgae, alīam Aquītānī, tertiam quī ipsōrum linguā Celtae, nostrā Gallī appellantur.*” See also Karl Bædeker, *Belgique et Luxembourg: Manuel du Voyageur* (Paris, 1928)
62 Wauters, *Histoire des Environs de Bruxelles*, XXIV.
63 *Caesar’s Gallic War*, xlvi.
64 Ibid., xlviii. Because this is a dated work, there seems to be some value judgments placed on the missions of Caesar and his findings regarding the inhabitants. The editors seem to advocate that Caesar brought civilization to a backwards people. This should not come as a surprise given the publication date, especially in regards to the rise of nationalism, colonialism, and imperialism.
When Caesar arrived, he discovered the Belgae, for which he had a deep respect. He often cited the peoples for their bravery. About the Belgae he explains that among all the Germans, the Belgae are the “greatest,” and that they are noted for their courage and strength. Indeed, Caesar spends much of the Second Book of the De Gallo Bellico discussing the peoples of Belgium and the campaigns against them. Having discovered that the Belgae were plotting to rise up against Caesar, the Roman general moved against them. In the plot, Caesar inquired about the peoples, during which he learned that they were “Germans” who had crossed the Rhine for the fertile land. He also learned that this particular group of Celts had driven out another group of Gauls who were living in the area at the time.

The Romans used siege engines to conquer the ramparts, indicating that the early inhabitants had at least basic fortifications and some structures that came with town life. While the Belgae scoffed at the Romans at first, they were ultimately defeated and surrendered conditionally. It took seven campaigns, but eventually, Julius

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65 Caesar’s Gallic War, 1.
66 This invocation of valor and strength is common throughout the chapter: the Belgae marched with “māgnō impetū,” Caesar’s Gallic War, 51.
67 “Cum esset Caesar in citeriōre Galliā ita utī suprā dēmōnstrāvimus, crēbrī ad eum rūmōrēs adferēbantur, literīsque item Labiēnī certior fiēbat omnīs Belgās, quam tertiam esse Galliae partem dīxerāmus, contrā populum Rōmānum coniūrāre obsidēśque inter sē dare.” Caesar’s Gallic War, 49.
68 This is an incredibly interesting comment, as will be highlighted later. The area, while it may have been fertile (thanks to limon deposits), was really inhospitable. It needed much working in terms of dyking and damming for it to be productive. Indeed, Caesar himself calls the area ‘marshy’ (palūs). Caesar’s Gallic War, 55.
69 In this particular section (30) Caesar notes that the town has a rampart of about twelve feet in height and that it is fifteen miles around.
Caesar “conquered the [Belgae] and present-day Belgium, the section of Gaul between the basins of the Scheldt and the Meuse Rivers, between 57 and 50 BC.” 

After the conquests of Caesar, Roman law was imposed, and Caesar prohibited coinage production by the inhabitants. By 15 BCE the area had become “the Roman province of Gallia Belgica.” Much later, Latin and Christianity were introduced. Culturally, religiously, and commercially, the region was limited, at least in the first years after the conquest. Communication, however, did eventually grow, as “the Romans established an important military base at Tongeren. It was a vital post on the paved road joining Colonia Agrippinensis or Cologne and Gallia Belgica with the sea at Boulogne by way of Tournai.” Other roads in the area included the Dieweg, which linked the roads of Barai-Asse and Wavre-Mechelen. The roads were key to the opening of trade lines. Finally, the Romans established a villa c. 175 CE at Laeken.

Even with some cultural, military, and commercial advancement, the area remained prone to flooding. Such a scenario was evident “after a catastrophic North Sea storm in 270 AD[, which caused the Romans to evacuate] the low-lying coastal areas of Flanders.” But the minor setbacks did not completely deter Roman interests, especially near the water. Sometime in the fourth century a Roman villa was constructed in the area.

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70 Cook, *Belgium*, 1-2. Other sources indicate that the Belgae were conquered in 52 BCE or 51 BCE, whereas Cook specifies the entire length of the campaign. For example see Michael Winch, *Introducing Belgium* (London: Methuen & Co. LTD, 1964), 13; and State, *Historical Dictionary of Brussels*, xxiii.
73 Ibid.
75 Ibid., xxiii.
76 Later, they would return to construct structures again at modern-day Bruges. Cook, *Belgium*, 2.
of Anderlecht, which means “the low ground inhabited by those who live near the water.”

Under the emperor Diocletian (284-305) Belgica was divided into two provinces: Flanders and northern France were in Belgica Secunda, whose capital was Reims, which would be the metropolitan see of Flanders during the Middle Ages. Thérouanne remained the capital of the civitas of the Morini, but there were three major changes. Tournai replaced Cassel as the chief place of the civitas on the southern frontier, while Cambrai became the chief place of what had been the civitas of the Nervii, whose previous capital had been Bavai. Boulogne also became important strategically and a civitas, probably after the partial destruction of Thérouanne in 275.”

These territorial changes gradually helped to lay the foundations for later communities. Many towns were born from the new divisions, such as Tongeren, Namur, Arlon, and Tournai, and many people adopted the Roman language. The occupation of the areas, however, was once again short-lived.

During the third century, many of the Romans left, unable to defend the rising city centers from the invasion of new Germanic peoples, including the Franks, Frisians, and Saxons entering from the north-east. Other Romans, “who made a virtue of necessity, accepted the Franks as mercenary allies (foederati).” As the Frankish tribes moved into the marshy northern and western areas of present-day Belgium, they did not become Romanized and generally did not accept Christianity. Instead, the Franks gained “suzerainty,” and the new tribes kept their Germanic language. From this division the

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77 State, Historical Dictionary of Brussels, 11.
80 Cook, Belgium, 2.
81 Winch, Introducing Belgium, 13.
82 Lyon, Belgium, 12.
83 Winch, Introducing Belgium, 13.
area saw the birth of a linguistic and cultural tradition that still remains today. Two
groups came to dominate the area that would become Brussels: the Flemings and the
Walloons.

The Flemings can be traced to the Salian Franks—during the third and fourth
centuries the Franks and the Alamans entered the Rhine frontier. The Franks were
absorbed into the Romanized Celts, called Walah, meaning ‘foreigner’ or ‘newcomer’.
Their language was waals and thus they became known as the Wallons. Many
historians have noted that generally one cannot tell any difference between the two
groups. While visually the two groups are not different, culturally and linguistically,
there is an enormous divide. A physical boundary exists along the Silva Carbonaria,
“the charcoal forest,” so-called because its hard woods like beech and oak were sources
for charcoal. Earlier Belgian historians did point to the forest as a place of refuge and
thus a site that separated Gallo-Romans from the Germanic Franks. A kind of physical

84 Bædeker, Belgique et Luxembourg, XXI-XXII.
85 These are the inhabitants who were originally located in the area and then conquered and amalgamated
under Caesar and the Romans. Belgium, Godfrey and Rushbrooke, eds., 55. For additional information on
some of their surviving goods, see Em. de Munck, “Note sur quelques antiquités Belgo-Romaine,” in
Annales de la Société d’Archéologie de Bruxelles: Mémoires, Rapports et Documents, tome 3 (Bruxelles,
1889), 58-64. This is a short and quick description of a few archeological remains from the area in
question.
86 Simple names used to describe the country side or animals in the region even changed with the divisions.
See Wauters, Histoire des Environs de Bruxelles, t. I, XXX-XXI.
87 Interestingly, some scientists have examined the Flemish and the Wallons to compare similarities and
differences. These investigations included measurements and divisions according to head size. The
findings revealed that Walloons have smaller heads, and the Flemings are more broad-headed. Also,
Flemings tend to be taller than Wallons. See Belgium, Godfrey and Rushbrooke, eds., 55.
boundary did exist, though its impact on ethnogenesis is perhaps debatable.\textsuperscript{88} The modern designation of this boundary is “south of Brussels and extend[s] to the east to just south of Leuven”\textsuperscript{89}

Another wave of Frankish invaders appeared in the fifth century with the collapse of the Roman Empire, and later, “around 431 Tournai became the capital of the Frankish king Chlodio [428-447] and his successors known as the Merovingians.”\textsuperscript{90} By the fifth century the Franks began to colonize the basin of the \textit{Escaut}, and Clodion [sic] made Tournai his capital c. 440.\textsuperscript{91} These conquests had a direct impact on Belgium: at the “end of that century a Frankish king, Clovis [481/2-511], left Tournai to conquer for himself an empire stretching from Cologne across northern France, with Paris as its center.”\textsuperscript{92}

Even though the Franks poured into the area in conquest, they were somewhat halted by the natural obstacles of the forests of Flanders and Brabant and by the Roman frontier organization of the area; the main movement of the Frankish people stopped, but the conquests of Frankish kings and nobles continued into the Paris basin. The military advance about the year A.D. 431 to Tournai, Arras and Cambrai introduced a Frankish element into northern Gaul, but did not displace the great mass of the Gallo-Roman inhabitants.\textsuperscript{93}

Although divergent in language and tradition, the warring Franks and the previously settled Romans eventually came together to see the formation of the city of Brussels. Recognizing the importance of rivers for trade, commerce, and communication, inhabitants first settled permanently on the banks of Senne, the small

\textsuperscript{88} Cook, \textit{Belgium}, 3.
\textsuperscript{89} Ibid.
\textsuperscript{90} Ibid., 2.
\textsuperscript{91} Bædeker, \textit{Belgique et Luxembourg}, XXI-XXII.
\textsuperscript{92} Lyon, \textit{Belgium}, 12.
\textsuperscript{93} \textit{Belgium}, Godfrey and Rushbrooke, eds., 80.
tributary of the Scheldt (Escaut). One must be curious about the choice of location:

“the main expansion of the agglomeration from an island in the marshy Senne valley [had] been on to the sandstone uplands that [were] close to the right bank of the river on the east.” The choice, however, was religiously motivated in many ways. The conversion of Clovis in 496 did aid in the spread of Christianity, which really only infiltrated Belgium late in the fifth century. With the death of Clovis in 511 the area was divided between the Neustria and Austrasia and saw the rise of Christianizing missions. When the religion began to take hold in the sixth century, it was mostly through the influence of the Irish monks Saint Amand and Saint Willibrord who established the abbeys of Saint Baaf and Saint Peter in Ghent.

94 Ibid., 585.
95 Ibid.
96 Bædeker, Belgique et Luxembourg, XXI-XXII.
97 “Now on the death of king Clovis, his four sons, namely, Theodoric, Chlodomer, Childebert and Chlothar, received his kingdom and divided it among them in equal parts.” Gregory of Tours, Historia Francorum, Ernest Brehaut, trans. (New York: Columbia University Press, 1916), Book 3, Chapter 1.
98 Bædeker, Belgique et Luxembourg, XXI-XXII.
99 The Life of Saint Willibrord can be found in a modern edition of Alcuin, Life of Saint Willibrord, C. H. Talbot, trans. in Soldiers of Christ: Saints and Saints’ Lives from Late Antiquity and the Early Middle Ages, Thomas F.X. Noble & Thomas Head, eds. (University Park: Pennsylvania State University Park, 1995), 189-211. Willibrord was born on the island of Britain in the province of Northumbria. When he was of a youth, Willibrord was given to the monastery of Ripon (located in Northumbria) where he grew physically and spiritually until his thirty-third birthday. Willibrord, hearing that “in the north regions of the world the harvest was great but the laborers few […] decided to sail for those parts and, if God so willed, to bring the light of the Gospel message to those people who through unbelief had not been stirred by its warmth.” Alcuin, Life of Saint Willibrord, 195-6. Willibrord received blessings from the Pope Sergius (687-701) to continue his mission, as well as from Pepin (c. 690). With the death of Pepin and the rise of Charles in 714, Willibrord continued his missions for the Franks. See Alcuin, Life of Saint Willibrord, 201. He spread the word of God and founded a number of churches and monasteries in the area. The rise of Christian inhabitation may have accounted for greater population increases and changes to the land. Indeed, Willibrord, being a ‘true’ saint, was often seen with a light over his resting place, and a “ravishing fragrance and most sweet odor” also came from his sarcophagus. Alcuin, Life of Saint Willibrord, 208. Because of these ‘miracles,’ many Christians pilgrimaged to the deathbed to be cured of disease and illness. Alcuin attests to the delivery from illness and ailments of a number of those suffering, which increased the flow of people into the region. Simply put, it was a matter of exposure that could have led to population increases in the area. Furthermore, while the Life of Saint Willibrord may seem obscure in a history of the duchy of Brabant and of Brussels, it provides some clues as to the rise of a settlement in the area. Written c. 796 by Alcuin, the source provides some basic information on the Christianization of the area.
With Christianity eventually came the establishment of Brussels, which occurred c. 695 on an island in the middle of a marsh—the Ile Saint-Géry, sometimes called the Place Saint-Géry. The foundation of the town is attributed to the sixth century Saint-Géry, who was a bishop in Cambrai and an apostle of Belgium. Saint-Géry established himself on the largest of three islands in the Senne, the Ile Saint-Géry. There, he constructed a small village and a chapel. While the name “Brussels” was not applied until the tenth century, the foundations for city life, princely life, and commerce and been laid. In addition, Saint-Géry, as well as others, such as Willibrord, may have drawn inhabitants into the area leading to an increase in population. The rise in population is evidenced by the fact that by the later seventh century, the monasteries of Mons, Maubeuge, and Nivelles were in place, although, the beginnings of urban life are as murky and irresolute as the original settlement. It would take centuries before anyone saw the rise of a true ‘city’.

Willibrord, called the “Apostle of Frisia,” was given land for a cathedral outside of Utrecht and founded the monastery of Echternach (in modern Luxembourg). While these areas are not exactly equivalent to Brussels, they are near by and help one to understand the arrival of Christianity to the area. Finally, the vita has been cited by a number of religious scholars of the Low Countries, such as Ludo Milis. A more detailed discussion of Christianity in the region will occur in later chapters. See Milis, Religion, Culture, and Mentalities in the Medieval Low Countries.

100 Cook, Belgium, 2.
101 Belgium, Godfrey and Rushbrooke, eds., 585.
102 More specifically, the name “Brussels” comes from a tenth century chronicle that calls the settlement, Brussella. See Bædeker, Belgique et Luxembourg, 15.
104 The word “Brussels” appears in several forms and manuscripts from ancient and medieval times. The most prominent occurrences begin around the ninth and tenth centuries. From the tenth century onward we see the name ‘Brusella’ appear in documents—‘bruc’ is marsh and ‘sel’ is settlement. Most authors cite the tenth century examples. Henne and Wauters include a few references in their work. The city name can be traced, according to them, to the Vita Sancti Vindiciani, Trophées de Brabant, Bonum universale de Apibus, and Vita B. Gudilae, to name just a few. Some of the alternate spellings occur as follows: Brosella, Brusella, Brussela, Bruzela, Borsella, Brussela, Brucella, etc. For more information see Henne et Wauters, Histoire de la Ville de Bruxelles, 13.
105 See Henne et Wauters, Histoire de la Ville de Bruxelles, 14.
In addition to religious developments that helped to form the basis of town life, there were also new political developments after the death of Clovis and the division of the Frankish Empire into Neustria and Austrasia, while the portion of which Brussles occupied would later take the name Lotharingia over the next few centuries. The country was divided into counties and the count became the administrator, judge, and military commander. In addition, seven alderman, all of whom aided the count, were chosen from among the nobility.\textsuperscript{106} The count, who had to answer to the king, was responsible in each county—the north, Rupel, the south, Hainaut, the east, Dyle, and the west, Escaut—for administration and military affairs.\textsuperscript{107}

Further political, military, and cultural development, however, was limited during the next few centuries, halted some by the Norse invasions and some by the lack of technical advancements that would be needed to cultivate the land. We do know, based on early studies of the city walls,\textsuperscript{108} that “the island itself was fortified, while beyond the ramparts were patches of cultivated land amid the marsh, through which ran the numerous branches of the Senne.”\textsuperscript{109} So, some defense against the invasions was available to the inhabitants. Nevertheless, in 891 the Vikings attacked by moving along the Dyle River. They were defeated at Leuven.\textsuperscript{110} It was only after the Viking invasions

\begin{itemize}
\item \textsuperscript{106} Ibid., 11.
\item \textsuperscript{107} Wauters, \textit{Histoire des Environ de Bruxelles}, XXVIII.
\item \textsuperscript{109} \textit{Belgium}, Godfrey and Rushbrooke, eds., 585.
\item \textsuperscript{110} \textit{State, Historical Dictionary of Brussels}, xxiii.
\end{itemize}
that the area began to become more stable.\textsuperscript{111} This was so much the case that “in the comparative security following the Norse incursions of the tenth century, economic factors began to play a part in its growth, and from the eleventh century onward the settlement grew rapidly.”\textsuperscript{112} Before examining this rapid growth, though, it is first necessary to look at the political formations that would allow for such changes.

A Duchy Is Born: A survey of the political formations from the Treaty of Verdun, 843 to the beginning of regalian rights, 1106

During the late eighth and early ninth centuries, Charlemagne (742/47-814) and his son Louis the Pious (814-840) ruled the Frankish Empire, which was divided among Louis’ sons with the Treaty of Verdun in 843. Louis the German (840-876) received Eastern Franconia, Charles the Bald (840-877) the Western part of Franconia, and Emperor Lothair I (d. 855), received the land that stretched between the two Franconias, from the North Sea to the Rhone (in addition to Italy). This expanse of land included those areas between the Rhine, the Scheldt, and the Meuse—roughly modern-day Belgium. When Lothair I died in 855,\textsuperscript{113} the kingdom passed to his son, Lothair II (d. 855).

\textsuperscript{111} In this way, Belgium and Brussels become the quintessential examples of what Marc Bloch has argued about “feudal society.” In \textit{Société Feodale} Bloch postulated that there were two ages in “feudal” society. The first age came in the wake of the Viking attacks of the ninth and tenth centuries. During this time, society was reduced considerably. People sought out others in forms of dependence. Money became non-existence and the barter system prevailed. In addition, trade ceased. The second age is marked by considerable expansion, the rise of trade, the transition to a money economy, the rise of institutions, the formation of governmental structures and so forth. While Bloch’s study was based on one particular area in France, and while Bloch has been disputed and argued against since the birth of the work, Brussels certainly seems to fit Bloch’s model. See Bloch, \textit{Feudal Society}.

\textsuperscript{112} \textit{Belgium}, Godfrey and Rushbrooke, eds., 585. Only with the relative peace following the tenth and eleventh centuries could there be a ‘renaissance’ of sorts.

\textsuperscript{113} Léon Vanderkindere, \textit{La Formation Territoriale des Principautés Belges au Moyen Age} (Brussels, 1902), 15.
869), who became king of Lotharingia.\textsuperscript{114} From then on, the lands were known as *Lotharii Regnum*.\textsuperscript{115}

During his reign, Lothair II ceded parts of his domain to his neighboring rulers. Portions went to Louis of Italy, Lothair’s uncles, Charles the Bald and Louis the German. After Lothair II’s death in 869, war broke out in a scramble by the kings of France, Germany, and Italy for his lands. For the most part, Louis the German was the victor, and in the Treaty of Meersen of 870, Louis the German received the majority of the lands. Louis the German died in 876, at which time Charles the Bald unsuccessfully tried to reunite Lotharingia (also called Lorraine). It was not until 879, under the German rule of Louis the Younger, that the area was once again reunited. The lands then passed to Charles the Fat and then to the king of Germany, Arnold in 887.\textsuperscript{116} The division in 887 “made the Scheldt the boundary between ‘France’ and ‘Germany’; ‘France’ remained in possession of the county of Flanders on the left bank of the river, while ‘Germany’ obtained what was to become the duchy of Lower Lorraine on the right bank.”\textsuperscript{117}

Even with this small political settlement of the area, there were still problems. During the late ninth century the Normans had begun to establish themselves in the area. The Normans, who were generally described as a “military aristocracy owning a nominal duty to the French or German sovereigns, but were effectively independent,”\textsuperscript{118} ravaged


\textsuperscript{116} Or Arnolf or Arnoul.

\textsuperscript{117} Belgium, Godfrey and Rushbrooke, eds., 81.

\textsuperscript{118} Lyon, Belgium, 13.
the vicinity and managed to retake the region around the Meuse and the Scheldt.\footnote{Henne et Wauters, \textit{Histoire de la Ville de Bruxelles}, 17.}

Those Normans with wealth, such as Baldwin the Iron-Arm, created castles, his specifically being in Ghent.\footnote{Lyon, \textit{Belgium}, 13.} The Normans also situated themselves in the center of the region, which they called Louvain.\footnote{Louvain, or Leuven, is located about 25 kilometers east of Brussels on the Dyle River. Some have attributed the location of the site of a Viking fortress. State, \textit{Historical Dictionary of Brussels}, 178.} Arnold, who had received the lands in 887, eventually managed to drive out the Normans in the decisive Battle of Louvain in 891.\footnote{Others report that Brabant was eventually delivered from their ravages in 895. See Henne et Wauters, \textit{Histoire de la Ville de Bruxelles}, 17.}

Soon after, the area then went to the successor of Arnold, Louis the Child (d. 912), and then to the west Frankish king Charles the Simple (898-922). But in 913, Charles the Simple’s son, Giselbert, succeeded him, causing much dispute among the rulers of France and Germany at the time. Henry I, ‘the Fowler’ (919-936), then stepped in, aiding the German cause.

In 925 Henry I recovered all the lands of Lorraine for Germany. As a result, “the Scheldt [once again] became the boundary between France and Germany. For the time being, Bruges and Ghent would be in the orbit of France, while Antwerp, Brussels, Leuven, and Mechelen would be in the German world.”\footnote{Cook, \textit{Belgium}, 4.} In an attempt to form some alliances, Henry I granted Giselbert the lands in 928 and gave his daughter, Gerberga, in marriage to Giselbert. Still, Giselbert pledged loyalties to Louis IV of France. This pledge put Giselbert in direct conflict with the German Emperor Otto I (936-973). The
conflict soon fizzled when Giselbert drowned in 933.\textsuperscript{124} Otto I then appointed his brother, the Archbishop of Cologne, Bruno (d. 953), to govern the region. In 953, Bruno died, at which time Lorraine was divided into Upper and Lower Lorraine. What would later become Brabant fell under the banner of Lower Lorraine,\textsuperscript{125} which included Lorraine and the Low Lands east of the Scheldt.\textsuperscript{126}

Years of crisis and years of German Emperors appointing leaders in Lorraine ensued. Lorraine came under the rule of Emperor Otto II (r. 967-983) and in 977 Otto II gave Lorraine as a German \textit{fief} to Charles of France (953-991), the brother of Lothair of France. The details of the transition are intriguing. For some reason, Charles had been exiled by his then-king brother, Lothair. In a political, and probably personal move, Charles switched sides by allying with his brother’s rival, Otto II, the Holy Roman Emperor. Charles’ oath of vassalage to Otto II resulted in the \textit{fief} that would become Brussels.\textsuperscript{127}

The son of Louis IV d’Outremer and Queen Gerberge, Charles was one of the last direct descendents of Charlemagne. While it is not certain whether he was born in Brussels, we do know that Charles made Brussels his home. Between 977-979 he constructed a castle (often called, simply, the \textit{castrum}), the creation of which tends to mark the “official” foundation of the town of Brussels.\textsuperscript{128} Charles situated the castle “on an island in the Senne [where] the site served as a base camp strategically situated both to

\begin{footnotes}
\footnote{125} State, \textit{Historical Dictionary of Brussels}, xxiii.
\footnote{128} As opposed to the settlement by Saint-Géry. State, \textit{Historical Dictionary of Brussels}, xxiii.
\end{footnotes}
facilitate Charles’s ongoing conflicts with the French crown and to guard against the rising power of the neighboring county of Flanders.”\footnote{129} In addition, the spot was probably chosen for its defensive position since it provided for the control of passage to the west\footnote{130}—the castrum was founded at the point at which one could no longer continue navigating up the river.\footnote{131} Thus, it was a good place to unload and load goods for transfer. Houses, chapels, and markets soon followed its construction. The site also had religious significance—it was located on the original island and home of Saint-Géry. Thus, Charles of France oversaw the transfer of relics of Saint Gudule (which were checked for authenticity) to the Saint-Géry chapel on 6 July 978.\footnote{132} The transfer of relics laid the foundation for the city’s religious history,\footnote{133} and Saint Gudule became one of the patron saints of the town.\footnote{134}

After the death of Charles in 991, the region then passed to Charles’ son Otto in 1001, who became its count. In 1004,\footnote{135} however, Otto died sonless.\footnote{136} Since Otto did not have an heir, “the castles of Brussels, Vilvord, Louvain, and all the adjoining estates, the nucleus of the territory which later on formed the Duchy of Brabant, fell to his brother-in-law Lambert Balderic (Lambert I).”\footnote{137} At times, Lambert I (d. 1015) called himself the Count of Brussels, and at other times the Count of Louvain. Either way, he

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\footnotesize
129 Ibid.
131 State, Historical Dictionary of Brussels, 284.
132 Henne et Wauters, Histoire de la Ville de Bruxelles, 19.
133 State, Historical Dictionary of Brussels, xxiii.
134 See Ernest Gilliat-Smith, “Brussels.”
135 Henne and Wauters give a date of death of 1005. See Henne et Wauters, Histoire de la Ville de Bruxelles, 21.
136 All of the preceding information on Lorraine comes from Hartig, “Lorraine.”
\end{flushright}
was the person to which all the later dukes of Brabant traced their descent. Eventually, the counts of Louvain took the titles of the dukes of Brabant.138

In 1015 Henry I, Count of Leuven, inherited Brussels, and after a short reign Brussels went to Lambert I’s son, Lambert II.139 By the end of Lambert II’s reign in the mid-eleventh century, the town of Brussels140 had grown into a formidable center, sporting several manors and fortresses that were protected by city walls.141 In addition to a wall, Brabant was also marked and protected by natural boundaries: the Escaut and the Haine (south); in the east was the Forest charboniere and the Dyle. The duchy was divided into four parts (comtés), and it was surrounded by the rivers and the forests from which the townspeople received their supplies.142 Lambert II’s reign also saw the creation of a new principal church of Brussels, consecrated under the archangel of Saint Michael. In addition, the remains of Saint Gudule were again translated in an elaborate procession on 16 November 1047. Saint Michael later became one of the patron saints of the city, and the location of the first church later evolved into the present-day Cathedral of Saints Michel-et-Gudule.143

In the mid-eleventh century Henry II (r. 1054-1071), Lambert II’s brother, followed Lambert II in power. Henry II was then succeeded by his son, Henry III (d. 1095), who had married Gertrude, the daughter of Robert the Frison.144 Henry III was the

138 Bædeker, Belgique et Luxembourg, 16. The name for the dukes of Brabant came from the Braka River. See State, Historical Dictionary of Brussels, 43.
139 Henne et Wauters, Histoire de la Ville de Bruxelles, 20.
140 See map one.
141 The first wall was constructed in 1040. Henne et Wauters, Histoire de la Ville de Bruxelles, 22.
142 Vanderkindere, La Formation Territoriale des Principautés Belges au Moyen Age, 102.
144 Henne et Wauters, Histoire de la Ville de Bruxelles, 39.
first to unite all the separate lands in the region under one domination, which earned him the title of the “comte et avoué de la patrie brabançonne.” Henry III also constructed a new castle, the Castle Coudenberg. The name of the castle came from Coudenberg or Koudenberg (“cold hill” in Dutch), which is the low-lying hill that overlooks the lower town. The upper town stood in opposition to the lower town, which often flooded.

Eventually, “the fortress evolved into the Coudenberg Palace, the residence of reigning dukes, which secured the location’s status as the area of the upper town where government ministries, banks, and the homes of the well-to-do and influential have been located.” The castle also functioned as the residence for the rulers of Brabant from the fourteenth to the eighteenth centuries, and it increased in size and grandeur as their power grew. In addition to the castle, sometime between 1047 and 1121 the chapel of the rulers of Brabant, Saint-Jacques-sur-Coudenberg, was constructed in the castle, while a family member of the duchy of Brabant restored and expanded the church of Saints-Pierre-et-Guidon by creating a chapel to Saint Peter in 1078. The original site was part of a pilgrimage cult of Saint Guidon (c. 950-1012).

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145 Ibid., 34.
146 There is much dispute over when exactly the castle was created and who created it. Henne and Wauters attribute it to either Henry II or Henry III. The castle is dated to sometime at the end of the eleventh century and the beginning of the twelfth century, but it was probably constructed starting between 1041-1047 under Lambert II, making the situation even more difficult to understand. See Henne et Wauters, Histoire de la Ville de Bruxelles, 34. Finally, others date it to later, perhaps under Godfrey I. For even more information about the construction date, see Paul Combaz, “La restauration de la Tour Noire à Bruxelles: enceinte murale du XIIe siècle,” in Annales de la Société d’Archéologie de Bruxelles: Mémoires, Rapports et Documents, tome 3 (Bruxelles, 1889), 182-9.
147 State, Historical Dictionary of Brussels, 82.
148 Ibid.
149 Ibid., 11. For more information on the cult of Saint Guidon, see J. Lavalleve, “Notes sur le Culte de Saint Guidon, in Annales de la Société d’Archéologie de Bruxelles: Mémoires, Rapports et Documents, tome 37 (Bruxelles, 1934).
While significant changes were occurring, the greatest evolution was yet to come. Godfrey I, the Bearded, gained power in 1095, and he ruled “dei gratià Bruxellensem castelluanum.” In 1106 Emperor Henry V granted Godfrey I the title of “duke of Lower Lotharingia,” which conferred upon him regalian rights over this entire area. […] The dukes used their title as a legal basis for imposing uniform public authority over Brabant. They made a few marriage alliances with local nobles and insisted on their rights as feudal lords, but they emphasized the public legal aspect of their authority more than its feudal or dynastic side.

Thus, 1106 marks the beginnings of a significant duchy and town, one that would grow to be an exemplum of towns, town life, and town governance in the twelfth and thirteenth centuries. Yet, while the political components were in place for the emergence of a significant town and culture, religious organizations were also developing. Thus, before turning to other political, territorial, and urban developments post-1106, it is first necessary to examine the religious and cultural changes that occurred in the region.

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150 Godfrey I was roughly contemporary with Charles the Good, Count of Flanders (1080/86-1127), as well as Louis the Fat. As chronicled by Galbert of Bruges, Charles was murdered on 12 March 1127 in the church of Saint Donatian in Bruges. Galbert describes the murder as a result of an embittered noble family. The murder could be an awakening of sorts, which alarmed much of the nobility and threw the areas of France, Germany, Flanders, etc. into a political battle for power. Godfrey I and his successors were part of the disputes as they engaged in many regional wars for power. For more information see Galbert of Bruges, *The Murder of Charles the Good Count of Flanders*, James Ross trans. and intro. (New York: Columbia University Press, 1959, 2005). In addition, the *Life of Louis the Fat*, as chronicled by Abbot Suger (1081?-1151), discusses some of the problems many nobles at the time were facing in terms of quelling the landed aristocrats. See Suger, Abbot of Saint Denis, *The Deeds of Louis the Fat*, trans. with intro. & notes by Richard Cusimano & John Moorhead (Washington: Catholic University of America Press, 1992).


152 Nicholas, “The Role of Feudal Relationships,” 120.
THE ‘LONGUE DURÉE’ OF PHILANTHROPY IN BRABANT: THE RISE OF CHRISTIANITY, HEALTH CARE, AND HOSPITALS IN MEDIEVAL BRUSSELS

Introduction

General surveys that take into consideration the entire European continent, as well as outlying islands such as England and Ireland, largely dictate studies on the spread of Christianity in the early Middle Ages throughout the high Middle Ages. While these studies do create a basis from which one can generally understand the spread of Christianity, a more detailed and focused approach is needed for the high medieval city of Brussels.¹ As shown in an earlier chapter, Brussels in particular and the duchy of Brabant in general did not emerge in static fashion. In fact, years of tribulation dictated much of the growth of the city and duchy. Because of the nature of that development and because Brussels was not a center of power, culture, or religion in the early Middle Ages, the city has been largely ignored in the context of the medieval world. Similarly, the Christian origins, while not as turbulent as elsewhere were still shaky in Brussels. Yet, it is through the Christian origins that we can trace the rise of the hospital of Saint John. But to assume that Brussels came to Christianity and Christianity came to Brussels in a fashion like that of the rest of Europe would be somewhat misleading. Thus, a more

¹ This more-focused approach will rely on the works of S. J. E. de Moreau and Ludo Milis. Moreau’s several-edition study on the history of the church in Belgium is perhaps the greatest and most comprehensive work on the subject. It begins with early religious Celtic groups and continues through the modern age. The work, however, is in French and is somewhat dated. The first edition was produced in 1914, and the revised second edition came out in 1945. The more recent 2005 work of Ludo Milis, moreover, is a collection of essays that explores medieval religion and culture in the Low Countries. This edition, however, lacks the depth and narrative of Moreau but brings with it ideas about the influence of religion on the people, the interactions of religion with the state, and the rise of various mentalities associated with religion. The two complement each other nicely, making up for what the other lacks (or simply does not seek to address).
detailed study of the rise of Christianity, philanthropy, and health care in Brussels are all needed to better understand the context of the hospital of Saint John.

The Early Christianization of Brussels and Brabant

It should not come as a surprise that the earliest examples of Christianity and Christianization in Brussels began on Roman foundations. Even before the time of Diocletian (284-305) the Romans had begun to establish camps along the Rhine at Neuss, Cologne, Bonn, Mayence, and Strasbourg. These camps and the roads between them would later have a great impact on the spread of Christianity. Eventually, the settlement of the Romans and their later Christian followers in the area spurred changes in religious matters, such as the disappearance of “druidism,” and teaching that their [Celtic and/or pagan] idols were human and symbolic representations.

With the rise of the toleration of Christianity under the Roman Emperor Constantine (306-337) in the early fourth century, Christianity slowly began to spread to Roman provinces, including Belgica. Christianity, however, had arrived on the scene late simply because of the geography of the country. The sea shores, forests, and rivers all made the area difficult for colonization. This difficulty had an effect on the conversions

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2 This chapter in no way claims to be a full recounting of the history of Christianity in Brussels, nor a history of the rise of the medieval church and related structures. It is merely meant to set the stage and highlight some of the important structures and influences that Christianity, religious leaders, and religious organizations had on the hospital of Saint John in Brussels. This being said, there will be certain areas and subjects in this history that will be explored in more depth than others, and there will be areas that are neglected to an extent.
4 As mentioned earlier, the hospital of Saint John was modeled on a hospital in Cologne, and later, the hospital of Saint John would serve as a model for another sister hospital, Saint Julien, in Liège. These areas were all settled in the early periods of Roman and Christian influence, and thus they were all connected via the Roman road systems.
5 de Moreau, Histoire de l’église en Belgique, 3-4.
6 Ibid., 15, 17, 19.
of the peoples: rarely were the people congregated together, so conversion was a long and
drawn out process that typically went from person to person and not village to village.

When and where Christianization did occur, the transition from paganism was facilitated
by the Roman network of roads. Indeed, it was along the most important paths between
Cologne and Boulogne that the area witnessed the first infiltration of Christianity. By
the fourth century, the area boasted several bishops: Saint Materne, bishop of Cologne
(314) and Saint Servatius, bishop of Tongres (343). Later in the fourth century, the city
of Liège received a bishop, but other regions of Belgium, including Brussels, would
have to wait.

Although Roman occupation of these provinces deteriorated as Frankish tribes
moved into the area, the impact of Roman administration as the basis of Christianity had
played a major role in Christianization. We know, for example, that

the Roman administration centers had played a more or less early, and a more or
less important, role in promoting Christianity. The civitates had become the
centers of a number of bishoprics, which meant that secular and spiritual power
was exercised from the same center. ‘Church and State’ in fact went hand in hand
from the fourth century onwards.

Thus, long after the Roman legions departed, the civitates remained in place. Later, the
same civitates were divided into pagi and dioceses, which would come to dictate
Christian divisions in the area, including the pagus of Brussels. The grandest of the

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7 Ibid., 16. These roads were important not only for the initial spread of Christianity. Later, the same roads
would help to facilitate the spread of the hospital movement, as well as the influence of the hospital of
Saint John to other areas.
8 de Moreau, Histoire de l’église en Belgique, 29.
9 Later, the importance of the bishop in the area will be expounded upon in detail. After all, the bishop of
Cambrai approved the creation of the hospital of Saint John and was involved in hospital affairs after.
10 Beyond these three, the existence of a bishop and a bishopric in other areas of Belgium in the fourth
century has not been proven. de Moreau, Histoire de l’église en Belgique, 46.
11 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 53.
diocese were those of “Tongres and Cambrai, created, respectively along the ancient civitates of Tongres and Nerviens or Cambrésiens.”

During later periods of invasion and settlement by Frankish tribes, the structures of Christianity persevered, but “moribund Gallo-Roman Christianity, which to some extent survived the barbarian invasions, was faced with the infiltration of the beliefs of the invading peoples.” Although not uncommon in areas of early Christian conversion, the permeation by various Frankish tribes left many contemporaries questioning whether Christianity would endure in the area. The issue was settled during the Merovingian period (c. 600) when a ‘second conversion’ of the region began. Needing forms of administration to oversee the spread of Christianity, many of the new Christian adherents and missionaries returned to and continued to rely on the Roman “organization [of] Belgica secunda, divided into a number of civitates[. It once again] became the framework of the diocesan organization without a great deal of adjustment.” The Merovingian period also witnessed the foundation of abbeys, many of which were founded by the great saints of Belgium and endowed by nobles, mayors of the palace, and kings. Later, the Merovingian abbeys were replaced by Carolingian ones, during

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12 de Moreau, Histoire de l’église en Belgique, 45. The diocese of Cambrai would include Brussels within its jurisdiction, and because the hospital of Saint John had a chapel, the hospital’s administrators would sometimes have to answer to the bishops of Cambrai. It would be, however, be some time before the bishops welded any sort of power. First, Christianity had to triumph in a largely pagan region.
13 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 55.
14 Ibid.
15 Moreau names the following saints: Amand, Bavon, Landelin, Ursmer, Ghislain, Vincent, Humbert, Feuillien, Bérégise, Remacle, Hadelin, Trudon, Wiron, Plechelm, Aldegonde, Waudru, Gertrude, Begge, Landrade, Harlinde and Relinde, and Berthe. He also outlines a number of the saints and their monasteries. See de Moreau, Histoire de l’église en Belgique, 133.
16 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 59. Founding of abbeys and other religious institutions would become part of a significant tradition that would be practiced by succeeding nobles and wealthy townspeople, at least after the creation of towns. King Dagobert I (623-
which a similar tradition of founding by the leading nobles and religious figures continued.\textsuperscript{17}

With all the advances though, Belgium was still behind in other areas. While Belgium was receiving its first monasteries (625-730), other areas on the continent were undergoing a period of reform—many of the early bishops in Gaul had abused their authority and exploited the newly found riches of the church.\textsuperscript{18} A monastic revival, headed by Saint Columban after 630, brought the monasteries and the bishoprics back into the fold in Gaul.\textsuperscript{19} Furthermore, it was only contemporary with these changes that Brussels as a city was founded, and sometime between 585 and 590, Saint-Géry (7-619) became the bishop of Cambrai. Although the name ‘Brussels’ only began appear in documents in the tenth century, the city itself was already growing as a Christian and religious center.

In addition, greater political consolidation of the lands of the Brabant region allowed for more significant Christian missionary advances. In the seventh century, King Dagobert (632-639) conquered the Delta area of the northern part of the Low Countries, which included the areas that would become Brabant. The area also witnessed the expulsion of the Franks from Utrecht in the mid-seventh century.\textsuperscript{20} The rise of political

\textsuperscript{639}, for example, was one of the principle protectors of Saint Amand. See de Moreau, \textit{Histoire de l’église en Belgique}, 157.
\textsuperscript{17} It should, however, be noted that Merovingian abbeys were “in contrast to what would become the tendency under the Carolingians[,] the typical abbey complex consisted of various smaller churches, each of which had a specific function,” and many of these abbeys were built on Merovingian cemeteries. Milis, \textit{Religion, Culture, and Mentalities in the Medieval Low Countries}, 59.
\textsuperscript{18} de Moreau, \textit{Histoire de l’église en Belgique}, 163.
\textsuperscript{19} Ibid., 164.
\textsuperscript{20} Milis, \textit{Religion, Culture, and Mentalities in the Medieval Low Countries}, 60.
stability and urban centers allowed for further missionary expeditions. Evangelization and conversion of the area around the rivers of the Escaut and the Meuse, however, occurred much differently from that of Frisia. 

During the seventh and eighth centuries the area that would become Brussels witnessed the rise of missionaries, most of whom hailed from Ireland and North England. These missionaries, however, were not the first to serve as apostles to the area; Columbanus (540-615), the Irish missionary famous for founding several monasteries, including Luxeuil and Bobbio, had preceded many of them. Willibrord (685-739), the “Apostle of Frisia,” would go on to become one of the greatest Christian missionaries in the Brussels region.

In 690 Willibrord decided to venture to Frisia, which was still primarily pagan. Hearing that “in the north regions of the world the harvest was great but the laborers few,” Willibrord decided to sail for those parts and, if God so willed, “to bring the light of the Gospel message to those people who through unbelief had not been stirred by its warmth.” In the 690s, Willibrord received blessings from Pope Sergius I (687-701) and from Pepin (c. 690) to continue his mission, and he went on to found a number of churches and monasteries in the area. In 695, he became the archbishop of the Frisians under Pope Sergius I. He was also given land from Irmina, the mother of Pepin II’s wife,

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21 Ibid., 56-7.  
22 de Moreau, Histoire de l’église en Belgique, 52.  
23 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 57.  
24 Willibrord was born in 658 on the island of Britain in the province of Northumbria. He was educated at the monastery of Ripon in Northumbria, where he stayed until 690. See Alcuin, Life of Saint Willibrord.  
26 With the death of Pepin and the rise of Charles in 714, Willibrord continued his missions to the Franks. See Alcuin, Life of Saint Willibrord, 201.
outside of Utrecht to found a monastery, and in 698 he founded the monastery of Echternach.\textsuperscript{27} Thanks to Willibrord’s efforts, the area became a center for Christian and cultural learning and missionary work for centuries to come.\textsuperscript{28} In addition, because of the labors of Willibrord, his companions, and followers, the last mention of pagans (but not pagan practices) occurred between 705 and 727 in Campine,\textsuperscript{29} which was in the *Capitularia regum Francorum*.

As changes to Christianity continued in the area, so did political change, and the changes to one affected the other. From roughly 750 to 843 the Carolingians dominated the area of early Brussels, where “the emphasis in this period was more on raising the level of penetration of Christianity than on increasing its geographical extent.”\textsuperscript{30} Charlemagne’s tactics and goals in what would become the Brabant region differed some from other parts of the Empire, especially the East. While he was working to “make the link between secular and spiritual imperialism even closer,”\textsuperscript{31} in the Low Countries as elsewhere, it was mostly in the East that “Charlemagne and his advisors undertook a mission that used the faith quite unashamedly as an instrument for the subjugation of a conquered people.”\textsuperscript{32} Because Christianity was fairly entrenched by this time in the Low

\textsuperscript{27} The land lies roughly in modern Luxembourg. See Richard Fletcher, *The Barbarian Conversion: From Paganism to Christianity* (Berkeley: University of California Press, 1999), 200. This is one example of many monasteries that would later become problematic for the church. Although monasteries like this one were founded in the name of God, they were also founded by the funds of noblemen and women, leaving the church with less independence in the area in later years.

\textsuperscript{28} All preceding biographical information on Willibrord comes from *Soldiers of Christ: Saints and Saints’ Lives from Late Antiquity and the Early Middle Ages*, Thomas F.X. Noble & Thomas Head, eds. (University Park: Pennsylvania State University Park, 1995), 189-191. For more information within the context of the “pagan conversions” see Fletcher, *The Barbarian Conversion*, especially 199-205.

\textsuperscript{29} Milis, *Religion, Culture, and Mentalities in the Medieval Low Countries*, 62.

\textsuperscript{30} Ibid.

\textsuperscript{31} Fletcher, *The Barbarian Conversion*, 195.

\textsuperscript{32} Ibid.
Countries, the focus diverted to “eliminating superstition.” Included in these “superstitions” were items such as “the swinish feasts in February,” “the sacred rites of Mercury and of Jupiter,” “the fire made by friction from wood, that is, the ‘nodfyr,’” “the bed-straw which good folk call Holy Mary’s,” “the eclipse of the moon—which they call, ‘Triumph, Moon!’,” and “an idol made of dough.”

The war on “superstitious practices” was waged from the top down and the center outward. The effort touted Charlemagne as “the new David who was obliged to enforce the law of God, a law that superseded all existing legislation.” Some bishops appreciated his role, proclaiming that in Charlemagne the church had been given “a head so pious, so devoted to the service of God. He makes the spring of sacred power gush forth, and gives holy nourishment to Christ’s sheep to shape them according to divine teaching. […] He is the head who surpasses all other kings of the earth by his holy wisdom and pious zeal.” Others, however, feared it. Thus it should not come with surprise, then as is now, that many church officials tensed under “such a melding of temporal and spiritual domination,” the consequences of which led to less independence for the church.

On the one hand, since many of the abbeys and churches had been founded and supported by the ruling elite, “they were also vulnerable when these same rulers ran into

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33 This can mostly be attributed to the missions of Willibrord and later Boniface.
34 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 62.
37 Ibid., 130.
38 Ibid.
financial difficulties” and usurped previously-donated lands. On the other hand, the period also saw a number of cathedrals and large abbeys, such as Cambrai and Tournai, that acquired immunity from their rulers. The practice was so clearly entrenched that modern scholarship refers to it as the “Carolingian secularization.” This notion was only augmented by the role of the local bishop. While the bishop did not necessarily have a direct role in conversions and missionary efforts, he was responsible for the diocese and its “spiritual cure[.] He was in theory chosen *a clero et populo* (by clergy and people), but in reality was appointed by the ruler.” The bishop, as the chief religious person in the diocese, maintained an overwhelming monopoly over the sacraments, whereas most of the lower clergy suffered from incompetence and the lack of training that plagued church officials in the empire.

As the years progressed, the tug and pull between the temporal and spiritual power grew in the Empire, as well as in the area that would become Brabant. In a period that lacked centralized control and protection, new bonds were eventually forged. The answer to where one’s loyalties lay depended on one’s heart and more importantly one’s sword. The Treaty of Verdun (843) changed the political situation in what would become Brabant and created new territorial divisions, which subsequently led to new diocesan

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40 Ibid., 64.
41 de Moreau, *Histoire de l’église en Belgique*, 204.
43 Milis, *Religion, Culture, and Mentalities in the Medieval Low Countries*, 64. For example, Charlemagne in 805 declared that Gerbald, bishop of Liège, received his power from God and the emperor: “*omnipotente Deo et nostra ordinatione.*” Ganshof, *La Belgique carolingienne*, 129.
45 F. L. Ganshof discusses these problems at length, and he provides the examples of Gerbald (787-810) and Waltcaud (810-831), bishops at Liège who attempted to address the issue of incompetent priests. See Ganshof, *La Belgique carolingienne*, 130.
divisions. In the meantime, the system in place for the founding of churches, abbeys and monasteries was certainly that of the *Eigenkirchen*, and it was “clear that the initiative for the founding of a new church could come from just about anyone.” Undoubtedly, the period post-843 was a time of contested loyalties in both the religious and political realms of the Brabant region.

Even so, many of the bishops remained loyal to their prince, which could be attributed to the simple fact that many of the bishops were part of the Carolingian house or court. Under Charlemagne especially, admission to the episcopacy was controlled by the great ruler, who generally “opted for clerics who had served in his palace chapel.”

Even with these loyalties considered, the simple fact remained that the princes were funding bishops and their organizations, which clearly dictated loyalties. Thus, it can be said with some certainty that political change precipitated religious change. Although religious institutions had always been largely tied to the political structure, now more than ever would this relationship continue and would lay the foundations for political involvement in religious institutions during later years.

These new evolutions, however, would have to wait. Much of the area of future Brabant and its political/organizational structure was disrupted by the Norse invasions of the ninth and tenth centuries, which had a tendency to target wealthy religious institutions that typically lacked significant fortifications. Three waves of invasions hit Belgium between 850 and 892. The first wave (850-879) did not hit most of the religious centers

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48 Ibid., 68.
49 Ibid.
in the Low Countries because they were too far inland. The second wave (879-885), however, was by far the worst.\textsuperscript{51} When Scandinavians struck, many of the occupants had to flee. As a result “the largest part of their heritage [of the religious institutions] fell into the hands of secular lords, particularly into those of the count of Flanders.”\textsuperscript{52} Thus, from the ninth and tenth centuries forward, princes, counts, and dukes were largely in control of the area’s religious institutions. This situation, however, was soon to change.

Evolution, Reform, and Renaissance During the “Feudal Period”: The Organizational and Hierarchical Foundations of the Hospital of Saint John

The period between 925 and 1070 has been named the “feudal period” in Brabant, not only in terms of territorial acquisition and power, but also in terms of the role of the church.\textsuperscript{53} What distinguishes this period from that of the preceding is that in Brabant the immunity enjoyed by the ecclesiastical institutions undermined the exercise of power by the central government. Administration and justice were exercised by the local feudal lord, and the ruler’s officers (the counts) had no right to interfere. […] The lack of legal expertise among the clergy had made it necessary to appoint a laymen to represent them before the courts, to administer their property and to protect them.\textsuperscript{54}

While what one generally saw at this time was a continued tug-and-pull between political and religious factions for power,\textsuperscript{55} the situation cannot simply be described as a cut-and-dry fight for power; more elucidation is needed on the subject.

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\textsuperscript{51} de Moreau, \textit{Histoire de l’église en Belgique}, 233.
\textsuperscript{52} Milis, \textit{Religion, Culture, and Mentalities in the Medieval Low Countries}, 70.
\textsuperscript{53} One, however, can still consider to an extent events through the thirteenth century as part of “feudal consolidation.”
\textsuperscript{54} Milis, \textit{Religion, Culture, and Mentalities in the Medieval Low Countries}, 71.
\textsuperscript{55} The preceding information merely touches on what is an extremely complicated and deep subject. For the sake of this argument, the details are not necessary. For more information, see Vanderkindere, \textit{La formation territoriale}. 

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The principality of Brabant “was originally formed by the counts of Louvain from the counties of Louvain and Brussels and from the pagus Bracbatensis.” In 1106, Emperor Henry V gave the duchy of Lower Lotharingia to Count Godfrey of Louvain. These regalian rights allowed the dukes to use “their title as a legal basis for imposing uniform public authority over Brabant.” To bolster this authority, the dukes of Brabant “made a few marriage alliances with local nobles and insisted on their rights as feudal lords, but they emphasized the public legal aspect of their authority more than its feudal or dynastic side.” Finally, most of the dukes relied on local nobles trained in legal expertise to assert their claims. All of these elements allowed the dukes to rise to power in the area without the aid of the church.

After having consolidated their authority inside and outside of Brabant, it was only natural that the dukes would turn to the church and the ecclesiastical principalities. During the years of “feudal consolidation,” several ecclesiastical principalities governed by bishops had emerged, many of which had special privileges. In an effort that was based on both military process and careful diplomatic negotiations, kings and dukes used the bishoprics of Cambrai, Liège and Utrecht, showering them with grants of land, privileges, and regalian rights. In this process lay princes took advantage of several bishoprics, leaving the “ecclesiastical principalities [open] to the depredations of lay

56 Nicholas, “The Role of Feudal Relationships in the Consolidation of Power,” 120
57 Ibid.
58 Ibid.
59 Ibid.
60 Ibid., 121, and also Chapter One for more details concerning these events.
61 Nicholas, “The Role of Feudal Relationships in the Consolidation of Power,” 123.
62 Ibid.
vassals.” For example, the bishop of Cambrai, Theudo (972-976), eventually gave up after a long battle against the area’s knights and castellans, which in due course forced him to give up and to return home to Cologne.

In 1122, with the decision at the Concordat of Worms, the Emperor lost his ability to appoint bishops, which certainly had an effect on the rulers of Brabant who practiced similar traditions. Thus, in order to guarantee the secular power of the bishopric that lay leaders once had, many had to seek new means. Lay leaders often turned to donations and confirmation of properties and rights through gifts of land, regalia, etc., all of which grew as means to secure such privileges. The result, however, was not always the intention: “many cadets of princely houses became bishops of Liège, Cambrai, and Utrecht.” In Lotharingia, for example, these changes, along with previous evolutions, as well as luck and careful diplomatic maneuvering, led to the formation of the prince-bishopric in Liège. There, the bishop both controlled the church and the territory, hence the title. Even more than the title, the first prince-bishop of Liège, Notger (972-1008), long before the Concordat of Worms, “used both diplomatic skill and military might to destroy some nobles’ castles and prevent the construction of others.”

As the political battles with the local dukes waged, bishops took up a concerted effort to aid the local populace. For example, Notger was one in a long line of bishops who demonstrated his concern for charity and basic health care. This role included the

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63 Ibid, 124.
64 Ibid., 123-4.
65 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 72.
67 Ibid., 123.
reconstruction of a hospice at Liège.\textsuperscript{68} Later bishops, such as Baldéric II (1008-1018) and Wazon (1042-1048),\textsuperscript{69} continued in a manner similar to Notger, so much so that in recent scholarship the two men are awarded the title, “\textit{père[s] des pauvres}.”\textsuperscript{70} The work these men did and the institutions they created spurred the creation of other institutions during the later hospital movement of the twelfth century.\textsuperscript{71}

In addition to the changes to Liège, one of the greatest evolutions in this period was the formation and consolidation of the bishopric of Cambrai, which oversaw the religious activities of Brussels and much of the Low Countries. The bishopric of Cambrai was forged out of constant political consolidation and deconsolidation and a constant and fierce struggle between the bishops and the castellans, all of which began as early as when the area was still \textit{Belgae secundi}. Later, the Franks conquered what would be Cambrai in 440, and by the sixth century Clovis (481/2-511) joined it to the other small Merovingian principalities. During these years of political consolidation, Cambrai received its first bishops, who served as the bishop of both Arras and Cambrai.\textsuperscript{72}

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\textsuperscript{68} de Moreau, \textit{Histoire de l’église en Belgique}, 29.
\textsuperscript{69} Obviously there is a gap between these two individuals and their years of service. While other bishops did serve between the two, only Baldéric and Wazon are listed here for their outstanding work on behalf of poor relief.
\textsuperscript{70} de Spiegeler, \textit{Les Hôpitaux et l’Assistance à Liège}, 48.
\textsuperscript{71} More importantly, the works of the bishops of Liège would have profound influence later. In creating institutions for the poor and in caring for the poor, they began a tradition that other religious leaders in the area would follow, such as those who created the hospital of Saint John. After its creation, a sister hospital to Saint John’s would be founded in Liège, Saint Julien, which would bring the charitable movement full circle.
\textsuperscript{72} Even though the diocese system worked under the Carolingians, it was not ideal by high-medieval standards and needs. Thus, changes were made, such as the splitting up of the diocese of Cambrai-Arras. Milis, \textit{Religion, Culture, and Mentalities in the Medieval Low Countries}, 83.
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bishops resided at Arras until the death of the bishop and saint Vedulphus (545-580), at which point the episcopal residence was transferred to Cambrai.73

The consolidation of Cambrai continued during the Carolingian years. With the division of the Carolingian Empire, especially after 843, the bishopric passed from father to son until 925, at which point it reached a point of relative stability in terms of inheritance.74 Because the bishopric was in the part of Lotharingia that passed under German rule in 940, later rules and privileges of the diocese would be afforded by Emperor Otto I, “the Great” (936-973),75 who in 941 granted the bishop of Cambrai the same privileges that had been given by the Frankish kings,76 including the rights of “‘tonlieu de la monnaie’ de la ville.”77 The privileges of the bishop grew, and by 1007, Henry II gave to the Bishop of Cambrai the “authority over the countship”78 of Cambrésis[,]” making the Bishop of Cambrai “the overlord of the twelve ‘peers of Cambresis’”.79 Thus, Eruuin (995-1012), the bishop at the time during which Henry II transferred these privileges, became the first prince-bishop of Cambrai.80

76 Ibid.
77 de Moreau, Histoire de l’église en Belgique, 10.
78 The Latin term used in the conference is comitatus. See de Moreau, Histoire de l’église en Belgique, 15.
80 It should also be noted that the bishopric, or “pagus Cameracensis[,] ne formait pas un domaine bien considerable […] 10 kilomètres au nord, 15 au nord-est, 35 à l’est et au sud-est, 25 au sud, 15 au sud-ouest, 5 à l’ouest et enfin 15 au nord’ouest de la métropole.” See Gestes des Évêques de Cambrai de 1092-1138, xxij.
A long line of famous successors followed Erluin, including “Alberic and Hildoard, contemporaries of Charlemagne, […] who gave to the diocese a sacramentary and important canons,” Gerard the Great (1013-1051), “formerly chaplain to St. Henry II, Emperor of Germany, and helpful to the latter in his negotiations with Robert the Pious, King of France,” and Robert II of Geneva (1368-1371), the “antipope in 1378 under the name of Clement VIII.”  

Although the new bishops governed the area, they were not counts of Cambrai or Cambrésis. Rather, Cambrésis was governed by royal officers who had the title of *comte* (*comes*).  

As the bishopric and the area grew in power and population, further divisions had to be drawn to better meet the needs of the growing populace. In the twelfth century the bishopric was divided into five archdioceses: Cambrai, Hainaut, Valenciennes, Brabant, and Anvers. Then, in 1272, Brabant was divided once again into two archdioceses. The first kept the name of Brabant and the other became the archdiocese of Brussels. Also, “in Brabant, attempts were made in the thirteenth and again in the fourteenth century to separate Brabant from Cambrai and Limburg from Liège.” While the shape of the bishopric changed, its charitable traditions continued. For example, the *gesta* of

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81 Goyau, “The Archdiocese of Cambrai,” accessed 22 September 2009 at <http://www.newadvent.org/cathen/03209c.htm>. Goyau also lists the following bishops: St. Gaugericus (580-619); St. Berthoaldus (about 625); St. Aubert (d. 667); St. Vidicianus (667-693); St. Hadulfus (d. 728); Alberic and Hildoard; Halitgarius (817-831); St. John (866-879); St. Rothadus (879-886); Wiboldus (965-966); Gerard the Great (1013-1051); St. Lietbertus (1057-1138); Blessed Odo (1105-1113); Burchard (1115-1131); Robert II of Geneva (1368-1371); Jean IV T'serclaes (1378-1389); Pierre d'Ailly (1396-1411); Fénelon (1695-1715); and Cardinal Dubois (1720-1723).  
82 *Gestes des Évêques de Cambrai de 1092-1138*, xxiiij.  
83 Ibid., xxxi.  
84 Milis, *Religion, Culture, and Mentalities in the Medieval Low Countries*, 83 fn1.  
85 *Gestes des Évêques de Cambrai de 1092-1138*, xxiiij.  
86 The *Gestes des Évêques de Cambrai* often cites the word “*hospitium*,” which is used to describe hospitality or guest quarters, or even an inn, rather than an actual ‘hospital’. The major variation from this
Bishop of Cambrai, Burchard I (1115-1131), discusses the creation of a “Dei hospitium,” or a Hôtel-Dieu, hospice, or hospital. The hospital was created under the reigning bishops for the poor, and it was “magnificent” in composition.

The power that arose from Brabant’s bishops and their bishoprics would help to facilitate not only a homegrown reform movement (consequently against the rulers) but also the hospital movement. This power can be attributed to the fact that “bishops were the highest autonomous office holders of the Church in the Low Countries. Everything affecting external control of the Church revolved around them.” What made the situation unusual was the unprecedented role of the laity in the area. Because of the role of the laity, the “general powers of the bishop (provision of the cure of souls, collation of prebends, rights of visitation, and so on) were limited in several ways, albeit at different times.” Primarily, the power of the local bishops, which was specifically dictated by the theologians and canonists of the thirteenth and fourteenth centuries, lay in the right of visitation and correction and organization and control, especially for hospitals.

trend is in the gesta of Burchard I, which uses the word “hospitium” in conjunction with “Dei.” Together, these two words form the new phrase, ‘hospital of God’, which was created specifically for the poor and the sick. The usage of the words together in the gesta signifies the rise of these types of institutions, otherwise known as hospitals, in the area. Thus, not only was charity being provided by the most important spiritual advisors in the area, the creation of hospitals was also being headed by bishops.

87 Gestes des Évêques de Cambrai de 1092-1138, 134.
88 The text is as follows: “Ad sanctae Crucis atrium erat Dei hospitium magnifice compositum receptioni pauperum, quod urbis hujus presules et clericorum divites, casati, cives, milites, hereditarant pleniter de suis beneficiis, de culcitris, de feodis, de terries, de alodiis et multis rebus aliis. Hoc hospitale Domini cui volebant homini disponebant episcopo egetium regimini.” Gestes des Évêques de Cambrai de 1092-1138, 134-5.
89 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 118.
90 Ibid.
91 de Spiegeler, Les Hôpitaux et l’Assistance à Liège, 111.
92 Ibid.
As a result of the weakened bishops and powerful laity, demand for monastic reformers\textsuperscript{93} and the movements that accompanied them increased in the high Middle Ages. These movements were often referred to as the ‘Lotharingian reform movements’, and they were undertaken by people such as Gérard de Brogne (d. 959)\textsuperscript{94} and Bishop Adalbero (early eleventh century). This internal reform movement took off with so much speed that many of the international monastic reform movements, such as that of Cluny, never really penetrated the Low Countries. Other reform movements, however, such as the Gregorian Reform, did later make their way into the area, so much so that it forever reshaped religion and religious movements in Brabant and the Cambrésis bishopric.

The Gregorian Reform began early in Brabant and nearby areas. As was the case in the Lotharingian reform movements, many people were compelled to mend the faults of the clergy on their own. The influence for reform began in the dioceses of France, such as Thérouanne, Tournai, and Arras, and later spread to the dioceses of the Empire, including Cambrai, Liège and later Utrecht.\textsuperscript{95} In addition, by pure coincidence, “all the dioceses in the Low Countries, except for Thérouanne, experienced lengthy episcopates between 1068-1076 and 1091-1099, which aided the complete infiltration of reformist ideas.”\textsuperscript{96}

While the clergy and the reform of the monastic/church system occupied much of the concern of reformists, there were other aspects of the reform movement, such as a homegrown movement led by the laity. This movement was certainly a part of what can

\textsuperscript{93} Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 75.
\textsuperscript{94} For more on Gérard see de Moreau, Histoire de l’église en Belgique, 142-154.
\textsuperscript{95} Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 85.
\textsuperscript{96} Ibid., 86.
be characterized as a “twelfth-century renaissance.” 97 In the push for reform of the church, “the poverty movement was the main element in this wave of renovation. The call of the message of Christ, his example and the example of his first followers in Jerusalem, worked infectiously.” 98 This idea, coupled with the fact that the area in and surrounding Brabant had always been one of strong lay/clerical interaction, pushed the laity to become pivotal components of the movement. At the heart of the development was the rise of charities and of hospitals.

The Contributions of Western Society—The Hospital, Health Care and Social Welfare

From the birth of Christianity throughout the Middle Ages, charity, health care and the poor were all inextricably linked, so much so that the transformations of the high Middle Ages made care for the poor and sick a key and necessary tenet for Christian salvation. In modern parlance charity can mean an organization created to help those in need, voluntarily giving money to help people in need, help, money, or goods given to someone needing the items, and/or a tolerance in judging others. Yet, health care and charity in the Middle Ages were not charity as we think of today. As evidenced by the etymological roots in the Latin word caritas, which means both “love” and “charity,” medieval charity might simply refer to love, or a general good feeling for mankind. A duty to provide health care and even more generalized care for the poor is one component of caritas, which can be traced back to the very foundations of Christianity.

97 See Giles Constable, who notes especially the establishment of dependences in the Low Countries by the Clunie monks, indicating a greater infiltration of the Gregorian Reform movement, the very movement that sparks and characterized the religious “Twelfth-Century Renaissance.” See Giles Constable, The Reformation of the Twelfth Century (Cambridge: Cambridge University Press, 1996), 28.
98 Milis, Religion, Culture, and Mentalities in the Medieval Low Countries, 98.
Most ideas about how to care for the sick in early Christian communities were derived from interpretations of James 5:14-15, which discusses the anointing of the sick.\textsuperscript{99} James explained that “the prayer of the faith will save the sick, and the Lord shall raise them up, and if sins they may have committed, they shall be forgiven to him.”\textsuperscript{100} James also instructed his brethren to confess their sins “to one another, and pray for one another, so that [they] may be healed.”\textsuperscript{101} Systematic care for the sick became a component of Christian charity that tended to distinguish Christians from their pagan counterparts. Caring for the sick also served to fulfill aspects of the seven corporal works of mercy, which also included feeding the hungry, giving drink to the thirsty, welcoming the stranger, clothing the naked, visiting the sick, visiting the prisoner, and burying the dead.\textsuperscript{102} To gain the favor of Christ on the Day of Judgment, Christians were enjoined to care for the sick. And eventually, “the obligation to be charitable antedated the Church, which made charity a condition of salvation.”\textsuperscript{103} The transition, however, from Roman health care to something that was truly Christian, in not only origin but also form, took some time and modification.

\textsuperscript{99} It is the same passage that was later used in the Middle Ages to give priests the power of extreme unction. See Frederick S. Paxton, \textit{Christianizing Death: The Creation of a Ritual Process in Early Medieval Europe} (Cornell University Press, 1996).


\textsuperscript{101} James 5:16 NRSV.

\textsuperscript{102} These ideas are based on Matthew 25:31-46 NRSV, where Matthew lists the six virtues that Jesus will use on the Day of Judgment: “I was sick and you took care of me,” etc. To these six was added Tobit 1:17-19 NRSV, which includes the burying of the dead.

\textsuperscript{103} Mollat, \textit{The Poor in the Middle Ages}, 38.
Roughly two hundred years after the time of Christ, Quintus Septimius Florens Tertullianus c. 155-230 C.E., (Tertullian)\textsuperscript{104} along with many of the other early Church Fathers, attempted to explain the Christian religion and its various counterparts, including care for the sick. Tertullian made clear the function of Christian "clubs" in an attempt to show that they were "good" in his Apology. He argued that "[they] are an association (corpus) based on shared religious conviction, the unity of our way of life, and the bond of common hope."\textsuperscript{105} Tertullian included care for the poor and/or sick as one of the defining components of Christian clubs, and he praised the Christian "clubs" for caring for the poor, for providing burial, and for giving homes to orphans, all of which separated Christian clubs from old Roman associations.\textsuperscript{106}

But ideas pertaining to health care and care for the poor were not merely Christian in origin as Tertullian might lead one to believe; many ideas were adopted from other cultures of the Roman Empire. The Jewish synagogue served as a meeting place, a community center, a religious hub, a location for social activities, education, prayers, meetings, and charity, and the perfect site for hosting various events or festivals.\textsuperscript{107} Of these many elements, one of the most important for the Jewish communities was the focus on charity, including "community agencies for feeding the poor, clothing the

\textsuperscript{104} Quintus Septimius Florens Tertullianus was born in and probably spent the majority of his life in Carthage.


\textsuperscript{106} There were three categories of associations in the Roman Empire: economic (stationes), religious (cultores) and social (tenuiiores); all maintained religious functions. Some emperors tolerated them while others called for their disbandment. While it is well known that the earliest economic associations in the Roman Empire resembled what would later be the trade and craft guilds of the late Middle Ages and the Renaissance, most associations in all three categories came to embody religious elements. See Everett Ferguson, Backgrounds of Early Christianity (Grand Rapids: William B. Eerdmans Publishing Company, 1993), 134-135.

\textsuperscript{107} Ferguson, Backgrounds of Early Christianity, 540.
needy, caring for the sick, burying the dead, ransoming captives, educating orphans, and providing poor girls with dowries.”¹⁰⁸ The Jewish converts in early Christian communities continued these practices.

Christian practices toward the poor and sick, the adoption of Roman and Jewish practices that coincided with Christian ones, and the basic tenets of Christian belief all influenced the growth and spread of philanthropy in the Roman Empire. As the early church began to prosper in the Roman Empire, so did church organization that included health care. Eventually, charity was placed under the supervision of the church deacon, who offered hospice to pilgrims and provided for the sick.¹⁰⁹ In Chapter 34 of his *Apostolic Tradition*, Hippolytus (c. 215) instructs that “each of the deacons with the subdeacons addendum upon the bishop; and let it be reported to him who are sick, that if it seem good to the bishop he may visit them; for the sick man is much comforted that the high priest remembered him.”¹¹⁰ Bishops were also required to teach charity, and finally, the equivalent to the modern prebend was placed in charge of caring for the poor.¹¹¹

Thus, it did not take long after the legalization of Christianity for Christian hospitals, or what could be considered specialized centers for the care of the poor and sick, to arise. There are several meanings and definitions evoked by the word “hospital.” One meaning of the term is derived from *hospes*, meaning simply a host or guest,¹¹² whereas houses for wayfarers and the sick were sometimes simply called “houses of

¹⁰⁸ Ibid.
¹¹¹ Mollat, *The Poor in the Middle Ages*, 40.
hospitality,”113 hence hospitals. In another view, “the word hospital comes from the Greek word hospitum, a word that is mentioned frequently in the literature from the fifth century CE onward.”114 The physical root of these hospitals can be traced not only to Christianity, but also further back to the Greek Asklepieia, which was “simply a stoa, or ordinary business arcade, put to nursing use.”115 This plan evolved later into the “Roman valetudinarium, or military hospital, [which] was a regular barracks adapted for sick and wounded soldiers.”116

Early Christian hospices and hospitals, however, took on more of a monastic form117 and were initially more for pilgrims than the sick.118 Obviously this situation was different from Roman practices and hospitals, which focused on housing military men, slaves and upper-class citizens in their hospitals. The division between Roman and Christian marked a distinct change in the emphasis of health care, allowing for the

113 Ibid.
116 Ibid. For an example of this type of hospital, see the Vindonissa hospital in Windisch, Switzerland, which existed in the first century CE. It is a symmetrical building with a great hall in the middle and patient rooms that lined the corridors. For more information, see Thompson & Goldin, The Hospital: A Social and Architectural History, 5.
117 For example, see Turmanin in Syria (on the main road from Antioch to Qalat-Siman) (475 CE)—it was built over the pillar upon which St. Simeon Stylites dwelled. See Thompson & Goldin, The Hospital: A Social and Architectural History, 7.
118 There is not as great of a distinction between a pilgrim and a sick person as one might first believe. Thompson and Goldin note that “the definition of a pilgrim is more or less sick, he or she having undertaken a long journey as a form of penance.” Travel was difficult for people, both physically and mentally. There was a general need for nurses to care for and bandage feet from the roads. Thus, “for this reason the convent shelter [had to] be more than an inn, nursing care would necessarily be included in hospitality, and a hospice had to be part hospital.” See Thompson & Goldin, The Hospital: A Social and Architectural History, 7-8.
support of those whom society did not necessarily value. Before Christianity, the poor typically died on the streets, and there were few hospitals for them.\textsuperscript{119}

As the Roman Empire continued to merge with Christianity, imperial authorities and the church cooperated in efforts of health care. Some have argued that hospitals “were […] established by the Christian church as instruments for the propagation of the faith—as living testimonies to the healing mission of Jesus.”\textsuperscript{120} While this may have been the case, we also know that “many of the great hospitals can be traced to the period directly following the Council of Nicaea in 325 A.D., when [bishops] were instructed to go out into every cathedral city in Christendom and start a hospital.”\textsuperscript{121} The imperial government made sure that the property of churches and monasteries was “used for charitable purposes, while the Church, thus encouraged in its activities, received alms as a public service and established hospitals, already devoted to particular specialties, in cities and along major roads.”\textsuperscript{122} Later, after political decentralization in Late Antiquity, many of the efforts to provide poor relief and health care fell to the “friends of God,”\textsuperscript{123} especially saints, monks, popes, bishops, and lay devotees.\textsuperscript{124} For monks, philanthropy

\textsuperscript{119} Thompson & Goldin, \textit{The Hospital: A Social and Architectural History}, 4-6.
\textsuperscript{120} Snook, \textit{Hospitals: What They Are and How They Work}, 3.
\textsuperscript{121} Ibid., 3-4.
\textsuperscript{122} Mollat, \textit{The Poor in the Middle Ages: An Essay in Social History}, 19-20. This notion about the establishment of hospitals along roads is paramount when considering some of the developments highlighted in the previous chapter. Brussels arose along old Roman trade routes, and many of the cultural remnants of the new city were Roman in origin. The fact that Brussels came to embody so many hospitals in its medieval apex should not be a surprise given the fact that most hospitals formed along roads and in major cities.
\textsuperscript{123} This term is borrowed from Peter Brown. See Peter Brown, \textit{The Making of Late Antiquity} (Cambridge: Harvard University Press, 1978), especially chapter three.
\textsuperscript{124} Men and women, lay and religious alike, contributed to the growing tradition. While some early hospitals were available to the masses, those who wished to receive care at home relied on women. For example, even early in the history of Christian health care “the Roman aristocrat Fabiola, praised by Jerome, showed her Christian devotion by founding a hospital and nursing in it.” See Gillian Clark, \textit{Women in Late Antiquity: Pagan and Christian Life-Styles} (Oxford: Clarendon Press, 1993), 68.
was at the heart of their vows. Andrew Crislip even goes as far as to note that monastics were “obsessed” with health care, which incidentally allowed “monastic leaders [to] develop systems from providing health care to all monastics and incorporate all manner of sick and disabled individuals into monastic society.”

The rise of monasteries and their care for the sick was amplified in the wake of the fourth century barbarian immigrations and invasions, during which church leaders found themselves increasingly filling the void left in leadership roles as many people fled the violence. Declining power in the West, the lack of an effective military force and the persistence of Germanic tribes along the Roman frontier borders created a power vacuum. Church figures, such as Bishop Deogratias of Carthage (d. 457), who ransomed church possessions in 439 in order to free captives taken by the Vandals, was one such figure who helped to fill that void. Deogratias also arranged for two churches, the Basilica Fausti and the Basilica Novarum, to be used to house displaced persons.

In other places, bishops simply set up charitable institutions and hospitals. Bishop Masona (d. c. 600/610) managed to bring public health care to Visigothic Spain. He “established many monasteries, enriching them with much land, he built several churches of marvelous construction, and he brought many souls to dedication to God there.” More importantly, however, “he built a hospice (xenodocium) [580] and endowed it with

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great estates, and after providing it with servants and doctors, he commanded them to devote themselves to the needs of travelers and the sick.” He then used the money from the land to develop the hospital and staff doctors. Most care, however, was given to travelers and pilgrims, the primary recipients of health care throughout the Middle Ages.

Although monks had been the guardians of health care in Late Antiquity, the tradition slowly began to evolve and penetrate into the ranks of secular rulers, as is shown with the lay endowment of a hospital in 542 by King Childebert I, the son of Clovis. Childebert I gave funds for the creation of the hospital in Lyons. The hospital, or the Hotel Dieu, became the oldest hospital in France, and it was protected under the Fifth Council at Orléans. The council threatened excommunication to anyone who embezzled or took the funds that Childebert had provided.

These changes are most evident through the creation and spread of Benedictine Monasticism. In chapter thirty-six of the Benedictine Regula (528) care for sick brothers is discussed. The Regula evokes the same verse from Matthew that became key in the creation of the seven works of mercy: “before and above all things, care must be taken of the sick, that they be served in very truth as Christ is served; because He hath said, “I was sick and you visited Me” (Mt 25:36). And “As long as you did it to one of these My least

128 Ibid.
brethren, you did it to Me” (Mt 25:40). But unlike the seven works of mercy, there was a new emphasis in Benedict’s Rule. Benedict asked that the sick themselves also consider that they are served for the honor of God, and let them not grieve their brethren who serve them by unnecessary demands. [He argued that the demands] must, however, be patiently borne with, because from such as these a more bountiful reward is gained.

Benedict also instructed that the “Abbot’s greatest concern […] be that they [the sick] suffer no neglect.” These basic ideas would later inform theological views pertaining to care for the sick.

Beyond the spiritual reasons for caring for the sick, Benedict addressed how care for the sick was to occur. The sick were to have separate cells and attendants were to serve them. They were to be bathed unless they were young or otherwise healthy; otherwise, bathing was to occur only rarely. The sick were to be offered meat, but as soon as they had returned to health they were to “abstain from meat in the usual manner.” In conclusion, Benedict warned that the “Abbot exercise the utmost care that the sick are not neglected by the Cellarer or the attendants, because whatever his disciples do amiss falleth back on him.” Neglect of the sick reflected poorly on the abbot, and subsequently on the monastery, and thus on Christians.

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131 Ibid.
132 Ibid.
133 Ibid.
134 Ibid.
135 Ibid.
136 Ibid.
137 It should be noted that while the Benedictine Rule was most widely used and followed in early Western Christendom, most hospitals and associations of men and women in hospitals followed the Augustinian Rule. The Augustinian Rule does not provide the detail that Benedict’s Rule does on caring for the sick, but
During the eighth and ninth centuries, monks still held a firm monopoly on what could be considered a “hospital,” and “the monks’ infirmary was closed to lay participants.”\footnote{Thompson \& Goldin, The Hospital: A Social and Architectural History, 11.} The monastic hospital, however, had evolved to cater “to three types of the infirm: the superannuated, who slept in the dormitory; the sick, for whom a special room was set apart ‘for dangerous illnesses,’ meaning perhaps also contagious diseases that could be isolated here; and those who had let blood and shared for a few days the relaxed discipline and richer fare of the infirmary.”\footnote{Ibid.} Eventually, the monastic hospital transformed into a “long building subdivided into four rooms into a large open hall, a dominant form of ward construction under both religious and lay auspices until the eighteenth century,”\footnote{Ibid., 15.} the design with which most associate modern hospitals. These advances, however, would have to wait; charitable activities and the newly developing hospitals suffered with the Viking, Saracen and Magyar invasions.\footnote{The Vita Notgeri episcopi Leodiensis is a poem from the period of the invasions in which the author of the poem assigns the role of the protection of the poor to the bishop. Legislation from the ninth and tenth centuries also insists on the bishop in this role. See de Spiegeler, Les Hôpitaux et l’Assistance à Liège, 39.} With the disruptions of the invasions, it would take some time before the institutions evolved into what could be consider a “modern hospital.” The beginning of that transition can be located in the high Middle Ages and the “twelfth-century renaissance.”

“Unheralded Glories:”\footnote{This phrase is borrowed from Kealey, Medieval Medicus, 1.} Hospital Design and Function in the High Middle Ages

\textit{the Rule} emphasizes cleanliness and requests that when needed a doctor should be consulted. The Augustinian \textit{Rule} also allows a sick brother to have what ever from the pantry that is seen as necessary for the his recovery. See \textit{The Rule of Saint Augustine}. “Chapter Five: The Care of Community Goods and Treatment of the Sick,” Robert Russell trans., from Luc Verheijen. \textit{La regle de saint Augustin, Etudes Augustiniennes} (Paris, 1967), accessed 10 September 2008 at \url{http://www.geocities.com/Athens/1534/ruleaug.html#The%20Care%20of%20Community%20Goods}.\footnote{Thompson \& Goldin, The Hospital: A Social and Architectural History, 11.}
The transition from the monastic hospitals of the early Middle Ages to the more public institutions of the high Middle Ages occurred gradually. Jacques de Vitry, a contemporary in the high medieval hospital movement, served as both a witness to and critique of the rise of the medieval and early modern hospital. Whereas advancements in poor relief and health care were many, most early hospitals provided “more shelter than treatment. Patents were fed an ill-balanced diet of salted meats, bread, and wine on the grounds that this was necessary to make up for the undernourishment endemic among the poor.” Jacques argued that ideal hospitals should be organized based on the Rule of Saint Augustine, not that of Benedict. He insisted that hospitals be placed under church control and be modeled on the example of the Hospitallers. Most of his desires were met as the structure, form, and administration of the medieval hospital changed throughout the high Middle Ages.

The most important change in the process was in the care of the inmates themselves and in the administration of the institution. Prior to the twelfth century, monks, rather than municipal authorities, were prominent in hospital care. Later, though, charity became linked to urban centers and their authorities, and sometimes charity was even connected to a local trustee. Thus, as transition occurred, public hospitals became connected to city centers and gained more prominence in urban landscapes.

As hospitals developed, so did their function and structure. We know that unlike the monastic hospitals designed for pilgrims and travelers, urban hospitals were mostly

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143 Mollat, *The Poor in the Middle Ages*, 151.
for the “support of infirm and aged people. Such a home was called indiscriminately
“‘hospital,’ ‘Maison Dieu,’ ‘almshouse’ or ‘bedehouse.’”¹⁴⁶ Because of this distinction,
two types of hospitals really existed in the Middle Ages: monastic hospitals, where the
regulation was under the control of the abbey, and hospitals under the control of the
bishop.¹⁴⁷ Those hospitals that operated under the control of the bishop were

semi-independent institution[s], subject to royal and episcopal control in matters
of constitution, jurisdiction and finance, yet less trammeled in organization than
most religious houses. [They] formed a part of the parochial system, and had also
links of one kind or another with monastic life.¹⁴⁸

In addition, these types of hospitals were “usually represented by the diocesan bishop,
[who] was responsible for the rule and statutes by which a hospital guided.”¹⁴⁹ Yet, even
in those cases where governed by a bishop, the bishop did not have supreme control.
Especially “in the province of administration, visitation and reform, king and bishop
played their respective parts. Speaking generally, the bishop was administrator, and the
king protector; to the former, matters of religious observance and conduct were referred,
to the latter questions of temporal privilege, immunity from taxation, etc.”¹⁵⁰

These two types of hospitals, episcopal and monastic, can then further be
subdivided into “four main types of institutions: leper houses, almshouses, hospices for
poor wayfarers and pilgrims, and institutions that cared for the sick poor.”¹⁵¹ This is not

¹⁴⁶ Ibid., 15.
¹⁴⁷ A range of hospitals exist in these two categories. Many of the hospitals did not have a permanent altar
or were not dependent on Episcopal authority. See de Spiegeler, Les Hôpitaux et l’Assistance à Liège, 106.
¹⁴⁹ Ibid., 194.
¹⁵⁰ Ibid., 194-5. Furthermore, “royal interest helped multiply the numbers of doctors, hospitals, and
medical books, and this expansion gave health care a higher governmental priority than it might otherwise
have enjoyed.” Kealey, Medieval Medicus, 25.
¹⁵¹ The Hospital in History, Granshaw & Porter, 21.
to say that these four types represented the only institutions of care in the Middle Ages. Most towns also had guild almshouses and private almshouses, as well as separate hospitals for Jews, the poor clergy, women, children, the insane, and for lay "gentlefolk," whereas there were several hospitals that also cared for "people with particular, not necessarily medical, needs, such as pilgrims, the blind, cripples, elderly priests or impoverished widows, children, and honest tradesmen who had fallen on hard times." Urban hospitals dedicated specifically to the care of the sick were fairly scarce simply because the care of the sick was an "unwelcome or impossible burden." Most of the hospitals were deficient in the needed funds or personnel to perform what would be considered basic modern medical procedures, and many hospitals simply lacked the staff to care for the ill. Because the burdens were so great, some hospitals only took invalids, whereas the constant and ever-changing influx of sick and the infirm were too much to handle. For instance, only about ten percent of hospitals in medieval England were those whose mission was to care for the sick.

Although hundreds of hospitals existed by the high Middle Ages, we know little about medicinal care within them beyond herbal and other folk treatments, especially in the earliest years of the hospital movement. What we are able to trace concerns hospital administration and design. We know, for example, that hospitals varied in size and function: "they could be centers for poor relief; clinics; dispensaries; homes for indigent

154 *The Hospital in History*, Granshaw & Porter, 25.
students; hostels for travelers; leprosaria for people of all ages and classes; residences for the blind, the elderly, the mentally ill, and the orphaned; and the multi-department complexes with large professional staffs.” 155 Most hospital units were small, “consisting of a handful of wards or rooms with only a dozen or so beds.” 156 A large hospital could care for up to 200 inmates whereas a middle-sized one cared for around 40. 157

With these numbers, some historians have been able to approximate how widespread care was. In England, for example, Edward Kealey estimates the ratio of hospitals to people being about 1 for every 1000 and 1 for every 600 in some places. 158 Historians do not have the personal records of those who were admitted into the hospitals during the high Middle Ages unless they were recorded in a miracle book, 159 making it difficult to discern who was being treated and for what reason. Most hospitals still functioned as “mere shelters that provided little else than a secure place in which to sleep. […] Later hospitals, particularly those in urban locales, not only sheltered larger numbers, but also afforded them various forms of extended care.” 160

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156 James Brodman explains that one can get a sense of size from inventories. See Brodman, Charity and Welfare, 62.
157 The Hospital in History, Granshaw & Porter, 26.
158 Kealey, Medieval Medicus, 88. These numbers are hard to comprehend when placed in the context of modern statistics. Statemaster, a database that allows you to compare various data on US states compiled from the US Census Bureau, the FBI, and the National Center for Educational Statistics, cites the mean average of total hospitals per capita per people in the US as 0.2 per 10,000 people. Delaware ranks fiftieth with 0.071 hospitals per 10,000 people and South Dakota first with 0.644 per 10,000 people. Other leaders include North Dakota, Montana, Wyoming, Nebraska, and Kansas, whereas Connecticut, Maryland, and New Jersey grace the bottom of the list. For more information, see “Health Statistics: Total Hospitals (per capita) (most resent) by state,” Statemaster, accessed 13 July 2009 at <http://www.statemaster.com/graph/hea_tot_hos_percap-health-total-hospitals-per-capita>.
159 The Hospital in History, Granshaw & Roy Porter, 27.
160 Brodman, Charity and Welfare, 63.
The location of most of the early modern hospitals was next to or near a cathedral cloister, but in later periods, hospitals began to appear elsewhere. Because of the possibility of disease and contamination, some hospitals were built in undesirable areas, and typically the institutions were located outside city walls in order to contain disease. In other cases, especially in those of the leprosaria, the institutions were located along the rivers and waterways. Despite location and to insure security, safety, and order, many hospitals were surrounded with a wall and a towered gate.

Multi-functional, albeit limited in size, the design of a medieval hospital was typically simple. It had evolved from the long open hall of the infirmary ward that was used in monasteries prior to the Viking invasions. This tradition continued after the attacks, and during the twelfth century, most hospitals were usually just a rectangle. But other designs did exist. For example, some scholars have suggested that institutional care has its roots in the Roman military hospital layout, “which included a common structural design of sick wards around an open courtyard.” Many hospitals did indeed take this form, but even so, the open-ward system was by far the preferred choice.

The open-ward system was “taken over from the monasteries, adapted, enlarged, refined, and eventually mass-produced. […] The form prevailed for nearly four

161 Ibid., 61.
162 This small detail will become an important fact later in the consideration of the hospital of Saint John in Brussels. Not only did it evolve into an incredibly large complex, it was also located within the city walls.
163 The focus of this work is on hospitals for general care. For more on leprosaria and the reaction of the public, see R. I. Moore, The Formation of a Persecuting Society (Massachusetts, Blackwell Publishing, 1990).
164 Brodman, Charity and Welfare, 62.
165 Kealey, Medieval Medicus, 84.
centuries.‖¹⁶⁶ Most open-ward systems had an inpatient unit, or the bed area and the service rooms (the ward) that were often attached to other buildings, such as a church, and institution complexes, such as a monastery.¹⁶⁷ Although the open-ward system had evolved from earlier hospital designs, such as those of the Greeks and the Romans, the T or L layout was adopted for Christian purposes, which allowed inmates to view the altar, the host, and communion from their bed. The people who provided aid were separated from the sick by halls that radiated from the infirmary, which typically stood at right-angles from the chapel, giving more hospitals the typical L or T shape.

Some hospitals began with small open wards and grew bigger over time. For example, Saint John’s hospital in Bruges (ca. 1188) was a small ward hospital that increased in size by adding more and more wards.¹⁶⁸ The plan was ideal and oriented to the growing population; if overcrowding occurred, which it frequently did, the patrons could easily add cross wards.¹⁶⁹ Space, however, was not the only reason to expand: “the progress observed in sick wards from smaller rooms in the ninth century to large infirmary halls in the eleventh and twelfth reflects a general tendency toward community living on the part of clerics and laymen.”¹⁷⁰

In addition to the ward, most hospitals had a chapel, which served as a religious focal point in many medieval hospitals. For this reason alone, life in a medieval hospital

¹⁶⁷ The inpatient unit, which is the predecessor to today’s hospital, is the institutional form about which most historians writing about hospitals in the Middle Ages are concerned. See Thompson & Goldin, The Hospital: A Social and Architectural History, 3.
¹⁶⁹ Such was the case of the hospital de Santa Cruz in Barcelona in the fifteenth century, which had four large halls that all opened into one another and into a large hall. See Thompson & Goldin, The Hospital: A Social and Architectural History, 30.
was distinctly different from life in the today’s hospital. Whereas most of the events of modern hospitals revolve around direct delivery of medical care, “daily life in a [medieval] hospital was essentially a religious life.”\textsuperscript{171} In the Middle Ages, spiritual care was placed at the forefront: “from warden to pauper, all were expected to pay strict attention to the faith and give themselves to devotion[,] all who could rise attended the chapel on bended knees, the bedridden worshipping simultaneously. Even the sick people could join in the intercessions.”\textsuperscript{172} The helpers kept canonical hours and the almshouses and lepers even had special prayers. Most hospitals had one or more altars,\textsuperscript{173} in the front of which stood altar oil lamps with rush wicks and wax tapers\textsuperscript{174} that burned all day. Hospitals were often adorned with religious paintings and carvings in the chapels, often of patron saints,\textsuperscript{175} and many had religious books and religious implements, such as plates and vestments.\textsuperscript{176}

The chapel also provided a constant reminder of the hospital founders and benefactors.\textsuperscript{177} Before a hospital could construct a chapel, the institution and its administrators received special permission from the bishop certifying that it did not interfere with the parochial system.\textsuperscript{178} The need for episcopal approval rarely deterred hospital staff from building a chapel, since the chapel was an important source of income; many donors made contributions on the condition that masses would be celebrated for

\textsuperscript{171} Clay, \textit{The Medieval Hospitals of England}, 158.  
\textsuperscript{172} Ibid.  
\textsuperscript{173} Ibid.  
\textsuperscript{174} Ibid.  
\textsuperscript{175} Ibid.  
\textsuperscript{176} It should not come as a surprise that “many valuables fell a (sic.) prey to dishonest wardens.” Clay, \textit{The Medieval Hospitals of England}, 164.  
\textsuperscript{177} de Spiegeleer, \textit{Les Hôpitaux et l’Assistance à Liège}, 193.  
\textsuperscript{178} Clay, \textit{The Medieval Hospitals of England}, 197.
them. The funds thus received from the chapel were used for oblations, and agreements were made regarding public worship on certain occasions in the chapel. Without the chapel, many hospitals would have ceased to function for lack of funds, and without a chapel the hospital’s Christian mission may have been diminished.

In addition to evolutions in design and size, other changes occurred to the medieval hospital. As the hospital movement grew, so too did a push to divide units into separate areas for lepers, the insane, the plague ridden, and the elderly. The difference in these divisions was that the first three were usually closed off from the rest, whereas the elderly could walk to their own rooms and did not need to stay in the ward. In fact, money could buy privacy, and the elderly with means could use hospitals as a kind of retirement home, which was the original function of Saint John’s hospital in Brussels. In addition, while hospitals were supposed to be dedicated to the care of the poor and to the care of those who could not provide for themselves, “the tendency to differentiate among classes of the poor is evident by the fourteenth century. There were those whose condition, age, or status required services beyond mere asylum; some hospitals were reserved for specific classes of individuals, like aged fishermen, impoverished priests, or abandoned children.” Later, more specialized hospitals began to emerge, and societies began to create hospitals that were reserved for certain groups of people, i.e. “good children” or poor patricians.

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182 Ibid.
183 Brodman, Charity and Welfare, 64.
184 Mollat, The Poor in the Middle Ages, 152.
Hospitals were run by both volunteers and appointed staff. There were honorary or volunteer workers who served the hospital; they received no salary, but did receive food and clothing. Many of the brothers and sisters were recruited from the ranks of the lay community during the reform movements of the high Middle Ages and from the newly developed confraternities and beguinages. The duties one performed were decided by gender: “the actual care of the sick poor in hospitals was the responsibility of the sisters or women servants,” whereas the function of the hospital’s brothers, on the other hand, was religious and/or administrative.

Like the servants of most communities and institutions of religious origin, hospital workers followed a Rule, most often the Rule of Saint Augustine, which governed hospital organization and daily life in the hospital. Although the Rule of Saint Augustine was meant for monastic communities, it was open to some interpretation. The Rule provided spiritual directives, but not organizational ones, and thus it had to be “adapted and developed.”

The Rule of Saint Augustine specified the distribution of food: “the care of the sick, whether those in convalescence or others suffering from some indisposition, even though free of fever, shall be assigned to a brother who can personally obtain from the

185 Clay explains that the “woman’s sphere in hospital life was confined to work by the bedside and domestic duties.” See Clay, *The Medieval Hospitals of England*, 154.
187 *The Hospital in History*, Granshaw & Porter, 32.
188 Ibid.
191 Ibid., 147.
192 Ibid.
pantry whatever he sees is necessary for each one.”\textsuperscript{193} Thus, health care in the Augustinian Rule often involved providing better nutrition. In addition, the Rule warns that “those in charge of the pantry, or of clothing and books, should render cheerful service to their brothers.”\textsuperscript{194} Furthermore, there was to be no impediment in providing clothing and shoes to those who needed it: “those in charge shall not delay the giving of them whenever they are required by those in need of them.”\textsuperscript{195} Hospital inmates were clothed in “coarse warm clothing [that] was readily distinguished from the ragged mendicant.”\textsuperscript{196} In addition, “clothes were uniform, occasional fasting was prescribed, and members were forbidden to wander about unaccompanied” […]\textsuperscript{197}; however, there were also allowances for those who were physically infirm.\textsuperscript{197} We also know that the “sick and poor were [to be] laid on pallets of straw, but wooden bedsteads were probably introduced late in the twelfth century.”\textsuperscript{198} Beyond, this we know little about the furnishings except that the inmates had beds, bedding, and hanging lamps.\textsuperscript{199}

Most of the staff, the master and his fellow workers, wore Augustinian robes, which were black or brown, had a cloak and hood, and a cross on the outside. Lay officials and secular clerks had “more latitude in costume.”\textsuperscript{200} The Rule emphasized cleanliness for all members of the community—care for the sick and poor required clean

\textsuperscript{193} The Rule of Saint Augustine, accessed 10 September 2008 at \texttt{<http://www.geocities.com/Athens/1534/ruleaug.html#The\%20Care\%20of\%20Community\%20Goods>}.  
\textsuperscript{194} Ibid. While these points are useful to our understanding of the distribution of food, we simply cannot know the diets for certain hospitals and peoples because they varied so according to the place and the day. Kealey, Medieval Medicus, 105.  
\textsuperscript{195} The Rule of Saint Augustine, accessed 10 September 2009 at \texttt{<http://www.geocities.com/Athens/1534/ruleaug.html#The\%20Care\%20of\%20Community\%20Goods>}.  
\textsuperscript{197} Kealey, Medieval Medicus, 107.  
\textsuperscript{199} The Hospital in History, Granshaw & Porter, 29.  
facilities. Many historians now believe that medieval hospital “hygiene may have been better than generally imagined;”

“[…] cleanliness, that is, bathing and washing, was a preferred treatment for many conditions.”

Most of the time, the Rule was adapted into the hospital’s statutes, the compiled spiritual and organizational codes of the hospital. The hospital statutes often “refer[red] to the life of inmates in varying degrees of detail, and they provide much of our scanty knowledge of the life of the poor and sick.” The statutes of the hospital determined the roles of the people involved in care and also the daily religious observances, food and clothing allowances, and types of conduct. In addition to the rule and statutes, most hospitals workers had rules of payment and property, conduct, and supervision. If the rules were not followed, penalties such as flogging, fasting, fines, stocks, suspension, and expulsion could be applied.

While the brothers and sisters worked in hospitals, they did not run them. At the head of the institutions there were various officials whose power varied according to the institution’s mission. These leaders could be divided into three groups: “les prieurs, […]; les mambours désignés par l’autorité […]; et les vestis ou curés de paroisse.” Most of the time, however, almshomes ran hospitals. Almshomes were admitted by a solemn oath, and they followed a “general rule of poverty, chastity and obedience [that] was

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202 Kealey, Medieval Medicus, 16.  
203 Ibid.  
204 The Hospital in History, Granshaw & Porter, 49.  
207 de Spiegeler, Les Hôpitaux et l’Assistance à Liège, 133.  
supplemented by detailed statutes.\textsuperscript{209} The almsmen were not without help within the hospital itself—most hospitals had a warden, who was akin to the monastic abbot. The warden, usually but not always a priest,\textsuperscript{210} often also served as the master of the hospital, “who was also known as prior, custos, keeper or rector.”\textsuperscript{211} Upon taking the position, the master had to swear upon the holy Gospels, and he promised to be obedient to the prior and anyone who was appointed into a position of canonical command.\textsuperscript{212} Rarely, however, was the master also a physician.\textsuperscript{213} Masters were “the most visible members of hospital staff,”\textsuperscript{214} whereas “physicians were neither mentioned as members of hospital staffs, nor did they figure prominently in early hospital statutes.”\textsuperscript{215} If medical treatment was provided, it was done by either a physician\textsuperscript{216} (phicus, fisicus), surgeon (cirurgicus), apothecary (apothecaries, speciarius, herbolarius), barber (barberius, barbitonsor), or healer (medicus, metge (in Catalanian documents)).\textsuperscript{217} Most physicians were only brought in on a need-basis.\textsuperscript{218}

\textsuperscript{209} Ibid., 132.
\textsuperscript{210} Rothe Mary Clay, The Medieval Hospitals of England (London: Frank Cass & Co. Ltd., 1966), 149. In the case of Saint John’s hospital in Brussels, the masters and mistresses were brothers and sisters of the hospital community.
\textsuperscript{211} Norman Moore, The History of St. Bartholomew’s Hospital, Volumes I and II (London: C. Arthur Pearson Limited, 1918), 288.
\textsuperscript{212} Moore, The History of St. Bartholomew’s Hospital, 380-1.
\textsuperscript{213} Absence of the title medicus, however, does not mean that the person had no medical training/knowledge. Clay, The Medieval Hospitals of England, 149.
\textsuperscript{214} Kealey, Medieval Medicus, 104.
\textsuperscript{215} Ibid., 105.
\textsuperscript{216} Edward Kealey provides a table of the known physicians in England from 500 to 1154. See Kealey, Medieval Medicus, 31.
\textsuperscript{217} Brodman, Charity and Welfare, 86.
\textsuperscript{218} The Augustinian Rule argued that “if the cause of a brother’s bodily pain is not apparent, you make take the word of God’s servant when he indicates what is giving him pain. But if it remains uncertain whether the remedy he likes is good for him, a doctor should be consulted. The Rule of Saint Augustine, accessed 10 September 2008 at <http://www.geocities.com/Athens/1534/ruleaug.html#The%20Care%20of%20Community%20Goods>. 142
Most of the providers did not distinguish one patient’s social status or malady from another. Thus, most hospitals simply worked to keep patients alive, and most patients did not typically undergo aggressive treatment. Some were treated with bleeding and purging, but doctors, at most, typically set fractures, bound and sutured wounds, dressed sores and rashes, and fixed dislocations. In addition, “medieval medical practitioners were prepared to concede that certain basic aspects of obstetrics and gynaecology, as well as the general care of the sick in hospitals and nunneries, were essentially female preserves.” There was little to no professional care, and “the treatment most likely to have been available to the sick in hospitals was bed rest, warmth, cleanliness, and an adequate diet.”

Yet, “by the thirteenth century, there [were] signs that medical care was being introduced into a few institutions. […] The Hospitaller Order of Saint John [was] particularly influential in this development because, as early as its statues of 1182, the order maintained four physicians at its large hospital in Jerusalem to diagnose disease and prescribe medicine.” Care such as this only arrived in Catalonia, Spain, by the end of the fourteenth century. Even so, “records of late medieval hospitals show that the sick comprised substantial proportions of the inmate population, indicating that the transformation of these institutions from mere shelters to facilities dispensing medical

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219 Brodman, Charity and Welfare, 96.
220 Ibid., 97.
222 The Hospital in History, Granshaw & Porter, 31. Rarely did the leper or almshouses provide medical care. Also, the institutions specifically designed for travelers and pilgrims typically did not provide care. The Hospital in History, Granshaw & Porter, 24.
223 Brodman, Charity and Welfare, 93.
care was indeed well underway.” Saint John’s hospital in Brussels, which cared for the sick and poor, had been in existence since 1186.

Although masters did not offer physical cure, they did offer spiritual care. Upon the master of the hospital fell the obligation to visit the poor twice per week and the sick twice per day. In these acts, the warden or master was not to act squeamish; instead, he was instructed to be merciful and benign. In addition, the master had to be present at the hospital at night, and he had “little leisure, for he conducted certain services both in the chapel and parish church, and kept school, besides ruling the alms house.”

While the master oversaw and managed daily life in the hospital, he was not responsible for all aspects of life and work. Most hospitals had a “proctor,” who was the financial agent of the community and the bearer of the official seal. Sometimes it was left to him to deliver a sermon. When the traffic in indulgences began, the proctor became a “pardonier.” Hospitals were also run financially by a collector, who when collecting alms, had to swear only in the name of the hospital; all money received was then rendered to the canons. In addition, matters of organization and office business were marked by the hospital seal. The seal was “to be kept under three keys, of which one

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224 Ibid., 95.
226 Ibid., 151. Although a much later example, a fifteenth century founder regulation displays some of these characteristics. It instructs that the master of Ewelme “must be an able and well-disposed person in body and soul, one who could counsel and exhort the poor men to their comfort and salvation. He had to conduct frequent services, and was warned to omit none—not even ‘for plesaunce of lorde or lady.’” Clay, The Medieval Hospitals of England, 151. In another example we learn of a basic function of the master as the person responsible for overseeing the acquiring and purchasing cloths for the hospital: “William Hardel, Mayor of London in 1215-16, was witness of a charter of Alexander of Norfolk, in which he grants to St. Bartholomew’s Hospital, his house outside the gate of St. Paul’s, toward the sought and opposite the brewery of the cannons of St. Paul’s in the parish of St. Gregory. With its rent they are to buy the clothes necessary “in tulchia magna hospitalis” for the poor staying there at night—according to the direction of the master.” Moore, The History of St. Bartholomew’s Hospital, 320-1.
[was] to be kept by the master of the hospital and the other two by two brethren nominated by the master and brethren on the advice of the prior, but the prior [was] not to have power to remove these key keepers.”

Finally, most hospitals also had what were called “under-officials,” clerks in minor orders who might assist in worship and work.

In addition to the master and the proctor, there was also a rector, or a procurer as he was named at Saint John’s in Brussels, who was “presumably, the individual whom the bishop, chapter, and/or municipal council would select to direct a hospital.”

Typically, he was a “trusted and reputable member of the community.” The principal job of the rector was to oversee the administration of the hospital. Some served for life while others were only appointed for fixed terms, and some hospitals had one rector whereas larger hospitals had more. In addition to their above-described duties, rectors were usually also in charge of collecting offerings and alms. They also had to maintain discipline and order by controlling illicit behaviors. Ordinances “established regular procedures for accountability and placed in the hands of the administrators the power to withhold salaries, to impose fines, and to inflict corporeal punishment.” If the rector was in an order, he maintained priestly duties as well.

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228 Moore, *The History of St. Bartholomew’s Hospital*, 378.
231 Ibid.
232 Ibid., 51. Sometimes, however, obedience fell to the job of the warden: “On the next day but one after Hugh’s death the king committed to Brother Maurice, chaplain of the house of the Temple in London, the care and keeping of the Hospital of St. Bartholomew till the king with his justiciar should come to London and arrange more fully as to the ruling of the same, and the brethren and sisters of the hospital were commanded meantime to be attentive and obedient to the aforesaid Brother Maurice as to their warden.” Moore, *The History of St. Bartholomew’s Hospital*, 373.
233 Brodman, *Charity and Welfare*, 51. With so many duties it should not come as a surprise that some hospitals were prosperous and others were not. Brodman, *Charity and Welfare*, 53.
Hospitals in the high Middle Ages were expensive to create and maintain. Thus, hospitals, especially those dedicated to the care of the poor and sick, relied principally on private aid in the form of gifts or donations from patrons. In addition to private gifts, hospitals were granted money via public charity, as well as revenues that “consisted largely in annual rents arising from land and house property.” Many hospitals also had “endowments in kind,” such as grants from royal forests. Individual donations, such as the rights to the water dripping from the gutter between the houses, or even “charges or other payments from land,” might seem trivial or insignificant, but they were still important to the continued success of the hospital.

Hospitals also received money from bequests, participated in trade, and held fairs. Sometimes a particular hospital could require admission fees from people who were newly-admitted members of the institutions. Other means to supplement the hospital funds included involuntary contributions, such as a Hospital Sunday Fund, or toll on produce or other items, and voluntary donations, which were received and maintained via the formation of fraternities who oversaw the maintenance of the charities. Finally, “the alms of pilgrims and other travelers were a valuable asset in the funds, for it was customary for those so journeying to spend much in charity by the

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235 Ibid., 180.
238 Norman Moore explains that “a considerable part of the income of the hospital was made up of charges or other payments from land such as that mentioned in a charter of Robert of Aldenham, man-at-arms (*bukelarius*) of London.” See Moore, *The History of St. Bartholomew’s Hospital*, 461-2.
240 Ibid.
241 Ibid., 184.
242 Ibid., 186-7.
way.‘‘243 In all the funds granted to a hospital, however, donations were considered “insurance policies that would eventually pay dividends,” 244 sometimes in the form of appointment and sometimes in the form of care, meaning that “the issue of poor relief can never be separated from personal motives and intentions.”245

From Individualization to Communalization and Back to Individualization Again: Health Care and Hospitals during the “Twelfth-Century Renaissance”

The high Middle Ages has been characterized as the age of hospitals.246 When one stops to question why there was such an explosion of hospitals, health care and charity in this period, the answer is not always readily available. It might have had something to do with widespread urbanization and the change from a gift to a profit economy. Some have argued that the “new profit economy raised acute problems involving impersonalism, money and moral uncertainty.”247 There was also the issue of the poor, who were physically brought into view of laymen and women, whereas before, most poor were relegated to care of monasteries. Although considerably later, the estimated number of the poor was between 20-30 per cent of the population in Brabant and Hainaut by the fifteenth century.248 Even if this number is adapted for previous years, the number of poor now inhabiting the high-medieval cities of Belgium was truly

243 Ibid., 191.
244 Kealey, Medieval Medicus, 89.
245 Brodman, Charity and Welfare: Hospitals and the Poor in Medieval Catalonia, 6-7. In addition, since the donations were crucial to hospitals’ existence, hospitals typically had specific peoples in charge of collecting the donations. They were “theoretically” not in charge of the personnel, nor were they supposed to deal with the poor. de Spiegeler, Les Hôpitaux et l’Assistance à Liège, 138. As a result, it should not come as a surprise that many hospitals suffered from “corrupt and crippling maladministration,” which led to the decay, disappearance and or conversion of many of the hospitals in later periods. The Hospital in History, Granshaw & Porter, 34.
246 Kealey, “Hospitals and Poor Relief, Western Europe,” 6: 293.
247 Lindberg, Reformation Initiatives for the Poor, 39.
248 de Spiegeler, Les Hôpitaux et l’Assistance à Liège, 190. These numbers can be found again in Mollat, The Poor in the Middle Ages, 282-285.
staggering. Anywhere from every one in five people to every one in three was poor. These numbers deeply affected populations. From where, though, did these poor come?

At its very foundation, urbanization of many of the towns created more and more industrial accidents and [visible] sickness among the destitute, which precipitated a greater need for places to care for these peoples.249 In addition, during the eleventh and twelfth centuries, much of Europe experienced widespread famine and disease. For example, the *Chronicle* of Sigebert of Gembloux [1126] “mentions ‘a great famine in Flanders and many paupers dead of hunger.’”250 In a related incident, “Count Baldwin IX of Flanders took steps against usurious speculation on food prices.”251 Jacques de Vitry noted that the poor “earn[ed] their daily bread by working with their hands, and when they [had] eaten nothing remain[ed] on their plates.”252 Finally Galbert of Bruges in *De multro* mentions that Charles the Good,

as was his pious custom, […] was freely bestowing alms on the poor: his eyes were fixed on reading the psalter, and his right hand was outstretched bestowing the alms; his own chaplain, who attended to his duty, had placed next to the count many pennies, which they count distributed to the poor in deep prayer.253

As evidenced in the sources of the end of the twelfth century, the poor had become “a permanent presence;”254 something had to be done.

Desperate times called for desperate measures. The need for health care and charity began to increase, but most of the burden of health care still fell upon the

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249 *The Hospital in History*, Granshaw & Porter.
250 Mollat, *The Poor in the Middle Ages*, 60.
251 Ibid., 62.
252 Ibid., 105.
254 Mollat, *The Poor in the Middle Ages*, 59.
monasteries. Monasteries did have a monopoly on the extrafamilial practice of charity, poor relief, and basic hospital care. They were, however, by the twelfth century, overtaxed and burdened. Most monastic complexes, even those as large and wealthy as Cluny, could no longer support the burden placed on them by the recent developments in society. While “both Francis and Dominic [came] to the forefront during times of extreme famine,” similar to “other mendicant orders, their principal mission was preaching. Only the communities of Esslingen, Strasbourg, and Brussels seemed to have been occupied with the care of the poor.” Outside of these few communities, the need to care for the poor and sick was still great. As a result, Francis, Dominic and their followers quickly found allies: the “charitable work of the mendicants was supplemented by such lay organizations as Third Orders and béguinages.”

Even still, while members of these new groups did aid in caring for the poor and the sick, their work was simply not enough. Fortunately, peasants, lords, and the clergy were all spurred to help the needy who surrounded them every day, and with the spread of the profit economy, there was money to invest in new charitable projects. The most

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256 Mollat, The Poor in the Middle Ages, 87.
257 Ibid., 123.
258 The italics in this sentence are my emphasis. It is important to show that while the hospital movement was occurring and while the mendicants were coming to the forefront, Brussels itself remained unusual among these changes. It was one of only a few cities that focused principally on care for the poor and sick, which may help to explain why so many hospitals were located there in the twelfth century.
259 This fact will have obvious implications later when discussing why the hospital of Saint John in Brussels is so important to the entire hospital movement. The above quotation is my translation. See de Spiegeler, Les Hôpitaux et l’ Assistance à Liège, 76.
260 Mollat, The Poor in the Middle Ages, 127.
261 Vauchez, The Spirituality of the Medieval West, 76.
happy consequence of this result was the creation of new hospitals. Many of these institutions were often “founded by leading burgesses and supported by a stream of donations from humbler townsmen and substantial villagers.” Filled with the spirit of Christ and the desire to help their own brothers and neighbors, the laity began to actively engage the poor and sick.

In their desire to help, many members of the lay community returned to the Church Fathers and the Gospels, the very sources of Christianity, creating the movement most often titled the *vita apostolic activa*. In the wake of emerging social divisions, “those who wanted to follow the Gospel to the letter owed it to themselves to go further, that is, to live as ‘Christ’s poor’.” If you could not or were not able to live as ‘Christ’s poor’, then your next best choice was to join together in a group or a collective that provided for the poor and sick. This movement was the beginning of a movement toward medieval communalization, which flourished with the introduction of hospitals.

The vast participation by so many members of the community forced the very “notion of ‘neighbor’ to undergo a development.” While there was still an effort to care for society’s widows and orphans, the sphere enlarged in order to seek out the “victims of injustice and all those who lived on the fringes of affluent society: the sick,

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262 One of the greatest changes was the “sponsorship of the new hospitals[,] which reveals that there was a heightened awareness on the part of kings, churchmen, barons, and burgers that all were parts of one commonwealth—or body politic, to use a contemporary image—and that people should share one another’s burdens.” Kealey, “Hospitals and Poor Relief, Western European,” 6: 293. André Vauchez confirms this suggestion when he notes that “all classes of propertied society—lords, both lay and ecclesiastical, burghers, parish communities and confraternities—[to become] actively involved in works of mercy.” Vauchez, *The Spirituality of the Medieval West*, 132.

263 *The Hospital in History* Granshaw & Porter, 46.

264 The “divisions” refer to the collapse of the system of the “three orders.”


266 Ibid., 132.
lepers, prostitutes, wanderers of all kinds.”

Whereas a simple money donation had been sufficient in previous centuries, “genuine charity consisted in tracking down neediness and in relieving it through an organization as efficient as the conditions of the period allowed.” This was quite literally a change and adaptation of the old Christian virtue of “love thy neighbor.”

While some prided themselves in tracking down the poor and sick, most Christians simply gave alms. It was in this aspect of caring for ‘Christ’s Poor’ that new issues surrounding gifts emerged. For the average person, “the way of access to sanctity was […] the practice of charity, which in the twelfth century, took on new forms and new meaning.”

Stephen White argues that “by giving alms, men could supposedly attain salvation after their deaths. Almsgiving entailed an exchange process in which humans gave away the transitory earthly wealth […] in return for an eternal inheritance in God’s kingdom.”

This exchange happened through intermediaries, such as monasteries and hospitals. Monks and hospital staff then became the “clients of the saint to whom the community was dedicated and whose network of patronage radiated outward.”

This being the case, there are some reasons to believe that there were often personal spiritual motivations behind the donations. Some donors argued that the poor and the sick were a means to an end when it came to almsgiving—the knight was “the

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267 Ibid.
268 Ibid.
270 White, *Custom, Kinship, and Gifts to Saints*, 155.
271 Ibid., 29.
donor himself, and in this sense the pauper was at his service,‖ and that if one gave to
the poor, then his [the donor’s] soul should be saved.273

Yet, the fact cannot be ignored that people were constantly “haunted by the ideal
of evangelical poverty, of the “apostolic life” of the early Christians,”274 which
subsequently led to various and generous donations to places like the hospital of Saint
John. It is not a coincidence that ideas concerning charity evolved in the first place, since
“concepts of purgatory, of the efficacy of prayers for the dead and the spiritual utility of
good works, were being defined, discussed and more widely taught.”275 The way around
this was through the notion of “symbolic capital.” Especially after the rise of the profit
economy, surplus land could “be reconverted into more tangible forms of power,”276 and
“a gift of landed property to an abbey [was] part of a complex exchange process whose
official rationale lay in certain Christian teachings about sin, death, divine punishment of
sinners and the attainment of posthumous salvation.”277 People provided donations and
they believed their souls were more likely to be saved. The simple equation that giving
and providing influenced salvation created a new-found success for charity and health

272 Mollat, The Poor in the Middle Ages, 71.
273 Brodman, Charity and Welfare, 5-6.
274 Jean LeClercq et al., The Spirituality of the Middle Ages (New York: Seabury Press, 1982), 260.
275 Rubin, Charity and Community in Medieval Cambridge, 11.
276 White, Custom, Kinship, and Gifts to Saints, 30. See especially Pierre Bourdieu, Outline of a Theory of
277 White, Custom, Kinship, and Gifts to Saints, 154. For more on this subject see the following authors and
their works: Bourdieu, Outline of a Theory of Practice; Peter Brown, The Cult of Saints: Its Rise and
Function in Latin Christianity (Chicago: University of Chicago Press, 1982); Patrick Geary, “Échanges et
relations entre les vivants et les morts dans la société du Haute Moyen Age,” Droit et Cultures, 12 (1986),
3-17; Jean Leclercq et al., The Spirituality of the Middle Ages; Barbara Rosenwein and Lester Little, “Social
Meaning in the Monastic and Mendicant Spiritualities,” Past & Present 63 vol. 1 (1974), 4-32; Barbara
129-158; André Vauchez, La spiritualité du Moyen Occidental, VIIIe-XIIIe siècles (Seuil: Points, 1994); and
care, the “clearest proof of [which] is the widespread popular support their hospitals immediately attracted.”

Thus, by the twelfth century, the monopoly that the church and monasticism had once held on health care had been broken when “laymen were no longer content to rely on clerics and monks to perform works of charity on their behalf.” Instead, poor care became more and more communal and centralized, which forced health care and charity away from the authority of the institutionalized church. These changes continued to occur and are perhaps best understood through the rise of poor tables and the use of charity tokens, a kind of pre-modern “food stamp.” Poor tables were prominent in Brabant during the twelfth and thirteenth centuries, and they helped to oversee a coming together of communalization, urbanization, and poverty.

Overall, “all of these developments indicate that growing awareness of the magnitude of poverty as a social problem and the recognition that its solution required a reasoned application of resources of the community.” The push for change was so great that the second half of the twelfth century witnessed the end of canonical chapters and the rise of the assistance of hospitals, prebendal institutions, and charitable fraternities to care for the sick and poor. By the end of the thirteenth century it was evident that “community movements […] brought together in unprecedented new ways,

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279 Mollat, *The Poor in the Middle Ages*, 95.
282 Mollat, *The Poor in the Middle Ages*, 93.
laymen and clerics, rich and poor, to work in a common cause[,] on which the mendicant spirit left its mark.”

This was truly a period of brotherhood and charity. At “the root of all forms of benevolence [was] the generosity and charity of individuals, not only [of] those who personally gave alms but also [of] those who built collective institutions and spurred the authority to help the poor.”

More and more people worked to help the poor, and as a result, as early as the thirteenth century there was a return to an “individualization of charity” and a “monetization of alms,” which indeed was a clear evolution from the communalization of charity just a century before.

Despite the surge of hospitals in the high Middle Ages, by the later Middle Ages many of the hospitals that had been created in the surge of the “twelfth-century renaissance” fell into decline, closed or did both. This may have been because many confraternities and guilds, which continued to rise and dominate towns during this period, cared for their own rather than providing charity in general, a consequence of the individualization of charity. In addition, the Black Death and the Hundred Years’ War exacerbated the problem of the poor. Many of these changes thus set the stage for the Protestant Reformation, which led to a complete reevaluation of poor relief and health care. The turn away from community toward the era of the individual precipitated

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283 Ibid., 125.
284 For another view, see R. I. Moore, who argues that “where money reigned supreme, the growing and increasingly menacing presence of the poor pointed to the necessity of providing for their control and, if necessary, their confinement or expulsion from the community.” Moore, The Formation of a Persecuting Society, 106. Thus, it should not come as a surprise that many hospitals, especially leprosarium, were located outside the city walls. The hospital of Saint John, however, was an exception to this rule.
285 Mollat, The Poor in the Middle Ages, 153.
286 Ibid., 154, 156.
287 The term “community,” at least as it is used here, needs some explanation. John Arnold, for example, defines community as “process,” and he “suggests that we should not treat it as a kind of by-product of religious activity, nor as the basic mulch in which religion grew.” He argues that the basis of all collective
serious questions, the most important being whether charity “worked” to solve the problems it was intended to address.

These European-wide changes were reflected on the local level in Brussels. By the early twelfth century, hospitals had begun to appear near the most important centers of the city. In Brussels, the “hospital of Notre-Dame-et-des-douze-Apôtres was founded before 1127 adjacent to the collegiate church of Saints-Michel-et-Gudule, later named the hospital of Saint-Gertrude.” Two years after the foundation of the hospital of Notre-Dame-et-des-douze-Apôtres, the hospital of Saint Nicholas appeared near the Grand’ Place, the most important market in the area. Only a short time later the hospital of Saint Jacques grew near Coudenberg Palace before 1162, the political hub of Brussels and Brabant and the home to the Dukes of Brabant. In addition, throughout the Middle Ages, the city of Brussels was home to four institutions that cared for poor pilgrims: Saints Julien, Carmel, Jacques, and Laurent.

By the second half of the twelfth century, the hospital movement exploded in Brussels. The leprosarium of Saint Pierre was founded in 1174, and in 1186, the confraternity of Saint-Esprit, which would later evolve into Saint John’s hospital, began.

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activity in the Middle Ages was the parish since it [the parish] created a community that is simultaneously economic, religious and social. For example, the priest was paid through tithing, which made certain that he could deliver the sacraments. In other words, the basic division of economics, religion, and society were indeed not dividable, but inextricably linked. To show how connected exactly elements of a community was, one only needs to consider exclusion since “exclusion draws lines and so describes the world,” the best example of which being the demonizing and branding of Jews. Thus, when referring to a community of peoples that was in charge of poor care, the term is not limited to the mendicants or the monks, but rather meant to discuss everyone in society. These ideas certainly did evolve on the eve of the Renaissance and the Reformation when there was more emphasis placed on the individual. See John H. Arnold, Belief and Unbelief in Medieval Europe (London: Hodder Arnold, 2005), 106-7, 115, 118, 120.

288 This hospital did not last; later it evolved into a convent. See State, Historical Dictionary of Brussels, 145.
289 Ibid.
290 Ibid.
Of the two hospitals, only Saint John’s “was under communal jurisdiction, subject to regulations and inspection by the magistracy. These two institutions remained the city’s sole hospitals for the public until the French regime.” The other major difference between the two was that while Saint Pierre was a leprosarium and remained outside the city gates, the hospital of Saint Jean was inside the first walls, and it was located within a reasonable distance from the three major hubs in the city: the cathedral, the market, and the palace. The hospital grew and functioned throughout the twelfth and thirteenth centuries. It owed, however, its existence and continued fortune to the events and structures that had preceded it.

The political development of the duchy of Brabant, the religious structure of the diocese of Cambrai, the social developments of the lay religious movement, and the surge of hospitals in the high Middle Ages all informed the birth and development of the hospital of Saint John. Knowing the background, we can turn to the century that witnessed the inception of Saint John’s hospital, as well as the century that oversaw the hospital’s greatest development.

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291 Ibid.
THE DUCHY OF BRABANT, 1106-1312: GROWTH AND DECLINE

Introduction

Brussels was of key importance in the fifteenth century, especially in terms of cloth trade. Few historians, however, have considered from where those traditions emerged. Rarely do scholars consider the growth of Brussels and the foundation of city life and commerce to the eleventh and twelfth centuries. Since the town could have only grown and prospered with the relative stability brought on by the dukes of Brabant, it must be emphasized that the eleventh and twelfth centuries saw the creation of a medieval city and semi-independent town government. These events had a direct cause and effect relationship, many of which led to the significant economic and political evolutions manifested in the twelfth-century, and many of which allowed the hospital of Saint John to arise to prominence.

From Tribulation to Formation

During the initial periods of territorial growth and political tribulation of the ninth through the late eleventh centuries, Brabant saw the division of what was Lorraine into small vassal states that all paid homage to the Emperor. These states included the Duchy of Brabant (with the capital at Brussels), the County of Hainaut (with a capital first at Valenciennes, then Mons), the County of Namur and the Prince-Bishopric of Liège (with its capital at Liège).¹ But as early as the tenth century, “the future duchy of Brabant, the counties of Hainaut, Flanders and Namur and the prince-bishopric of Liège already existed in embryo as quarrelsome factions destined to dominate Belgium’s history for

hundreds of years.” In order to gain political independence from the Emperor, many of the rulers of the vassal states had to rely on strategies to consolidate their power. These approaches included “dynastic alliances, control of castles, extension of ecclesiastical advocacy rights, elaboration of peacekeeping functions, sponsorship of land reclamation projects, support of urban development, and enforcement of rights of justice and taxation.” Consolidation did not come only from military conquest, nor did it happen overnight. Rather, with decisive changes by the rulers of the vassal states came the ‘evolution of territorial principalities’, a phrase coined by Belgium historian J. Dhondt, and an increase of growing regionalism, in which Brabant was included.

The dukes of Brabant gained ascendancy by using feudal relationships “to consolidate […] authority to extend their influence outside of Brabant.” They not only sought to display their own authority publicly both inside and outside of the duchy, but similar to French kings, they also put into power those who supported the Brabançon nobility. Finally, and most importantly, the early dukes of Brabant focused on urban development on an unprecedented scale, which helps explain why the duchy and town grew together during the twelfth century.

While the dukes of Brabant became independent rulers of a vassal state, the real question is how the nobles of Lower Lorraine were able to escape the power of the

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2 Lyon, Belgium, 13.
3 Nicholas, “The Role of Feudal Relationships in the Consolidation of Power,” 114.
4 See Jean Dunbabin, France in the Making: 843-1180 (Oxford: Oxford University Press, 1985), 12. See also chapter one in Dunbabin’s work for more on the subject.
5 Nicholas, “The Role of Feudal Relationships in the Consolidation of Power,” 115. The major principalities included Flanders, Hainaut, Brabant, Namur, Liège, and Luxembourg, and the minor principalities consisted of Limbourg and Looz, which was absorbed by Brabant and Liège in thirteenth and fourteenth centuries.
6 Nicholas, “The Role of Feudal Relationships in the Consolidation of Power,” 121.
7 Ibid., 127-8.
French and German crowns. By the late eleventh and the early twelfth centuries, the German emperors, who were generally “absorbed by the internal troubles of the Holy Roman Empire, and by their conflict with the Papacy, could pay but little attention to the Low Countries, and were never able effectively to assert their supremacy.”8 Thus, nobles of Lower Lorraine could develop their own feudal estates rather freely.9

The most notable changes, however, occurred within the duchy under the reign of three successive dukes. Godfrey I received regalian rights over the duchy of Brabant in 1106.10 There he ruled until 1128 as the Duke of Brabant, the Count of Louvain, and the Duke of Lower Lorraine. In 1128, Walram II of Limburg, who ruled from 1128-1139, deposed Godfrey I. Godfrey II, who was the son of Godfrey I (the Bearded) followed Walram II in 1139. He was called the ‘young’ because he was “très-jeune”11—the historical records cite him as being only seven years old during his reign. He later married the Duchess of Lutgarde.12 Godfrey II reigned for only three years when his son, Godfrey III, the Courageous, (1142-1190) succeeded him.13 While dukes who reigned

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8 Belgium, Godfrey and Rushbrooke, eds., 80.
9 Although the development of some of the principalities was mentioned above, it is useful to recapitulate in order to show the extent of individual development: we see the creation of the duchies of Brabant, Luxembourg, Limburg, the counties of Hainaut, Namur, Gelders, Holland, and Zealand, and the Episcopal principalities of Liège, Cambrai and Utrecht.
10 See tables II and III.
11 Henne et Wauters, Histoire de la Ville de Bruxelles, 42.
12 Ibid.
13 The dukes of Brabant engaged in many regional wars during the twelfth century. For example, Godfrey I fought against Waleran of Limbourg and the bishop of Liège in 1129 and in 1143 Godfrey III fought against the Berthout, who had been at war for some time against the counts of Louvain and Brabant. See Combaz, “La restauration de la Tour Noire à Bruxelles,” 116.
from 1106 to 1190 often engaged in regional and territorial wars, there was a time of relative peace between 1143 and 1159 during Godfrey III’s reign.\(^\text{14}\)

In 1190, Henry I (1190-1235) came to the throne. His actions forever changed the status of Brabant and Brussels, not to mention that of the hospital of Saint John. Henry I, the Warrior, was eldest son of Godfrey III (d. 1190). Duke Henry I became co-regent with his father in 1183 and succeeded to sole power upon his father’s 1190 death.\(^\text{15}\) Duke Henry I enriched the province and the city of Brussels and propelled Brabant into a new era, one which contemporaries described as a time of “glory and liberty.”\(^\text{16}\) The evidence for his glorious reign lies in the great leaps that occurred in society, political alliances, and urban life.

Henry allied with France in his marriage to Marie of France, the daughter of Philip Augustus of France and Agnes of Merania.\(^\text{17}\) Henry, who has been described as “bellicose and opportunistic,”\(^\text{18}\) signed the Treaty of Soissons (1213), which led to an alliance with King Philip Augustus (1179/80-1223) of France. The treaty forced Brabant

\(^{14}\) The first ramparts were created in the eleventh century. It was precisely at this time that the city of Brussels received new ramparts. See Combaz, “La restauration de la Tour Noire à Bruxelles,” 117. Combaz seems to believe that the first walls were constructed c. 1060, whereas Wauters has argued for them being erected more toward the end of the eleventh century. We also have Henry I confirming the possessions of the Chapel of Notre-Dame situated beyond the walls of Brussels from a document before 1201. For a reproduction of it see Bonenfant, “Les Premiers Remparts de Bruxelles,” 47.

\(^{15}\) Robert Fawtier discusses the particular case of Louis VII, who had his son, Philip Augustus, crowned when Louis VII was on his death bed on 1 November 1179. See Robert Fawtier, The Capetian Kings of France: Monarch and Nation 987-1328, Lionel Butler & R.J. Adam, trans. (London: Macmillian, 1960), 49. In addition, the historical records show the following: “actum […] 1172, regnante glorioso imperatore Frederico, duce Lovaniae Godefrido et Henrico filio ejusdem inclyto.” See Opera Diplom. t. I., p. 709 in Henne et Wauters, Histoire de la Ville de Bruxelles, 47.

\(^{16}\) Ibid., 49. See also document 22, which discusses a donation by Henry I and his wife Marie of France in Inventaires des Archives de la Belique: Chartes et Cartulaires des duchés de Brabant et de Limbourg et des Pays d’Outre-Meuse, Publiés par ordre du Gouvernement sous la direction de l’Administration des Archives Générales du Royaume (Bruxelles: Hayez, 1910), 25-6.

\(^{17}\) State, Historical Dictionary of Brussels, 141.
to break ties with England, which had been maintained since the beginning of Henry’s reign. By abandoning the alignment with England, Brabant, and Brussels specifically, suffered some hardship in the wool trade. Even with the hardship, however, the city still prospered. Indeed, while the treaty briefly caused commercial strife, Henry I augmented urban growth in other ways. It was only after Henry I suffered a defeat at the Battle of the Steppes in October of 1213 that he returned to ally with England once again.

In addition to building political and economic alliances, Henry also expanded the city religiously and municipally. He conceded a number of privileges to the people, such as the right to have judges, and he increased commercial interests. Henry I even oversaw a treaty of mutual agreement between a rival, the count of Holland and Brussels, to ensure municipal prosperity.¹⁹ Municipally, the seven main ruling families continued to control the city, and guilds and masters dominated commercial life. The town grew commercially, which attracted more people to the area and bolstered his [Henry’s] position as the duke.²⁰

Duke Henry I lived in a century that was bounded by two extraordinary royal figures: Kings Philip Augustus of France (r. 1179/1180-1223)²¹ and Henry I of England (r. 1100-1135), each of whom have been cited for their innovations and abilities to consolidate political rule. While Duke Henry I of Brabant never had power equivalent to

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¹⁹ “Traité de commerce réciproque entre Henri (Ier), duc de Lotharingie, et Thierry (VII), comte de Hollande, en matière de droits de tonlieux et de prêts d’argent en leurs respectifs pays.” In Inventaires des Archives de la Belgique, 11.
²⁰ This will be discussed in greater detail in a later section. See also Keith D. Lilley, Urban Life in the Middle Ages 1000-1450 (New York: Palgrave, 2002), 47.
²¹ John W. Baldwin cites the rule of Philip Augustus as beginning on 1179. He was crowned on All Saints’ Day of that year, but he did not begin his reign until 20 September 1180 after the death of his father. See John Baldwin, Government of Philip Augustus: Foundations of French Royal Power in the Middle Ages (Berkeley: University of California Press, 1991).
the kings of France or England, there are some striking similarities among all three. In his article, “Henry I and the Invisible Transformation of Medieval England,” C. Warren Hollister saw the reign of Henry I of England as a political and administrative turning point for England. Hollister explains that “the novelty of Henry’s reign is to be found neither in his goals nor in his political assumptions, but in the development of new, highly effective means to conventional ends.” Henry worked towards systematization, which was “accompanied, appropriately, by growing literacy and mastery of Latin among Henry’s magnates and administrators, and by a substantial increase in written records.” According to Hollister, the spirit of the twelfth-century renaissance is exemplified in the reign of Henry I, rex Anglorum.

Philip Augustus of France often acted in manner that was similar to that of Henry I of England. He too rendered kingship more effective and far-reaching by overhauling the governmental machinery. Indeed, what arose after the reign of Philip Augustus was what Baldwin calls a new “royal ideology.” Chroniclers and poets began to “picture the king as an exemplary figure[….and by doing so,] they began to formulate elements of royal ideology.” With these works, the royal historians and poets “epitomize[d]  

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22 In addition, there are several direct connections between the kings of England and France and the dukes of Brabant. Henry I of England took Adeliza, the daughter of Godfrey I (1095-1128) of Brabant on 29 January 1121 as his second wife. Furthermore, Henry I of Brabant married Marie of France, the daughter of Philip Augustus of France. See Henne et Wauters, Histoire de la Ville de Bruxelles, 49. See also document 22, which discusses a donation by Henry I and his wife Marie of France in Inventaires des Archives de la Belique, 25-6.
24 Ibid., 311.
26 Ibid, 362.
27 Ibid.
Philip’s role in the development of Capetian ideology,‖28 which clearly separated his rule from anyone who had come before. Philip Augustus of France also clearly embodied the evolutions of the “twelfth-century renaissance.”

Similar arguments can be made for the rulers of Brabant and especially for Henry I. Duke Henry I did not work against the seven great families of the town, but rather with them. He rewarded those who served him well by granting privileges. He even granted the town of Brussels a charter, which could be viewed as a means of winning support and loyalty and of power consolidation.29 While the dukes of Brabant could never work on the same scale of that of European kings, the transformations that occurred in Brussels during Henry I’s reign were remarkable, so much so that after Duke Henry I, especially, the city, municipalities, and even the hospital of Saint John grew significantly.

With the death of Duke Henry I in 1235, his son, Henry II (1235-1248), came to the throne. Henry II was already forty-seven years old when he began his reign, and his reign is marked by moderation. Henry II, like Louis IX of France, was pious and followed harmoniously the ideas of the age, including presiding over the foundation of a Franciscan convent in 1238.30 Duke Henry II even managed to unite his vassals and the religious men of the area.31 This unification might have had a significant impact on Saint John’s, since after the middle of the century more and more donations came into the institution.

28 Ibid., 392.
29 See Alphonse Wauters, De l’origine et des premiers développements de libertés communales en Belgique, dans le nord de la France, etc. (Bruxelles: Fr Gobbaerts, 1869), 104-106.
30 Henne et Wauters, Histoire de la Ville de Bruxelles, 63.
31 Ibid., 64.
Henry III (1248-1261), Henry II’s son, succeeded him. While little is known about his reign, it is certain that Henry II expelled the Jews and usurers from the duchy, as was common among thirteenth-century rulers in western Europe. Henry III died on 26 February 1261, and he did not leave an heir of age. Years of troubled succession issues plagued Henry IV’s minority. He was only ten years old when he succeeded his father in 1261, and proving “infirm,” was deposed in 1267. His uncle, the brother of Henry III, Jean I (the Victorious) came to power (1267-1294). During his reign, Jean I sought to keep the dominance of France and Germany in check, which he successfully did through marriage alliances and with a defeat of the “Germans at Woeringen on the Rhine.”

Despite the troubled years of questioned succession between the reign of Henry III and Jean I, the city of Brussels flourished. There were few wars, which allowed rapid population, administrative, and commercial development. Several new hospices and charities were established, and Jean I gave concessions to the beguines (1271) and other existing charitable groups. The hospitals of Saint John and Saint-Pierre grew considerably, and other groups and fortifications received renewals and embellishments. Jean I did not just provide for religious groups, but for commercial ventures as well, namely advantages and privileges. This idea was augmented by the

32 See Little, Religious Poverty and the Profit Economy in Medieval Europe. For information on Henry III see State, Historical Dictionary of Brussels, 159.
33 Cook, Belgium, 5.
34 Henne et Wauters, Histoire de la Ville de Bruxelles, 68.
35 Ibid., 74.
36 Ibid., 76.
fact that Jean I improved coinage in the city, which he did by making it heavier. On 29 May 1289, Jean I also granted exemptions to the bourgeois of Louvain and Tirlemont, and in 1292, he granted the town the right to revenues collected at gates. Jean I died in 1294 from a wound that he received at a tournament and was buried at a Franciscan convent along the Rue de la Bourse.

Jean II (1294-1312), Jean I’s son, came to power during another period of significant change in the political, commercial, and religious climate of Brussels. Regionally, the fourteenth century was one of extreme transformation, such as can be seen in the wars with France. It was the age of great communes, great artists (in terms of numbers, activities, techniques, etc.), exceptional commercial advancement, significant political consolidation and unprecedented growth of the church. Yet, the prosperity was limited by democratic revolts in the city, especially in 1280 and 1281. After these revolts, a communal revolution occurred, leading to the rise of a new political regime in the city. Because of these changes, it is with Jean II that we end our survey of the duchy. Indeed, the city that had flourished under a renaissance was also on the brink of a new era, one beyond the scope of this project.

The (Re?)birth of a Town 1106-1312: Brussels as a microcosm of the ‘Twelfth-Century Renaissance’

37 State, Historical Dictionary of Brussels, 160.
38 See Inventaires des Archives de la Belique, 98.
40 See the next section for more information on the Rue de la Bourse.
42 Ibid., 101.
43 Ibid., 208.
44 Ibid., 311.
With these final political changes in the duchy of Brabant, a few words must be said on the economic and urban evolution of Brussels during the high Middle Ages. Appropriately, it was once stated that “the medieval history of the Netherlands [including Brussels] may be summed up in two phrases—political separation and economic prosperity.”\textsuperscript{45} The political changes have been detailed in the preceding pages, during which elements of town life emerged in the narrative. One of the characteristics of the political transformations was the territorial revolution, which often pitted regions, such as Brabant and Hainaut, Namur, and Liège, against each other. These regions and towns, “despite their rivalries, […] found it convenient and profitable to act in common for the protection of their merchants,”\textsuperscript{46} which led to urban prosperity in many of the regions, including Brussels. Furthermore, economic, and later political, alliances began to emerge. For example, Brabant and Liège become associated with Cologne, which would lead to increased trade and communication between the two areas. The period thus saw a greater increase in town life and commerce, mainly precipitated by territorial and regional expansion, in addition to greater merchant independence.

These changes are not shocking, but they do deserve explanation. The area that would become Brussels suffered after Roman occupation (c. 50 BC-200 CE). Once the Romans pulled out, “essential features of classical urban life were lost, but […] traces of Roman urbanism survive[d] in many ways.”\textsuperscript{47} Some cultural traditions continued to

\textsuperscript{45} Belgium, Godfrey and Rushbrooke, 81.
\textsuperscript{46} Ibid., 89.
prevail in Arras and Cambrai.\textsuperscript{48} The pivotal rebirth of Brussels itself did not come until the high Middle Ages, during which that “remarkable institution”\textsuperscript{49} of the medieval city, as described by Henri Pirenne, grew into its own.

In many ways, Brussels exemplified city growth in the high Middle Ages. One of the major indicators of its development was the city walls, which tend to show growth of a town. Under Lambert II the city of Brussels was surrounded by a \textit{muraille}, a high, fortified wall.\textsuperscript{50} Construction of the wall occurred sometime between 1063-1100—it was started under Lambert II and completed under Henry II. The “ramparts stood at an average height of 7 meters (23 feet) and were built of sandstone brought from nearby quarries. The circuit included seven gates and approximately 40 defensive towers.\textsuperscript{51} The wall ran about 4 kilometers (13,120 feet) and enclosed a space of about 80 hectares (198 acres).”\textsuperscript{52} During each significant age of power, Brussels’ walls grew or expanded.

In addition to defense, the inhabitants of Brussels eventually learned to control water and land, manipulating them for their purposes. The reclamation of the land required great advancements in dyking and damming practices in order to control and use the land that was dominated by numerous streams. For example, as early as the tenth century, there is mention of \textit{Molenbeek}, or “mill stream,” in the documentation.\textsuperscript{53} The “mill stream” is dated from the same time of Charles of France (late tenth century), and

\textsuperscript{48} Cook, \textit{Belgium}, 5.
\textsuperscript{49} Smith, \textit{An Historical Geography of Western Europe before 1800}, 300.
\textsuperscript{50} “La Porte de Hal: 1381-1889,” in \textit{Annales de la Société d’Archéologie de Bruxelles: Mémoires, Rapports et Documents, tome 3} (Bruxelles, 1889), 29.
\textsuperscript{51} The names of the gates were as follows: Steenporte, Coudenberg, Sainte-Gudule, Warmoes, Noire, Saint-Catherine, and Saint-Jacques. See State, \textit{Historical Dictionary of Brussels}, 123.
\textsuperscript{52} State, \textit{Historical Dictionary of Brussels}, 112.
\textsuperscript{53} Ibid., 203.
certainly added to the growth of the town—the inhabitants reclaimed the stream and used it for commercial purposes. In addition, large amounts of land and forest clearing, especially the areas that were part of the Forêt de Soignes, aided in reclaiming the area. Once this process had been completed, the inhabitants could use the fertile land to their advantage. All of these changes were necessary for a rise in industry and town life. As evidence of the evolutions, Brussels, by the eleventh century, supported beer houses, or breweries—the lands allowed for the growth of barley, wheat and hops—distilleries, and cattle breeding. These were the basic foundations of town life and industry, from which trade could emerge.

Trade and commerce existed as early as the tenth and eleventh centuries, immediately after the initial foundations by Charles of France. Coins, with the marking of Brocsa, were minted and traded in the area during that time. In addition, “the castrum built by Charles of France required provisioning, which led to construction of a loading dock on the Senne River and a bridge, first recorded [that is the bridge] about 1100 to facilitate bringing in grain and other supplies from the countryside.” Trade thus precipitated many other developments, as evidenced by the fact that “until the twelfth century when it became a post on the trade route from Bruges to the Rhine, Brussels in fact was of little importance.”

As Brussels continued to grow, it was not isolated from the rest of the world, and indeed, “its position near the great commercial route between Cologne and Brugge,

54 Wauters, Histoire des Environs de Bruxelles, XXI.
55 Ibid., XXII.
56 State, Historical Dictionary of Brussels, 94.
linking the Rhine with the North Sea, contributed greatly to its prosperity.”\textsuperscript{58} The commercial route was probably aided by an 1179 economic alliance that was made between Brussels and England, which led to trade of metals and wool.\textsuperscript{59} A later commercial alliance between Cologne and Brussels occurred in April 1270.\textsuperscript{60} In addition, the location on the mouths of the Scheldt (Escaut), the Rhine and the Meuse led to great economic advancements as well.\textsuperscript{61} Internationally speaking, trade began slowly with the fairs at Champagne and then expanded to Italy and even as far north as Novgorod.\textsuperscript{62} The cloth trade again grew quickly with the Crusades, in which the dukes of Brabant and the people of Brussels had a particular interest.\textsuperscript{63} With due time, Brussels exported and imported a number of products, including wine, fish, meat, honey, vinegar, wool, skins, cloth, leather, metal, bread, and beer.

The growth of trade had a direct impact on town life and the increase of the town’s population. Ghent was one of the largest towns with 56,000 inhabitants in the mid-fourteenth century. Bruges had about 35,000 inhabitants and Louvain, Brussels, and Ypres all had between 20,000 and 40,000 inhabitants.\textsuperscript{64} Brussels was certainly not the largest town, but it was one of the largest in the Low Countries. While historians do not have exact figures for the centuries between the twelfth and the fourteenth, they do know that by 1435 there were 6376 foyers and by 1526 there were 5956 homes and 22

\textsuperscript{58} Belgium, Godfrey and Rushbrooke, 585.
\textsuperscript{59} State, Historical Dictionary of Brussels, 94.
\textsuperscript{60} J.F. Williams, Les Gestes des Ducs de Brabant, par Jean de Klerk, D’Anvers (Bruxelles, 1839), 665.
\textsuperscript{61} Belgium, Godfrey and Rushbrooke, 83.
\textsuperscript{62} Ibid., 85.
\textsuperscript{63} See Baedeker, Belgique et Luxembourg, 16.
\textsuperscript{64} Smith, An Historical Geography of Western Europe before 1800, 304. Paul F. State gives a more definite number of 20,000 inhabitants in 1400. See State, Historical Dictionary of Brussels, 359. Pierre de Spiegeler, however, places the population of Brussels between 30,000 and 40,000 in the fourteenth and fifteenth centuries. See Spiegeler, Les Hôpitaux et l’Assistance à Liège, 55.
hospitals. Comparatively, Brussels was a middle-sized town in the duchy, but it had the most hospitals in the duchy. Anvers, which was one of the larger locales in the duchy, had 8785 houses and 22 hospices. It had no hospitals. Significantly smaller than Brussels was Nivelles, which only had 1,004 houses but boasted 5 hospitals and three convents.

In addition, because of the rise of trade, Brussels saw the expansion of streets and city markets. We know that “the earliest market was that called simply the “lower market” (Nedermerckt)[. It was] set up in front of the church of Saint-Nicholas, which is cited as early as 1174.“ Another market place was located at the Place des Bailles in front of Coudenberg Palace on a main east-west route through the city. Because of its location, this market attracted traders and became one of the commercial focal points of the city. Generally, “city officials determined the days when and places where exchanges were made. Inspectors oversaw the application of city ordinances and they enforced controls on the quality and quantity of goods, which were strictly regulated. Fines for inexact measurements were stipulated as early as the charter (keure) of 1229.” Authority, however, to sell goods was in the hands of the merchants, who were given the power to operate individual stalls, just as long as they paid an annual rent, at first to the dukes and then gradually to the city officials.

As trade grew, so did the town around it, quite literally. Many of the streets of the town took their names from the trades with which they were associated, such as butter,

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65 Williams, Les Gestes des Ducs de Brabant, XLIII.
66 Williams, Les Gestes des Ducs de Brabant, XL.
67 Ibid., LVIII.
68 Ibid., LIX.
69 State, Historical Dictionary of Brussels, 191.
cheese, beer, and herring.\textsuperscript{70} The Rue du Marché au Fromage was called Smaelbeke in the thirteenth century, and cheese, onion and chestnut merchants all sold goods there. The streets formed irregularly; roads developed as residents gathered pebbles from the Senne, which were used to line the streets. One of the oldest streets is that of the Rue au Beurre. It was originally called Santstraete (or “sand street”) because it followed the course of the marshy and sandy soil near the original castrum of Charles of France, eventually leading to the church of Saint-Nicholas and the “lower market” or Nedermerckt.\textsuperscript{71} Later, it took its name for the butter that was sold along its path. The Rue du Midi, originally called Corte Steenstraet, also extended from Saint-Nicholas.\textsuperscript{72} A nearby street, the Rue des Bouchers (originally called the Vicus Carnificum), sold meat and sausage as early as 1294. Goat meat and mutton, however, had to be sold at the Grande Boucherie, located behind the present-day Maison du Roi.\textsuperscript{73} The Rue du Midi, originally called Corte Steenstraet, also extended from Saint-Nicholas.\textsuperscript{74}

Other streets focused on particular trades or commercial ventures. The cloth market, the Halle aux draps, was also located behind the present day Maison du Roi.\textsuperscript{75} The Rue de la Bourse, or Bruxella 1238, grew up around a small Franciscan convent founded in the same year. The convent had a church, cloister, library, infirmary, brewery, and vegetable garden, which made it fully functional within the confines of the

\textsuperscript{70} Ibid., 129, 188.  
\textsuperscript{71} Ibid., 35.  
\textsuperscript{72} Ibid., 202.  
\textsuperscript{73} Ibid., 41.  
\textsuperscript{74} Ibid., 202.  
\textsuperscript{75} Ibid., 76.
city. The convent also served as the final resting place for Jean I (d. 1294). The Rue des Grand Carmes, was founded similarly after a monastery of the order of Mount Carmel in 1249. The thirteenth century Rue de Lombard, originally called the Rue des Fourons, was larger than other streets around it and thus it housed markets and craft shops. The transition to “Lombard” occurred to designate the “early financial operators from Lombardy, Italy, who were known for charging excessive rates of interest.”

We also have some information about the streets that ran along and up Coudenberg hill to the palace. The Montagne aux Herbes Potagères is located still in present-day Brussels and runs 230 meters (754 feet), which is short by modern-day standards but significant by high-medieval standards. During the reigns of the early dukes of Brabant, the road was much shorter because it stopped at the gates of the first town wall. At this location, merchants, principally vegetable growers, brought in their produce to the city; thus, the street gets its name from the merchants who sold their goods along this route. The Montagne de la Cour follows a rustic path that scaled Coudenberg hill from at least the [tenth] century. Count Lambert II transported his possessions from the castrum to the new fortress on the heights along this trail, thus the name “court.” It was paved in the [twelfth] century and formed part of an east-west axial road known as the Steenweg (“stone road”), comprising the current Rues de Namur (formerly Coudenberg), Montagne de la Cour, de la Madeleine, Marché aux Herbes, Marché aux Poulets, Sainte-Catherine, and de Flandre.

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76 Ibid., 56.
77 Ibid., 129.
78 See Little, Profit Economy. For information pertaining specially to the street see State, Historical Dictionary of Brussels, 183.
79 State, Historical Dictionary of Brussels, 204.
80 Ibid., 204-5.
At the end of the Marché aux Poulets was a crane on the Senne used to load and unload goods.\textsuperscript{81} As early as the beginning of the twelfth century in Brussels, there were already several streets near the city chapel or in the neighborhood of it. These streets included the Or, Escalier, Val-des-Roses, Chapeliers, Harengs, and others. The area also boasted a great number of houses, and the seigniorial manor was next to the count’s castle.\textsuperscript{82}

The location of the present-day Maison du Roi, sometimes known as the Grand’ Place (Great Market—Grootmerckt), is on the thirteenth century site of the guildhall of the bakers, or the Broodhuys. The Grand’ Place was the central commercial location in Brussels in the lower town where townspeople could shop for meat and bread in one place. They could also shop for fish along the Rue du Marché aux Herbes\textsuperscript{83} located nearby. Although it was prone to floods, the central position, near a port and the Senne, made the area ideal for trade. The residents, whose homes were located in the area, first sold the goods in the open air. Later, they set up shops to sell their goods.

As Brussels continued to grow, so did sharper divisions of the many groups of the town. This was especially true during the reign of Henry I (1190-1235). During this period, people began forming into what could be considered proto-guilds and began moving into designated occupational spaces.\textsuperscript{84} Commodities and drink merchants might have included butchers, fish, fruit, and legume merchants, and wine dealers. Artisans included carpenters, painters, and sculptures. There were also mill owners and metal workers, leather workers, spinners, weavers and cloth merchants, and masters of diverse

\textsuperscript{81} See map 1 for the basic outline of the early streets.
\textsuperscript{82} Domum inter domicilium domini ducis et castrum castellani, in loco qui dicitur Borchdal, Borchdal, L. E. de 1259. Arch. De Sainte-Gudule in Henne et Wauters, Histoire de la Ville de Bruxelles, 38 n 2.
\textsuperscript{83} State, Historical Dictionary of Brussels, 188.
\textsuperscript{84} Ibid., 365.
trades, such as businessmen, shippers, and barbers.\textsuperscript{85} The most important of all these trades to medieval Brussels were those of the weavers and the fullers.\textsuperscript{86}

Many guilds, namely the cloth guild, arose in power, so much so that they began to achieve economic and urban freedom. By the early thirteenth century, the Merchants’ Guild formed a Council of Jurors. The Council collectively elected a municipal governing body of thirteen jurors (\textit{jurés, geschworenen}),\textsuperscript{87} who “were bourgeois citizens of Brussels appointed by the duke of Brabant beginning in 1235 to assist in municipal administration, including the maintenance of public peace and the regulation of trade.”\textsuperscript{88} Initially, the Council was headed by aldermen, deans, and the eight guilds, all of whom received their titles for life. This tradition, however, changed significantly by 1235 when the men began to govern annually.\textsuperscript{89} The Council grew until it reached maturity in 1282.\textsuperscript{90}

Perhaps, though, the hallmark of the merchants was the successful reception of a town charter in 1229. Town charters tend to signal both independence of the city and the rise of an urban environment, and they “were a defining characteristic of urbanism in

\textsuperscript{85} Henne et Wauters, \textit{Histoire de la Ville de Bruxelles}, 55-6.
\textsuperscript{86} In addition to the above-named trades, later on 11 February 1421, the city government was organized into nine nations, which were dictated by the guilds that dominated the city. These nations included Our Lady, Saint Peter, Saint John, Saint Nicholas, Saint Géry, Saint Christopher, Saint Laurence, Saint Gilles, and Saint James. Each had their own members. The nation of Saint John, for example, was comprised of blacksmiths, boilermakers, cutlers, chair makers, and ceiling plasterers.
\textsuperscript{87} See Ernest Gilliat-Smith, “Brussels.”
\textsuperscript{88} State, \textit{Historical Dictionary of Brussels}, 163.
\textsuperscript{89} For information on the Council of Brussels, see Favresse “Le Conseil de Bruxelles 1282-1421,” 138-140.
\textsuperscript{90} Félicien Favresse discusses this council in detail up through 1421, noting that it would not be until 1421 that it managed to issue any acts. Paul State notes, however, that the council “proved short-lived as it was discontinued by the end of the century, its authority supplanted by the college of aldermen.” See State, \textit{Historical Dictionary of Brussels}, 163.
Europe between the eleventh and fifteenth centuries.”⁹¹ With the laws privileges and customs that came with a charter, “chartered towns in the Middle Ages were set apart, legally and constitutionally, from villages and hamlets that were dotted around the surrounding countryside.”⁹² Brussels certainly can be included in this phenomenon.

After the creation of the charter of 1229 all male citizens (or bourgeois or burghers) of the age of 15 or older swore to adhere to its requirements. One could become a citizen by being from a burgher family or through the purchase of citizenship.⁹³ The charter also divided city finances into three groups: taxes, fines and royalties. Greater financial autonomy came when taxing authority was given over some to merchants in the late thirteenth century under Jean I. In 1292 Jean I allowed citizens to collect taxes on the use of a crane, which loaded and unloaded goods on the Senne. He also allowed them to collect taxes on the use of the weight scales.⁹⁴

While a town charter did mean independence to some extent, many towns that received a charter saw the outbreak of revolts and strikes between the ruling classes and the other workers. These revolts in Brussels were often described as being between the ‘good folk’ or ‘Golden Spurs’ (i.e. the ruling classes) and the ‘Blue-Nails,’ or the “discontented of all crafts.”⁹⁵ The tensions between the two factions created a remarkable and sometimes unstable urban environment, especially during the thirteenth century. When the factions agreed and when they found common parlance with the dukes, trade prospered. But when times of trouble emerged, so did discontent and

⁹¹ Lilley, Urban Life in the Middle Ages 1000-1450, 42.
⁹² Ibid.
⁹³ State, Historical Dictionary of Brussels, 74.
⁹⁴ Ibid., 294-5.
⁹⁵ Lyon, Belgium, 16.
instability. For example, under the minority of Godfrey II (1139-1142), many of the lords and merchants took advantage of the weakened status of the duchy by revolting or simply refusing to obey the authority of the young duke and his duchess regnant.

Sometimes the resultant urban environment was dictated by appeasement rather than compromise. As a result, the concessions of the dukes did allow prosperity. The prime example of such appeasement was the 1229 town charter *(keure or electio).* The charter was given principally for the establishment of peace among the members of the burgher class. The same could not be said of the fourteenth century, which witnessed growing discontent between the dukes and the burgher class to the point of revolt in Brussels, so much so that the growing tribulation disrupted prosperity for some time.

Beyond the merchants, not many specifics can be discerned about the peoples of the duchy of Brabant. Historians do know that the early dukes of Brabant “*habitaient de modesties manoirs, dont les dependences en terres, en bois, en prairies, en étangs, leur fournissaient ce que réclamait une existence encoue à moitié barbare.*” In addition, the historical records show growing distinctions among nobles, barons, and magnates in the region. One of the greatest divisions during the periods of early rule occurred with the rise of the *lignages,* or seven groups of patricians, who were often referred to as the

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97 Henne et Wauters, *Histoire de la Ville de Bruxelles,* 58.
98 Wauters, *Histoire des Environs de Bruxelles,* XXXV-XXXVI.
99 Wauters goes on to discuss the divisions as unequal. Wauters, *Histoire des Environs de Bruxelles,* XXXVI.
bien-nés or simply as clans. Not only were lignages distinguished by their position, but they also received certain privileges, such as having an official seal.

Late in the eleventh century, the seneschal (sénéchaux)—sometimes called maîtres d’hôtel (dapiére, porte-mets)—became the supreme judge of the area and civil government was placed in the trust of a mayor, which occurred mostly after 1106. In addition to the seneschal, other offices, such as the chambellans, emerged. The period also saw the rise of the office of the châtellenie, which was originally a hereditary post. The châtelains were in charge of defenses of the town, and they exercised great influence throughout the twelfth century until the office of the Amman replaced them. A paid officer who was appointed by the duke of Brabant and called the Amman was first mentioned in 1125. The Amman had police and administration power and oversaw executions, and the territory in which the Amman exercised his power was called the cuve, or ammanie, or franchise. They also led the aldermen, the earliest and simplest municipal organization of Brussels.

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100 The names of the seven leading families are as follows: S‘Leeuws-Geslachte, S‘Weerts-Geslachte, S‘Hughe-Kints geslachte, Ser-Roelofs geslachte, Die van Coudenbergh, Die Uten-Steenweghe, and Die van Rodenbeke. Henne et Wauters, Histoire de la Ville de Bruxelles, 32.
101 Henne et Wauters, Histoire de la Ville de Bruxelles, 32.
102 Henne et Wauters, Histoire de la Ville de Bruxelles, 34.
103 Wauters, Histoire des Environs de Bruxelles, t. I, XLI.
104 Henne et Wauters, Histoire de la Ville de Bruxelles, 38. The most important châtelain in power during the history of Saint John’s hospital was Lionnet I, who served as châtelain from 1210-1253. See chapter eight for more information on him.
105 State, Historical Dictionary of Brussels, 10.
106 Ibid.
107 Ibid., 85.
108 The office of the Amman was originally created by Godfrey I. State, Historical Dictionary of Brussels, 125-6.
109 The aldermen were not only important to the town’s administration. They also played significant administrative roles for the hospital of Saint John. Many of the town’s aldermen from the thirteenth century are surveyed in detail in chapter eight. Also, see chart eight.
Religiously speaking, the twelfth and thirteenth centuries were embodiments of religious fervor among many of the people of Brussels, which was manifested in the growth of lay piety throughout Europe during this time. Indeed, the explosion of lay piety had a direct impact on the growth of religiously-oriented institutions and groups in the city. A number of the rulers pursued pilgrimages and crusades. Godfrey III went on pilgrimage in 1183 to Jerusalem. Shortly after, his son Henry I, participated in crusade from 1197 to 1198. While on crusade, Henry I recognized the prestige of consecrating hospitals, which would later help in the creation of Saint John’s hospital.  

In addition, the period saw the formation of a number of religious chapters, most of which formed under the Rule of Saint Augustine, and there was an augmentation of churches and monasteries. There were also a number of charitable organizations that arose in power and number, including hospitals for the poor. For example, the Hospital of Notre-Dame-et-des-douze-Apôtres was already in existence by 1127, sometime before 1129 the Hospital of Saint-Nicholas was created, and Saint-Jacques arose near Coudenberg Palace sometime before 1162. Duke Henry I also granted the land for the foundation of religious institutions, such as the 1201 foundation of Abbaye de la Cambre/Abdij ter Kameren located between the Bois de la Cambre, which served

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110 *Cartulaire de l'Hôpital Saint-Jean*, XIII. Some scholars, such as P. B. Lefebvre, have suggested that Henry I was inspired by the Hospitalliers of Saint-Jacques while on crusade in Jerusalem. It was probably during an expedition to the Holy Land between 1197 and 1198 that Henry I came into contact with them.  
112 Ibid. Several hospitals are named here, but the Hospital of Saint John’s in Brussels was completely neglected.  
114 This park is part of the Forêt de Soignes and constituted part of city and industrial life from the beginning foundations of Brussels. For more information, see State, *Historical Dictionary of Brussels*, 37.
as a convent for Cistercian nuns.\textsuperscript{115} The first church, Saint-Jean-Baptiste, was already in existence in 1174,\textsuperscript{116} and the Saint-Pierre hospital, which was created originally as a leprosarium, was founded in the same year.\textsuperscript{117} Finally, in 1225, under the reign of Duke Henry I, construction on the Cathedral of Saints-Michel-et-Gudule began.\textsuperscript{118}

Despite the development of Brussels throughout the twelfth and thirteenth centuries, the fourteenth century was one of even greater change—religiously, economically, and socially. Thus it is with 1312 that we end our survey in order to turn to the history of Saint John and its patrons. The hospital of Saint John was founded on the very location where trade and commerce had emerged in the city of Brussels, slightly above the lower market and between the two tributaries of the Senne, Smaelbeek and Rollebeek. The institution was also located near the Marché aux Fromages and the Rue des Pierres,\textsuperscript{119} and it was one of many institutions that was born out of the pivotal changes that marked the twelfth century in this area. In addition, the hospital was founded during a period of religious fervor. While many of the rulers of Brussels, as shown above, participated in this movement, there were several other key players who have not been mentioned. Merchants and middling nobles grew in number and power, and their abilities to participate in urban government and traditions once limited to the nobility also expanded. Finally, the growth of the town spurred the need for hospitals, which was a direct result of the rise of the urban environment and the prosperity enjoyed

\textsuperscript{115} State, \textit{Historical Dictionary of Brussels}, 1.
\textsuperscript{116} Ibid., 203.
\textsuperscript{117} Ibid., 274.
\textsuperscript{118} Ibid., xxiv.
\textsuperscript{119} The location of the hospital was at one of the vulnerable points in the town. This may explain why Saint John’s did not survey the bombardment in 1695. See V. Ch. Terlinden, “Bruxelles, place de guerre,” 140.
only by some. To understand all these developments, one only needs to turn to the extant documentation of the hospital of Saint John, through which the evolutions become visible. The hospital, its participants, its patrons, and its hometown all help to illuminate a missing history on the town of Brussels, a town that is just as worthy of exploration as the other cities of the high medieval world.

\(^{120}\) Cartulaire de l’Hôpital Saint-Jean, XV.
Introduction

During the twelfth and thirteenth centuries, urbanization created a crisis in the towns and cities of Europe. Towns blossomed, and in many places village settlements exploded into formidable cities. While the immediate effects of urbanization included more croplands, better diets, increased trade and commerce, expanded learning, and an overall “renaissance,” the long-term benefits were not always immediately realized. Although not entirely accurate, traditional early medieval society had been classified as a “tripartite society” of those who pray, fight, and work. The rise of cities, however, precipitated the growth of trade and commerce and created professions, such as merchants, for which the traditional divisions did not account. These new merchant-burghers not only challenged the bounds of tripartite society and created a social upheaval, but also began to dictate a new set of social norms.

In addition, as society moved from a land-based economy and barter society to a cash society, lands and rents once limited to only the upper nobility became available to lesser nobles, who were now able to participate in some of the customs and traditions, especially in regard to land donations that had once been limited to royalty and the upper nobility. Thus, with the rise of the profit economy came a social upheaval with new

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1 For this development in the region of Brussels, see Henne et Wauters, *Histoire de la Ville de Bruxelles*.
3 Traditionally, this phrase is attributed to one of two sources, the first of which comes from Bishop Aldabero of Laon on 1027/31. The second author was Bishop Gerard I (1012-51) a canon of Cambrai on 1023/4. For more on both men, see Constable, *Three Studies in Medieval Religious and Social Thought*, 283-4.
4 See Pirenne, *Medieval Cities: Their Origins and the Revival of Trade*.
opportunities for mid-level nobles. These new opportunities were spurred on by the lay spiritual movement and were best manifested in donations to charitable organizations.

Social upheaval was not the only consequence of the crisis of urbanization. While increased urbanization did indeed lead to the creation of bigger and more complex towns and cities, more significant fortifications, plentiful farmlands, astonishing architectural structures, and capable municipal governments, not everyone would benefit from the newfound changes. For the first time since the fall of the Roman Empire, socially displaced poor and sick people began to plague the streets of European cities. These people were victims of the success of urbanization. Recently forced both into despair and the view of the public through the loss of personal ties that had been a hallmark of village society, the displaced poor and sick became constant reminders that with all its wonders, urbanization also brought serious problems.

In this time of social upheaval and urban change, the hospital of Saint John and Saint-Pierre leprosarium were the only institutions that assisted the public of Brussels. While Saint-Pierre was designated specifically for lepers, Saint John’s functioned as the

5 See especially, Little, Religious Poverty and the Profit Economy.

6 For this and other reasons, historians argue that urbanization often created a loss of community, forcing people to reconsider to what groups they belonged and to whom they could turn in times of need. Furthermore, the crisis of urbanization not only precipitated social and communal evolutions but also new social and institutional structures, many of which came as responses by local churchmen and nobles to remedy the unforeseen urban problems. Several scholars have identified these trends in areas throughout Europe, including Edward J. Kealey in his social history of Anglo-Norman medicine in the twelfth century and Sharon Farmer in her study on the poor men and women of thirteenth- and fourteenth-century France. While both these and other works demonstrate that significant advances are being made in the study of the poor and the institutions created for them after the crisis of urbanization, there are still many gaps in scholarship, including coverage of the Low Countries in general and twelfth- and thirteenth-century Brussels specifically. The dearth of material on the social and institutional situation in the Low Countries is especially surprising given that these areas were among some of the first to experience the crisis of urbanization and also among the first to attempt to address the new issues systematically. See Kealey, Medieval Medicus; Farmer, Surviving Poverty in Medieval Paris. For some of the recent scholarship on this topic, see Milis, Religion, Culture, and Mentalities in the Medieval Low Countries; Nicholas, “The Role of Feudal Relationships in the Consolidation of Power”; and State, Historical Dictionary of Brussels.
only true hospital. Since it cared for the sick and since it became a place to which the
patrons of Brussels could donate their services and money, Saint John’s served as a point
of intersection of all the groups, old and new, in the cityscape. Upper nobility, upper
clergy, lower classes, and the people not traditionally included in tripartite society—the
new urban burgher class, the mid-level nobility, and women—all either benefited from
the services offered by the hospital or benefited from the new community generated by
the urban crisis. The result of the intersection was the creation of a new Christian ethos
centered on the hospital, from which all classes and people, including Duke Henry I (r.
1183/1190-1235), Guillaume of Ledebergh, Arnoul of Messye, and other knights, found
community and “solidarity.” Thus, in order to understand these developments, it will be
necessary to survey the nobles and mid-level nobles associated with the hospital of Saint
John beginning first with Duke Henry I.

The Hospital of Saint John and Its Noble Patrons: The Dukes of Brabant

We know that “a phenomenon […] took place not only in Louvain but also in
practically every other medieval town of Western Europe,” which included the “gradual
transfer of the regulation of poor relief from the hands of the church to those of the
municipal authorities.”7 Walter John Marx explains that

laymen played an important part in [institutions’] foundation, donating land,
buildings, and revenues; the duke, as ruler of the duchy, granted charters and
privileges and took the more important of these institutions under his high
protection. […] His vague general overlordship cannot be regarded as an
example of the secularizing of institutions which were eminently ecclesiastical,
any more than it can be said that he churches and abbeys of the town were under
lay rather than ecclesiastical authority.”8

7 Marx, The Development of Charity in Medieval Louvain, 83.
8 Ibid.

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This general European development also is seen in microcosm in Brussels where an alliance between the hospital of Saint John, the dukes of Brabant, and the nobles of Brussels goes back to the hospital’s beginnings. While there were several hospitals and associations with charitable missions appearing in Brussels and the Brabant region in the twelfth century, the dukes of Brabant were almost fully responsible for the creation and sustentation of Saint John’s in its initial years. Alexander Henne and Alphonse Wauters, two of the most well-known historians of Brussels wrote that it was thanks to Duke Henry I that several religious institutions, including Saint John’s hospital, flourished and that several others were newly established.\(^9\) In addition, over seven hundred years later an 1846 inscription on the hospital honored this memory: “à la pieuse et perpétuelle mémoire de Henri I, duc de Brabant, au fondateur et au plus grand bienfaiteur de l’Hôpital Saint-Jean.”\(^10\) Yet, even in the wake of Henry I’s piety, the founding of the hospital and the endowments by a layman of such high stature in the region deserve pause. Why exactly would Duke Henry I give so generously to an infant and unknown hospital? The answer to this question lies in the urban and spiritual climate of the twelfth and thirteenth centuries and in the foundational charters of the hospital itself, which need to be examined before turning to the dukes themselves.

The first four extant charters of the hospital of Saint John all relate to the initial foundation of the hospital and consist of a dedication of a church in the honor of the Virgin and the Saints Peter, Paul, Stephen, Médard and Gildard by Pope Innocent II; the

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\(^10\) See *Administration Générale des Hospices et Secours de la ville de Bruxelles: Hôpital Saint-Jean*, from the collected material of CPAS, Brussels: Belguim, 7.
approval of the constitution of a charitable confraternity under the title of Saint-Esprit by Roger, Bishop of Cambrai; exemptions for those entering into the hospital granted by Duke Henry I; and a document by Thierry II, the Abbot of Jette, in which the abbot allowed members of his community to participate in the spiritual care and benefit of the poor of the community of the confraternity of Saint-Esprit.\textsuperscript{11} Out of the nearly three hundred documents of the cartulary, these four have garnered the most attention in nineteenth- and twentieth-century studies, since they were directly related to the foundation of the hospital. For the purpose of this study, the documents will be examined in relation to the founding and later development of the hospital. Some of the issuances included Duke Henry I, while others did not. They, however, are all important to understanding the role that he played in the nascent hospital.

Bonenfant labels the first of the foundation charters as “faux,”\textsuperscript{12} and the issuance survives as a “pseudo-original” at CPAS.\textsuperscript{13} The document was probably composed closer to 1200 rather than the 1131 date given in the charter.\textsuperscript{14} The charter claims to have been created for a dedication to the abbey church of Saint-Médard of Soisson by Pope Innocent II, and the witnesses indicated in the charter were all either archbishops or

\textsuperscript{11} Cartulaire de l’Hôpital Saint-Jean, SJ 1, 2, 3, and 4; pps. 3-10. See also (for only numbers 1 and 3) CPAS SJ 4, fol. 12 and CPAS SJ 4 fol. 11.

\textsuperscript{12} Cartulaire de l’Hôpital Saint-Jean, SJ 1, p. 3. CPAS, SJ 4, fol. 12. For more on why this document is considered to be false, see Bonenfant, \textit{Saint-Jean de Bruxelles ou Saint-Médard de Soissons?}, 17.

\textsuperscript{13} Cartulaire de l’Hôpital Saint-Jean, SJ 1, p. 3. CPAS, SJ 4, fol. 12.

\textsuperscript{14} Cartulaire de l’Hôpital Saint-Jean, SJ 1, p. 4. CPAS, SJ 4, fol. 12.
The document was later reissued again by the Bishop of Cambrai, Henri de Berghes, on 22 November 1497 and copied in another cartulary in 1718. According to the document, on either 14 or 31 October 1186 a charitable confraternity was created with the permission of the Bishop of Cambrai. Made up of priests, clerics, and townspeople, the group was to represent an amalgam of peoples present in the town in which the hospital was founded. The creation of the group suggests that the members of the town were coming together in order to bring relief to those who were suffering in the wake of the urban crisis. In addition, the charter makes it clearly known that the group would be responsible for and dedicated to the “sustentationem pauperum multiformem.” Finally, identified in the document is a clear link between this new group in Brussels and an older charitable group in Cologne: “instar Coloniensis caritatis.” The charter bears no witnesses and was composed “anno Verbi incarnationis millesimo CLXXXVI, mense Octobri, in octava sancti Martini.”

The fact that such a group arose in Brussels in not surprising in the least, and the relation to the group in Cologne comes quite naturally, namely via the trade routes and old Roman roads that existed between the two cities that were frequented more and more

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15 Cartulaire de l’Hôpital Saint-Jean, SJ 1, p. 5. CPAS, SJ 4, fol. 12.
16 This cartulary is located in AGR, in Brussels, Belgium, and the exact location of this particular document is AE 2645, p. 9. It is under the title of a letter dedicated to the church of Saint John the Baptist and to the laity of Brussels by Innocent II. See Cartulaire de l’Hôpital Saint-Jean, SJ 1, p. 3. Since the charter is a pseudo-original and since it has little actual bearing on the foundation of Saint John, no further elaboration is needed here. This is not to say that the charter was without importance. The events surrounding the charter and its importance are detailed in the next chapter.
17 See Cartulaire de l’Hôpital Saint-Jean, SJ 2, p. 5.
18 Cartulaire de l’Hôpital Saint-Jean, SJ 2, p. 7.
19 Ibid.
20 Ibid.
21 Ibid.
after the rise of towns and cities.\textsuperscript{22} Brussels was dominated by a lower town centered on the Grand’ Place, the focus of trade and industry, and an upper city on Coudenberg, or ‘cold hill’, the home of the dukes of Brabant. The two parts of the town were linked by a land route that ran between Cologne and Bruges.\textsuperscript{23}

The same road between Brussels and Cologne was traveled often by pilgrims and merchants, but it had been a “bandits’ haunt” until “new monks made it secure and provided hospitality for wayfarers”\textsuperscript{24} via a hospice. The efforts by the monks had a significant impact on the once-dangerous thoroughfare. The monks who provided for the wayfarers even collected “tithes on all revenues [which] were to be set aside for the poor [and…] devoted the best part of their efforts and resources to building and enlarging the hospice, which soon came to include two buildings.”\textsuperscript{25} The increase in safety and communication allowed for better travel, but commercial goods were not the only entities that flowed along these routes: ideas also circulated freely. It might even be argued that the notion of “community” and caring for the poor and sick traveled from Cologne along the trade route to Brussels.

Such visions of community were not unique to Brussels and Saint John’s hospital. Throughout the Middle Ages there were several varieties of confraternities in the Low Countries, many of which represented a town, a village, or a rural community. The fraternities were typically dedicated to acts of charity for the community and to spiritual

\textsuperscript{22} See also Paul Bonenfant, \textit{L'origine des villes brabanconnes et la “route” de Bruges à Cologne} in \textit{la Revue Belge de Philologie et d'Histoire}, t. XXXI (1953).
\textsuperscript{23} Nicolas, \textit{Urban Europe: 1100-1700}, 64.
\textsuperscript{24} André Vauchez, \textit{The laity in the Middle Ages: religious beliefs and devotional practices} (Notre Dame: University of Notre Dame Press, c. 1993), 87.
\textsuperscript{25} Ibid.
support for their members. These groups were certainly present in the Low Countries, including the organization in Cologne named in the 1186 charter. In the wake of Crusades and the movement of the *vita apostolica activa*, several of these movements grew rapidly.\(^{26}\) Included in this particular group of growing confraternities were the fraternities of the Holy Spirit (Saint-Esprit). These organizations were different from regular confraternities, and they should not be confused with the Hospital Order of the Holy Spirit (located principally in Jerusalem) and its related groups formed by Gerard, the first headmaster.\(^{27}\) Rather, these confraternities were founded first by Gui de Montpellier.

The new fraternities of Saint-Esprit expanded quickly, and by 1204 “a bull by Pope Innocent III [...] ordered that the Hospitals of the Holy Spirit should have a confraternity associated with them.”\(^{28}\) This particular movement led to the establishment of several hospitals in the area of Brussels. The majority of these hospitals were dedicated to care of pilgrims and travelers, and many were specifically created as leprosaria, such as Saint-Pierre Leprosarium in Brussels.\(^{29}\) An organization specifically dedicated to the care of the sick and poor was lacking in the Brussels region. Given the spiritual and philanthropic climate, it seems only natural that the confraternity of Saint-

\(^{27}\) This is not to say that there were not hospitals and associations created in the area that did not have the Hospitaller character. Indeed, many such organizations flourished in the eleventh century. Most of these associations, however, lost their Hospitaller character or died out because of a lack of funding. See Bonenfant, *D’Histoire des Hôpitaux*, 13-14.
Esprit would emerge and eventually evolve into a hospital. The question that remains is, how?

The confraternity of Saint-Esprit was surely popular in Brussels, and its influence must have spread rapidly. As early as 1186, right after the bishop gave his approval to the confraternity, but perhaps as late as 1194, the Abbot of Jette, Thierry II, allowed members of his community to participate in the collection of alms for the confraternity of Saint-Esprit to be used for the care of the poor and the sick.\textsuperscript{30} Perhaps emulating the monks along the trade route and perhaps motivated by urban problems in the area, a local monastery began to help this rather unknown group. Not all gifts to the nascent institution, however, were completely altruistic, because for all those who would participate, spiritual benefice was given.\textsuperscript{31} Yet, even with this assistance, the early confraternity would face failure if it did not have more funding. Indeed, most of early hospital groups would die out, transfer, or lose their character because of a lack of funds. The infant hospital of Saint John would be saved by one particular donor, and the hospital might have faded into history doomed to the existence that many of the others faced in the region, if it had not been for Duke Henry I.

\textsuperscript{30} "...Omnem que auctore Spiritu Sancto in Christo fieri solet fraternitatem ac societatem approbari atque laudari dignum esse fatemur, quinimmo illam que in ejusdem Sancti Spiritus honore observatur superexcellere ac preminere ceteris profiteri non veremur. Nos itaque fraternitatem speciali Sancti Spiritus titulo insignitam Bruxelle cum alacritate et gudio spirituali suscipimus, omnesque qui in ea ad pauperum ac debilium recreationem elemosinarum suarum amminicula transmiserint, in nostrre fraternitatis societate connumeramus omniumque beneficiorum nostrorum, orationum, missarum, vigiliarum atque elemosinarum participates constituiimus.” The charter bears no witnesses. Cartulaire de l’Hôpital Saint-Jean, SJ 3, p. 8. CPAS SJ 4, fol. 11.

\textsuperscript{31} See above. Cartulaire de l’Hôpital Saint-Jean, SJ 3, p. 8. CPAS SJ 4, fol. 11.
Although the confraternity of Saint-Esprit had been in existence for four years before Duke Henry I of Brabant (r. 1183/1190-1235)\(^{32}\) began his sole rule, many scholars have argued that it was Henry I’s “munificence and piety” to which Saint John’s was forever indebted.\(^{33}\) Henry I enriched the province and the city of Brussels and propelled Brabant into a new era, one which contemporaries described as an age of “glory and liberty.”\(^{34}\) Evidence of Henry’s role lies in his long tradition of charitable acts, as well as acts by the other dukes of Brabant and their family members. Several of the dukes of Brabant were integral in the early hospital moments, leading some historians of earlier centuries to believe that Godfrey I, Henry’s father, was actually responsible for the foundation of the hospital of Saint John.\(^{35}\) More recent accounts, however, are coming to show that Henry I was more responsible for the foundation of the hospital and for a later adjoining chapel.\(^{36}\)

In addition to his role in the hospital of Saint John, the examples of Henry I’s piety and devotion to charity are many.\(^{37}\) In 1201 Duke Henry I granted land\(^{38}\) for the foundation of the religious institution *Abbaye de la Cambre* located in the *Bois de la*

\(^{32}\) Although dated, the best source for Duke Henry is G. Smets, *Henri I Duc de Brabant 1190-1235* (Bruxelles: Lamertine, 1908).


\(^{34}\) Henne et Wauters, *Histoire de la Ville de Bruxelles*, 48.


\(^{37}\) For a nearly-complete list see Smets, *Henri I Duc de Brabant 1190-1235*, 260-264. Saint John’s hospital, however, is not mentioned in the list.

Cambre, which served as a convent for Cistercian nuns. Henry not only gave favors to local cathedral chapters and abbeys, but he also founded several new institutions, including hospitals and centers dedicated to public care. We also know that Henry I and his wife Marie founded the church of Saint-Pierre in Cologne in August 1221, which demonstrates that not only was the couple concerned with charity, but that there were also connections between Brussels and Cologne. Finally, in 1225, under Henry I’s reign, construction on the Cathedral of Saints-Michel-et-Gudule began.

The greatest evidence of Henry I’s role in charitable enterprises, however, lies in his involvement with the hospital of Saint John. Many of the charitable bequests undertaken by Henry I were within what would become the jurisdiction of the hospital of Saint John. Because Saint John’s hospital was in the province (ressort) of Brussels, it was the responsibility of the duke of Brabant. Yet, even though the responsibility of the duke, of the nearly three hundred extant documents related to the hospital of Saint John, Henry only appeared in five, all of which either enriched the hospital’s endowment or

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39 The Administration Générale des Hospices et Secours de la ville de Bruxelles also notes that Henry I gave charitably in 1204 to the hospital of Saint John rights that he held in Brussels in the woods. This, however, may be the same donation that is referenced by Paul State in 1201. See Administration Générale des Hospices et Secours de la ville de Bruxelles: Hôpital Saint-Jean, 2.
40 Smets, Henri I Duc de Brabant 1190-1235, 258.
41 Inventaires des Archives de la Belgique, 25-6. Furthermore, Duke Henry I also “permets aux échevins de Nivelles de se rend à la cour de l’hôpital du Saint-Sépulcre en cette ville, pour y mettre les pauvres du dit hôpital en possession des Moulin, vivier et autres biens que, de son consentement et avec son approbation, leur avait donnés aumôme Gauthier, seigneur de Rèves (Roauia)” in 1223. Inventaires des Archives de la Belgique, 28.
exempted it from customary dues and services. Although the number seems small, the
privileges allowed laid the foundation for later changes and developments.

In 1195 Henry exempted all fees and military services of those who entered into
the community of Saint-Esprit in Brussels. He noted that once he retired to the
community, the retiree was to surrender his property to the hospital and that he could no
longer be involved in secular dealings. The charter was witnessed by several members
of the local community: “Hujus rei testes sunt: Arnoldus, Heynricus, Franco magister,
clerici; Arnoldus de Bigardis, Gosceloi de Isca et Henricus, frater suus; castellanus
Bruxellensis et alii quamplures.” The list proves important in understanding the growth
of the organization and the institution in its early stages. In addition to the Duke, there
were several secular people present, as well as members of the urban elite and religious
figures. Arnoldus, a ducal cleric probably integral to the composition of the charter, was
also mentioned in the documents in 1183 and 1201. Master Franco would become the
next chaplain of Brussels and was cited again in 1197. Arnoul III, Gosselin
d’Overyssche and Henri d’Overyssche would all appear again in later charters, and the
castellan about which the document speaks was Godfrey, who obviously had a stake in
the community thanks to his position.

In its contents, the charter suggests several important developments. First, the
confraternity of Saint-Esprit must have evolved considerably over the last few decades if

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44 The description comes from Bonenfant’s reading of the document. See Cartulaire de l’Hôpital Saint-Jean, 8-10. This original is lost, but there is a copy in a fifteenth-century cartulary.
45 Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10.
46 Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10.
47 Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10, fn 1.
48 Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10, fn 3.
49 Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10, fn 4-7.
it was able to support retirees, albeit their property and money was to be surrendered to the hospital. In addition, the charter refers to the confraternity not as a group, but as an organization based at the hospital of Saint-Esprit. Although the word “hospital” does not necessarily denote institution, the fact that the hospital was receiving retirees and called a hospital seems to suggest that some sort of institution was at least developing, if not already present. Yet, given the people outlined in the charter and the changes that came with it, a larger question still remains: Why would a duke give military exemption at a time when he was expanding politically and territorially?

When one takes into consideration the details of the exemption, a clearer understanding of motives emerges. While Duke Henry I exempted the retirees from military service, most of the participants did not have sons or were simply too old to father sons. Many of them would probably retire to the hospital because their wealth and donations allowed them to do so. Thus, their retirement did not prohibit Henry I from raising an army, but their wealth certainly contributed to the hospital. In addition, since the exemption was meant for those who were either too old to serve or no longer able to produce children of their own, entering into the hospital became a semi-retirement for these individuals.

51 A later bull issued by papal legate Pierre Capocci discusses the grating of indulgences in exchange for those who contributed to the reconstruction of the hospital. The reconstruction of the hospital in 1254 would suggest that there was an institution there before 1254. Indeed, the Latin describes the hospital as having been newly planted (quod est novella plantatio). See Cartulaire de l’Hôpital Saint-Jean, SJ 91, p. 130. CPAS, SJ 4, fol. 18. For more discussion on this subject, see below.  
52 Smets, Henri I Duc de Brabant 1190-1235, especially 1-220.  
53 Bonenfant, D’Histoire des Hôpitaux, 66.  
54 Ibid.
Despite the exemption, the retirees were still compelled to pay census charges. Yet, upon their death the hospital would inherit their lands. Given that the lands were to be surrendered to the hospital of Saint John, we can assume that Henry I was also exempting the retiree’s lands from military service. Even those who were too old to fight for themselves, if they were holding lands of the duke, might have had the duty to provide scutage to the duke to allow him to outfit someone to fight in the holder’s place. Thus the duke was giving up income to take care of his “people” in their old age.

The notion that one could retire in a hospital had long preceded the creation of Saint John. In fact, the hospital may have been modeled on others that allowed for similar retirement practices. As the Duke of Brabant, Henry I needed to address the problems of urbanization in his community, which he did via exemptions and privileges granted to an institution that was dedicated to addressing the problems created by the urban crisis. In his exemption, Henry I had created asylum for those who needed care as well as an income for the newly-founded confraternity. The exemption was good for everyone. Henry I provided a military exemption that did not necessarily hinder his goals while at the same time providing for a hospital that was becoming an integral part of the community.

Even more striking than the 1195 document of military exemption by Henry I is a 1204 charter in which Henry I gave to the poor the hospital of Saint John. While most of the documents in the Saint John collection are gifts, donations, and exemptions, the

55 “…Ita tamen ut, si domistationes infra opidum aut terram vel aliqua alia bona extra opidum possideant, debitum censum dominis suis persolvant et per hoc ab omni alia exactione liberi permaneant. Et post obitum eorum omnia que possidebant, cum ad hospitale convertebantur, in usus hospitalis ipsius convertentur. Et postquam se in predicto hospitali quis reddiderit, postmodum seculares negotiationes inhonestas non exercet…” Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10.
majority of the charters do not specify that the person or group was providing specifically to the poor of the hospital. This, however, became the case in 1204 with Henry I’s donation: “Ego, Henricus, Dei gratia dux Lotharingie […] ad opus pauperum hospitalis beati Johannis, quod antea Sancti Spiritus dicebatur.” Similar to the previous issuance by Henry I, the charter included several witnesses: Gillemmus, a prévôt of Sainte-Gudule, the dean of Sainte-Gudule, magister Michael, master Francon, and the chaplain of Brussels. Some of the secular figures include Reinerus and Reinerus, notaries, Franco de Gemblus, Robertus de Thenis, Arnoldus de Hudinchem, and Walterus Clutinc. The witness list also contained the name of two brothers, Meiso and Franco de Holar, probably of the family of Hoeylaert, and the milites Jacobus de Wamblene. Finally, the document listed several witnesses from the families of Saint-Géry and the family de Spigla, de Speculo or van den Spieghle, a family that produced several aldermen for the city throughout the thirteenth and fourteenth centuries.

In addition to unique wording of the document, the charter’s contents also specify other irregularities. It is well documented that previous to this donation the hospital was titled Saint-Esprit and dedicated to the Holy Spirit, even though the hospital is clearly named as Saint John in the charter. The hospital began to flourish at a time when other confraternities dedicated to Saint-Esprit were also arising and at a time when the Order of

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57 Cartulaire de l’Hôpital Saint-Jean, SJ 5, p. 12, fn 1.  
58 Cartulaire de l’Hôpital Saint-Jean, SJ 5, p. 12, fn 2.  
59 Cartulaire de l’Hôpital Saint-Jean, SJ 5, p. 12, fn 3.  
60 Cartulaire de l’Hôpital Saint-Jean, SJ 5, p. 12, fn 4-7; and p. 13, fn 1.  
64 Cartulaire de l’Hôpital Saint-Jean, SJ 5, p. 13, fn 5.  
65 Cartulaire de l’Hôpital Saint-Jean, SJ 5, p. 13, fn 4-5.
the Hospitallers were located only a few miles away in neighboring Cologne. It also arose at a time when local burghers were increasingly concerned with charity and at a time when the dukes of Brabant were likewise consumed with bienfaisance. Bonenfant describes all these influences, especially that of the dukes and their trips/associations with the Holy Land. In short, it is not a surprise that a hospital under the patronage of “Saint John” arose in the period and location that it did.

Yet, despite all the outside influence, Henry I may have been personally involved in the renaming of the hospital from Saint-Esprit to Saint John. Bonenfant has speculated that the change came under the influence of an earlier 1201 establishment of a capella beati Joannis in the cathedral chapter of Sainte-Gudule. He explains that in 1201, a “capella beati Joannis” appeared among those that Duke Henry I consecrated.

The cathedral of Saint-Gudule (now named Saints-Michel-et-Gudule) is one of the two churches in the archdiocese of Brussels-Mechelen. It was established as early as 1047, but the present church saw its creation under Henry I in the early thirteenth century. Thus, it comes as no surprise that Henry’s interest in Sainte-Gudule and its chapter may have led to the renaming of the hospital of Saint John.

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66 Cartulaire de l’Hôpital Saint-Jean de Bruxelles, XI.
67 Based on the seal of the hospital, which pictures a scene of Christ baptizing Saint John in the Jordan River, the patron was Saint John the Baptist. Yet, the image does not make the association clear in all cases. In a few fifteenth-century documents there is reference to both John the Baptist and Evangelist. In addition, Bonenfant seems to favor the idea that the renaming shows the influences of the dukes and their associations with the Holy Land, and G. Smets explains that for Henry I, “la protection des saints lui semblait d’ailleurs indispensable et il croyait ne pouvoir mieux l’acquérir qu’en gratifiant de donations les institutions religieuses de sa terre.” See Smets, Henri I Duc de Brabant 1190-1235, 257.
69 Bonenfant, D’Histoire des Hôpitaux, 62.
After a later renaming to Saint John, the hospital was freely endowed by both Duke Henry I and the bishop of Cambrai.\textsuperscript{70} It was only shortly thereafter that the Bishop of Cambrai, Jean III de Béthune (r. 1200-1219), gave Saint John its 1211 statutes, in which the bishop invited the dean and the chapter of Sainte-Gudule to designate a priest to serve in the chapel contained at the hospital of Saint John.\textsuperscript{71} The addition of a chapel contributed to the hospital’s status, as well as brought in substantial income for the use by the brothers and sisters. Other profound transformations aside from a name change arose with addition of the chapel. While the twelfth century in Brabant was marked by the flowering of hospitals and similar institutions,\textsuperscript{72} and whereas several hospitals and institutions were created in the eleventh and twelfth centuries, the defining period for the hospital of Saint John came in the thirteenth century—it is what Bonenfant has called the hospital’s \textit{efflorescence}.\textsuperscript{73} Certainly, the growth of the hospitals was inextricably linked to other trends, such as the rise of the profit economy,\textsuperscript{74} the growth of cities, and the proliferation of the poor and indigent. What especially characterized these new hospitals, however, according to Bonenfant, was extension and/or aggrandizement.\textsuperscript{75} For Saint John’s, this meant the growing support for the attached chapel\textsuperscript{76} and its related offices.

\textsuperscript{70} See Henne et Wauters, \textit{Histoire de la Ville de Bruxelles}, 49.
\textsuperscript{71} \textit{Quia igitur capellam que dicte domui contigua est et ad mostram donationem spectat nuper intelleximus vacare, rogamus, monemus et in Domino affectuose consulim us quatinus in eadem capella presbiterum aliquem discretum, moribus maturum, conversatione probatum ad honorem Dei et religionis provectum instituat.} See \textit{Chartes du Chapitre de Sainte-Gudule à Bruxelles 1047-1300}, P. Lefèvre, Ph. Godding, and F. Godding-Ganshof, eds. (Université de Louvain: Leuven and Brussels, 1993), 26-27.
\textsuperscript{72} Bonenfant, \textit{D’Histoire des Hôpitaux}, 24.
\textsuperscript{73} Ibid.
\textsuperscript{74} See Little, \textit{Religious Poverty and the Profit Economy}.
\textsuperscript{75} Bonenfant, \textit{D’Histoire des Hôpitaux}, 24.
\textsuperscript{76} For more on the chapel and its history, see Bruyn. “Origine de l’Église et de l’hôpital de Saint-Jean, au Marais, a Bruxelles,” 31.
and up to this point, the dukes of Brabant and Henry I had been mostly responsible for the profound changes that had come to the hospital. Later, however, this would change.

Although Henry I continued to support the hospital, and although the dukes of Brabant certainly engaged in charity throughout the thirteenth century, the position of the dukes as the principal contributors to the hospital diminished, especially after the hospital received its statutes. It was precisely at this time that the bishops assumed a unique role at Saint John’s hospital. According to the statutes, the bishop reserved the final say in religious and administrative decisions regarding the hospital, especially the nomination of the procureur. The bishop also had the right to intervene wherever necessary, both religiously and administratively.

Between 1204 and 1225 there is no record of Henry’s involvement in the hospital. In the meantime, only about 26 kilometers away in Louvain, Henry I and his family participated similarly in charitable gifts to the municipal hospital of Louvain. Walter John Marx explains that like the hospital of Saint John in Brussels, the hospital in Louvain received “many important donations from the nobles and burghers of the town,” and that “the protection of the duke was particularly important in consolidating the

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77 Bonenfant, D’Histoire des Hôpitaux, 24.
78 It is also important to note that the charter mentions Duke Henry I: “Henrici ducis Lotharingie munificentia et devotione.” See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 10, p. 20. The original has been lost and there are no witness listed. In regards to Jean III, see Cartulaire de l’Hôpital Saint-Jean de Bruxelles, p. 20, fn 1. See also Moreau, Histoire de L’Église en Belgique, t. III, 159-163, 678.
79 This appears in point thirty-one of the statutes: “Satuimus quod, com procurator predicte domus obierit vel alias decesserit, alius procurator, de consilio Cameracensis episcopi vel ejus officialis substituatur.” Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 10, p. 24. The nomination of the procureur secured the bishop’s role in temporal affairs. It was the procureur who nominated four men to see to the temporal administration of the hospital. Thus, with the bishop’s control over the position, temporal control was also tangentially assumed. See Bonenfant, D’Histoire des Hôpitaux, 28.
80 Bonenfant, D’Histoire des Hôpitaux, 28. Also, see above.
situation of the hospital.” Duke Godfrey had granted the hospital at Louvain ownership of two mills in previous years, while Henry I “ceded the hospital the product of the station in the Cloth Hall rented by Amelricus de Novo Puteo, in compensation for the cens of six solidi, four denarii, four capones, which the hospital possessed on the part of the land upon which the Cloth Hall was to be constructed.” Duke Henry I was even responsible for the transfer of the Louvain hospital to its current location. The transfer was detailed in a letter from March 17, 1222, when “Henry, Archdeacon of Liège, authorized the establishment of a chapel at the hospital and referred to this transfer.”

Involvement continued when in 1235 came one of the rare Episcopal interventions in the favor of the hospital of Louvain. Bishop John of Liège in that year confirmed a grant made by Duke Henry to the hospital of the bread hall of Louvain and maintained the monopoly of the hospital in the sale of bread in the town. All the bakers of Louvain who wished to sell their bread outside of their homes had set up their stalls in the bread hall possessed by the hospital. In return, the trustees of the hospital promised that those bakers who wished to sell their bread in the hall in question would be treated benevolently.

While Henry I and his family were participating in related charitable acts in other locations, the family’s noninvolvement at Saint John’s could be interpreted in several ways, the most important and relevant of which was the growing support of an attached chapel and its related offices (officinae). The chapel and its related offices were

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81 Marx, *The Development of Charity in Medieval Louvain*, 27.
82 Ibid.
83 Ibid., 27.
84 Ibid., 28.
85 Ibid., 30. Finally, we also know that in “1246 Duke Henry II (1235-1248), ob remedium anime sue et predecessorum suorum, ceded the brothers and sisters of the hospital an annual revenue of fifteen solidi of Louvain, fifteen capons, secured on certain of his lands, for the endowment of two beds in the hospital.” Marx, *The Development of Charity in Medieval Louvain*, 31.
86 For more on the chapel and its history, see Bruyn, “Origine de l’Église et de l’hôpital de Saint-Jean, au Marais, a Bruxelles,” 31.
 overseen by the clergy, all of which rendered Henry I and his family’s personal involvement or oversight unnecessary.\(^{87}\) Henry I appeared again at Saint John’s on 4 February 1225 when he granted to the hospital the annual collection of five bushels of wheat, which was imposed upon Ruyssche molen in Brussels.\(^{88}\) The collection created funds that allowed the hospital to operate and flourish. Finally, Henry I’s last issuance came on 1 February 1229 from Tervueren, a small town in Brabant between Brussels and Louvain. At that time, Henry I placed the monastery of Ninove in possession of 10 and one half bonniers of land located in Anderlecht.\(^{89}\) The monastery of Ninove had complex ties to the hospital of Saint John, and the endowment meant a later expansion of holdings for the hospital.\(^{90}\)

After February 1229, Henry I disappeared from the hospital’s records. While Henry I’s donations to Saint John’s hospital ended, charity to the hospital certainly did not cease; in fact, charitable donations were about to increase significantly. In 1220, Godfrey Fontaines,\(^{91}\) bishop of Cambrai (1220-1237/38), reconfirmed the statutes of

\(^{88}\) *Cartulaire de l’Hôpital Saint-Jean de Bruxelles*, 42. In addition, the See *Administration Générale des Hospices et Secours* specifies the same act. However, the administration places it in 1224. See *Administration Générale des Hospices et Secours de la ville de Bruxelles: Hôpital Saint-Jean*, 2.
\(^{89}\) CPAS, SJ 34 fol. 27.
\(^{90}\) This donation accounts for four out of the five documents in which Henry I appeared. The fifth document did not link Henry I directly to the hospital. Rather, on 6 July 1224 Duke Henry I gave consent to Henry Pau, which allowed Henry Pau to grant to the hospital of Saint John a bonnier of a meadow located between Neder-Over-Heembeek and Werfunder. The charter specified that the donation was made to the hospital in charity and for the remission of sin: “Henricus, Dei gratia dux Lotharingie, omnibus hoc scriptum videntibus, salutem in Domino. Noverint universi quod Henricus, cognamine Pau, a nobis tenuit in feodum unum bonarium prati situm inter Heenbecca et Werfonder, et illud bonarium prati ob remissionem peccatorum suorum contulit in rectum elemosinam domui hospitalis beati Johannis in Bruxella de nostro consenso et voluntate…” *Cartulaire de l’Hôpital Saint-Jean de Bruxelles*, SJ 21, 39. The original is lost.
\(^{91}\) See Moreau, *Histoire de L’ Église en Belgique*, t. III, 164.
Saint John’s hospital that had been granted under his predecessor, Bishop Jean III.  

Godfrey was the only bishop aside from Jean III under whom the original statutes were reconfirmed, and Godfrey did so in honor of his predecessor.

Godfrey’s humble appreciation of his predecessor would transform into a concern for the hospital of Saint John, and the concern would best manifest itself in 1225. On 27 January 1225 Bishop Godfrey “delegated his powers to Gautier, dean of Hal and canon of Cambrai, for the erection of the chapellenie (or a chaplaincy) that Guillaume of Ledebergh, knight, wanted to establish at the hospital of Saint Jean.” With the establishment of the attached chapel, the number of communities intersecting with, influencing, and being influenced by Saint John’s hospital grew. From this point forward, the dukes of Brabant ceased to be the most important participants in the hospital’s development, at least based on the extant sources. The success of the hospital was left in the hands of one finicky, mid-level noble.

Guillaume of Ledebergh, the Abbey of Ninove, and the Hospital of Saint John: An Unlikely Trio

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92 The original is lost, but the copied version in the cartulary reads, “Quoniam injuncti nobis officii est a predecessoribus nostris salubriter inchoata ad consummationis bonum perdurere, que felicis memorie predecessoris nostri domini Johannis, quondam Cameracensis episcopi, auctoritate, de prudentium virorum consilio, in opido Bruxellensi ad sublevamen pauperum et animarum salutem sunt iniciata et per Dei gratiam in robur virtutum feliciter promota, qua possimus discretionem, duximus ad ulteriorem perfectionem confirmando promovere.” Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 20, p. 38. For explanation on the date see Bonenfant, notes to the act, Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 20, p. 37.

93 Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 20, p. 38.

94 This office is akin to the modern chaplain who serves in the army or hospitals.

95 The original is lost. In the cartulary, it reads as follows: “G., Dei gratia Cameracensis episcopus, viro venerabili et dilecto in Christo G., decano de Hal, canonico Cameracensi, salutem et sinceram dilectionem. Intelleximus quod vir nobilis Willelmus de Ledeberga, miles, in domo hospitalis sancti Johannis in Bruxella pro sua et antecessorum suorum salute perpetuam vult instituere capellaniam de bonis suis, quam petit auctoritate nostra dicte domui confirmandi.” See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 23, 41-2.
Although the traditional groups of the nobility and upper clergy had supported the hospital, the creation of the chapel saw the involvement of a mid-level noble too low in the feudal hierarchy to have made much of a difference in the years preceding urbanization. One could argue, though, that without the help of Guillaume of Ledebergh, the chapel would have never have been established. The history behind Guillaume’s role, however, is complicated. Guillaume was a lord of Pamele, a community that was involved in matters of charity. The community was bordered on the west by River Dendre, on the north by Heylbeke, and on the south by Cranebeke and Honsbeke.\(^96\) Located in Pamele were the parish of Ledebergh and the abbey of Ninove (the Order of Saint Norbert), which had throughout its history several generous benefactors.\(^97\) For example, in the twelfth century, Simon of Ledebergh, with the consent of his children Gotin and Gertrude, gave to the monastery land (1167) and wood (1180).\(^98\) The gifts were confirmed by Gérard of Grimberghe, who had married the heiress of Ninove, and Roger, the Bishop of Cambrai, who had originally granted to the hospital of Saint John its statutes.\(^99\) Complex connections between the region of Ledebergh and the hospital of Saint John in Brussels were already emerging.

The church at Pamele and its annex at Ledebergh were given also by the same Bishop Roger (1179) to the religious members of the abbey.\(^100\) Walter of Ledebergh,

\(^97\) Ibid.
\(^98\) Ibid., t. I, 283-4.
\(^99\) Ibid., t. I, 284.
\(^100\) The text reads: “l’église de Pamele et son annexe Ledebergh furent données aux religieux par l’évêque Roger (1179).” The text is preceded with the phrase “quelques années après,” which does not make sense if Roger had granted privileges in 1180, only one year later. See Wauters, *Histoire des Environs de Bruxelles*, t. I, 284.
Guillaume’s father, however, repudiated the transfer, perhaps because it would have diminished Walter’s revenues. The dispute over the church at Pamele was only the beginning of a long family tradition both of involvement in charitable works and disputes over them. Eventually, the quarrel drew the attention of the count of Flanders, Philippe of Alsace (r. 1168-1191), who declined to proceed to judgment. Nonetheless, Philippe later permitted the abbey rights of fishing, rights of pasture, and all the rights that were common to men. Walter’s wife, Lutgarde, and his sons, Guillaume and Walter, all approved the transfer.

In 1188 Walter of Ledebergh died. On the same day of his interment at the church of Ninove, Walter’s son, Guillaume, gave three bonniers of land to the abbey at Ninove. In 1195 Walter granted to the abbey of Ninove property (maisons) near the cemetery in the village of Pamele. The extension of property also meant an extension of lands and the rights for the abbey, most of which stretched further to the south along the Dendre River. Soon after, Guillaume would deprive the abbey of Ninove of its rights to fish in the Dendre only to restore them again in 1201. A short time later, Guillaume and the abbey of Ninove entered into an oath. This time, the two parties strengthened rather than weakened their bond; the lord swore an oath to the abbey and in return the

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102 Ibid.
103 Ibid.
104 Ibid.
105 Ibid.
106 Ibid.
107 Wauters claims that Guillaume was without a doubt not happy with the expansion of the abbey, which he contributes to “èteignirent” and “dispersèrent.” Wauters, in the discussion of the depriving of the rights by Guillaume, even uses the phrase “dépeuilla violemment,” or deprived violently. See Wauters, *Histoire des Environs de Bruxelles*, t. I, 284.
abbey held its lands in *fief* to Guillaume.\(^{108}\) This alliance was the beginning of a long tradition of charity that Guillaume gave, not only to the abbey, but also to other institutions.

Toward the end his life especially, Guillaume seemed to have been making up for previous actions, such as the revoking of rights to the abbey, by granting more charitable bequests. In his actions, he would become a man of his time, engaged in spiritual relief for those around him. As the rise of the profit economy and the rise of urbanization left more and more people destitute, poor and sick relief would be left to those who could provide charity. While the burden had fallen to the nobility first, the freeing up of cash allowed new participants a chance to give to the poor and the sick. Guillaume, a mid-level noble, was certainly included in this group. His ability to participate more liberally in charitable relief would have profound consequences on the hospital of Saint John.

The beginnings of Guillaume’s support for Saint John’s can be traced to Ledebergh itself. In addition to the establishment of a chapel in Ledebergh, Guillaume created an institution that could continuously support thirteen poor.\(^{109}\) The development of the institution came via a triad of three major supporters: Guillaume, the hospital of Saint John, and the abbey of Ninove. In the discussion of the extant charter regarding this transfer, Bonenfant explains that the hospital of Saint John conferred to Guillaume, lord of Ledebergh, an institution (*maison*) situated on the heritable estates (*allodium*) of the hospital where there would be supported thirteen poor aided by the resources given by

\(^{109}\) Ibid.
Guillaume gave up seventeen bonniers of land and dues on three muids of rye in exchange. The declaration was made in 1231 by Rodolphe, abbot of Ninove (Radulphus, Dei gratia dictus abbas Ninivensis) and sealed by Guillaume and the aldermen of Brussels (scabinorum Bruxellensium). While the initial bequests between Guillaume and the abbey of Ninove had stipulated that the monastery would harbor every night thirteen indigents, which indeed continued for some time, the abbey, however, upheld this condition less and less until by 1260 it was no longer observed. Nevertheless, the relationship remained. Even after Guillaume’s death, his relatives supported to the abbey of Ninove. As late as 1299, an annual rent of 20 sous was assigned to the monastery by the family.

While the gifts and actions by Guillaume and his family to the monastery of Ninove seem tangential to understanding the hospital of Saint John, the endowments to both institutions are related. Guillaume’s relationship and his bequests to the abbey created an alliance and precedence for charitable giving, both of which would be fulfilled at the hospital of Saint John. This was certainly clear in 1231 with Guillaume’s support for the thirteen poor in Brussels. Yet, even before in August of 1226, Guillaume became indirectly involved in the transference of a chaplaincy (chapellenie) that had been

\footnotesize{\begin{itemize}
  \item[110] The original is lost. “...Willelmo de Ledebergha domum unam sitam supra allodium ipsius hospitalis, in qua simper erunt XIII pauperes, quibus dictum hospitale sancti Johannis providebit in necessariis in quantum poterit...” See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 39, pps. 63-64.
  \item[112] The original is lost. See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 39, p. 63 and Wauters, Histoire des Environs de Bruxelles, 285.
  \item[113] Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 39, p. 64. CPAS, SJ 34, fol. 18.
  \item[115] Ibid.
  \item[116] The act was assigned by Jean, who was cited both as a vassal of Guillaume II of Ledebergh (1267) and a relative. See Wauters, Histoire des Environs de Bruxelles, t. I, 285-6.
\end{itemize}}
originally founded by him in Ledebergh in the parish of Pamele ("Pamellam in capella de Ledeberghe") to Brussels.\textsuperscript{117} Both the abbot, Raoul (Radulphus)—abbot from 1207 to 1244 and thus well aware of Guillaume’s past involvement—and the chapter of the abbey of Ninove (Ninivensis) agreed to the translation.\textsuperscript{118} The charter, at least in its written form in 1226, bore no witnesses.

By 21 December 1226 in Brussels, the formalities regarding the establishment of the chapel were well underway. Gautier de Braine, a canon of Notre-Dame of Cambrai and the former dean of Hal, was prompted by the bishop of Cambrai to transfer to the hospital of Saint John the chaplaincy of Ledebergh.\textsuperscript{119} The charter was witnessed by magister Gilbertus, the chaplain of Saint-Jacques-sur-Coudenberg, magister Baldewinus, a ducal clerc, dominus Stephanus, dominus Amelricus, dominus Gerardus de Zavontem, dominus Reynerus de Liniaco et magister Willelmus de Erines, presbyter. Finally, on October of 1236, all the preceding formal documentation regarding the chaplaincy of Ledebergh and its transfer to the hospital of Saint John’s in Brussels was made official by Godfrey the Bishop of Cambrai (Godfrey of Fontaines, bishop from 1220-1237/38),\textsuperscript{120} who approved the transfer of the chaplaincy.\textsuperscript{121}

The foundation of the chapel proved to be a turning point for the hospital of Saint John. The chapel gave Saint John’s hospital a means through which it could reinvent itself and flourish, and thanks to the chapel, more support and funds would come into the

\textsuperscript{117} The original is lost. See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 28, p. 48.
\textsuperscript{118} See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 28, p. 48.
\textsuperscript{119} This original is also lost. See Cartulaire de l’Hôpital Saint-Jean de Bruxelles, SJ 29, p. 49-51. See also Analectes Pour Servir à l’histoire ecclésiastique de la Belgique, t. 2 (Brussels, 1865), 32-5.
\textsuperscript{120} Wauters, Histoire des Environs de Bruxelles, t. III, 164.
\textsuperscript{121} The charter ends, "In cujus rei testimonium presentes litteras sigilli nostri munimine fecimus roborari." This original is also lost. See Cartulaire de l’Hôpital Saint-Jean, SJ 49, p. 76.
hospital. For example, with a chapel the hospital could offer indulgences, which not only saw to the care of souls but also to the upkeep of the hospital. The impact of the foundation was profound: as the hospital’s identity became more clearly aligned with the church, it became more appealing charitably, which meant more funds, more concern by church officials, and of course, the need for more space. It was clear that Saint John’s needed to expand its facilities.

On 25 August 1254 papal legate Pierre Capocci confirmed the construction of a new hospital building for Saint John’s. In order to complete the construction he issued indulgences, a process that was exhibited through a series of charters. The first of the documents gave the brothers and the sisters of the hospital of Saint John, who had the rights to collection via the chapel of Saint John, the ability to hold for the sick past letters collected. Two days later, Pierre issued another document. This document, however, accorded thirty days to those who made donations to the mistress, the brothers, or the sisters for the reconstruction of the hospital. The Latin describes the hospital as having been newly planted (“quod est novella plantatio”), and the bull offers indulgences to those who would help “inceperint edificare de novo opere sumptuoso.” On that same day Pierre also confirmed the foundation made for the hospital by Guillaume, which seems to suggest that even if the hospital brothers and sisters did not recognize it, the

122 The letters to which Pierre was probably referring were letters of indulgences held by the chapel on behalf of the ill. The original document does not give better clarification. The word used is simply “litteras.” See Cartulaire de l’Hôpital Saint-Jean, SJ 90, p. 128-129. CPAS, SJ 4, fol. 17. And Cartulaire de l’Hôpital Saint-Jean, introduction to the act, SJ 90, p. 128. CPAS, SJ 4, fol. 17.
124 Cartulaire de l’Hôpital Saint-Jean, SJ 91, p. 130. CPAS, SJ 4, fol. 18.
125 Ibid.
papacy certainly regarded Guillaume’s role in the institution’s development as noteworthy.

Although occurring twenty years later, the construction of a new hospital building would never have been possible if it had not been for Guillaume and the transference of the chaplaincy. Guillaume was not what could be considered a member of the traditional upper aristocracy, and he was not necessarily an important personality in the city of Brussels. Yet, urbanization had created a new idea of community, one to whom he could provide services as allowed by his status in society. Guillaume behaved as a finicky noble early in his life—he used his power to grant and revoke rights. As the urban situation worsened and as he neared the end of his life, however, the spiritual benefits of providing for the hospital of Saint John outweighed the earthly ones. Since the world of the high Middle Ages was a battle ground between good and evil, one had to gain the favor of the good through donations and prayers, which Guillaume certainly did. Yet, all things considered, it was the hospital that truly profited, both during Guillaume’s lifetime and after.

Long after Guillaume’s initial involvement with the abbey at Ninove and the hospital of Saint John, his actions still resonated. On 27 August 1254 Cardinal Legate Pierre Capocci reconfirmed the earlier foundation made for the hospital of Saint John by the knight Guillaume of Ledebergh. The charter was sanctioned in the memory of

126 See Vauchez, *The laity in the Middle Ages*, especially chapter VII.
127 It is not clear when Guillaume died. He disappears from the extant documentation around the middle of the thirteenth century, which may indicate his passing.
128 The original is lost. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 92, p. 131.
Bishop Godfrey (bone memoire Godefroid)\textsuperscript{129} and of the original 27 January 1225 charter issued by Godfrey.\textsuperscript{130} In addition, Pierre’s reconfirmation was at the behest of the brothers, sisters, and the mistress of the hospital.\textsuperscript{131} If the act truly came at the request of the brothers and sisters, it may suggest that the members of the hospital staff had recognized the remarkable gift that had been given to them by Guillaume.\textsuperscript{132}

Guillaume’s involvement did not stop there—he also had several sons and family members who participated in charitable acts along with him and after his death. In their gifts, Guillaume and his family may have been acting with “solidarity.”\textsuperscript{133} While they were not the only people to participate by providing charitable gifts to the abbey of Ninove and the hospital of Saint John, they did establish familial continuity in their endowments and privileges. The connection is seen long after Guillaume ceased to contribute to the hospital, especially with Guillaume’s son, Gilles (Égide), who was a knight and lord (1244) of Ledebergh.\textsuperscript{134}

Gilles appeared in earlier charters involving the hospital of Saint John. On July 1220, Gilles witnessed Gautier, lord of Aa, place the hospital of Saint John in possession of one-third of a dîme of Tournepepe, which was repurchased from Gui of Brages and his brother Nicolas.\textsuperscript{135} In addition to Gilles, the following people were identified in the charter as witnesses: Macharius de Goica, Anselmus de Elenghem, Egghericus de

\textsuperscript{129} Cartulaire de l’Hôpital Saint-Jean, SJ 92, p. 131.

\textsuperscript{130} This original is also lost. See Cartulaire de l’Hôpital Saint-Jean, SJ 23, p. 41-42.

\textsuperscript{131} Also, Pierre placed the chanter of Brussels in the custody of upholding the brother’s and sister’s rights. Cartulaire de l’Hôpital Saint-Jean, SJ 93, p. 132-133. CPAS, SJ 4, fol. 19.

\textsuperscript{132} The charter also suggests that the sisters and brothers were indebted to Bishop Godfrey, the protector of the hospital, who had recognized the need for the establishment of the chapel in the first place.

\textsuperscript{133} White, Custom, Kinship, and Gifts to Saints, 8.

\textsuperscript{134} Wauters, Histoire des Environs de Bruxelles, t. I, 285.

\textsuperscript{135} “…terciam partem decime de Tornepia…” Cartulaire de l’Hôpital Saint-Jean, SJ 17, p. 33-34. CPAS, SJ 4.
Gazebeca, Arnoldus de Anderlecht, Egidius de Ledebergha, Arnoldus de Bodeghem, Genekinus Wouth, Thomas de Henzenghem, Petrus, filius Anselmi de Leniacho, Wedericus et frater ejus Stephanus de Zierenbecca. \(^\text{136}\) Gilles’ role in the documented deed proved significant, in that there was not only an established familial connection, but also a social connection that linked his family and others. It was, in a sense, a social network devoted to charity. This notion is supported by the fact that Gautier of Aa would later present the same lands identified above to the abbey of Ninove. The property would in turn be given to the hospital of Saint John. Some sort of network, social connection, or even familial tie was present.

In addition to Gilles’ role in the hospital records, other evidence of Guillaume’s family appeared. On 9 May 1227 Guillaume and his family made provisional donations *ad custos* and to the chaplaincy of Ledebergh. \(^\text{137}\) Included in the agreement, which occurred under the prebend of the hospital of Saint John, was the guarantee of one *muid* of wheat and one *muid* of oats, which were rendered “*ad censum […] in die Nativitatis beati Johannis Baptistae*.” \(^\text{138}\) Again, the dean of Hal participated in the act, and Guillaume’s oldest son, Gilles (Égide), was the prime contributor. In addition to Gilles, several other family members also appeared: “*dominus Willelmus de Ledeberga, de consensu Egidii, filii sui primogeniti, et ex consensus Bernardi, Jacobi et Rasonis, filiorum suorum, et Beatricis, uxor is sue.*” \(^\text{139}\)
The family tradition continued not only after the death of Guillaume, but also after the death of Gilles (d. 1247). Gilles’ son, Guillaume II of Ledebergh, also became involved with the hospital of Saint John. Sometime between 1 and 27 March 1277 Saint John’s hospital recognized that Guillaume II had the right of alienation of all or part of the holdings held by him at Pamele and at Ledebergh. The hospital of Saint John also gave Guillaume II one hundred sous under the same declaration.

Bernard, knight of Ledebergh, another son of Guillaume I, was also involved with the hospital of Saint John. In 1244 Bernard sold the hospital of Saint John six bonniers of land situated in Pamele, land that the hospital had received in guarantee from Bernard’s father, Guillaume. On 10 January 1245, however, Bernard relinquished, in return for a payment in the sum of twenty-five livres, a payment of life annuity owed by the hospital in agreement with the previous accord. The document also mentioned Bernard’s wife, Marguerite, and Bernard’s brothers, Guillaume II and Gilles. Finally, in 1306, Réne de Bornival (Reineri Eggloi) and his wife Marguerite provided a gift of

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140 “Noverint universi ad quos presentes littere pervenerint quod Willelmus, dominus de Ledeberghe, contulit magistre et conventui hospitalis beati Johannis Bruxellensis plenariam et liberam potestatem mutandi, vendendi seu alienandi per partes sive in toto omnem hereditatem quam tenebant ab eo apud Pameellam et apud Ledebergh, ad quascumpue personas ecclesiaticas sive mundanas transferatur, pretex tu centum solidorum Bruxellensium, quos idem Willelmus recognovit se recepisse et habere in pecunia bona et bene numerate.” Cartulaire de l’Hôpital Saint-Jean, SJ 173, p. 220. There is also a duplicate copy of the document, but both are lost. See Cartulaire de l’Hôpital Saint-Jean, SJ 174, p. 221-222.
141 Cartulaire de l’Hôpital Saint-Jean, SJ 173, p. 220.
143 Cartulaire de l’Hôpital Saint-Jean, SJ 61, p. 88. This issuance is lost and is attached to SJ 62.
144 This issuance is also lost. See Cartulaire de l’Hôpital Saint-Jean, SJ 62, pp. 88-89.
145 See Cartulaire de l’Hôpital Saint-Jean, SJ 62, p. 89. Also, a Marie de Ledebergh served as one of the mistresses of the hospital of Saint John and may have been related to Guillaume. She appeared on 15 February 1298 in the documents. See Cartulaire de l’Hôpital Saint-Jean, SJ 249, p. 303.
charity, which they bestowed along with Marguerite’s uncle, Bernard.\footnote{Wauters, *Histoire des Environs de Bruxelles*, t. I, 286; and *Cartulaire de l’Hôpital Saint-Jean*, SJ 249, p. 303. The original issuance is lost.} The family relinquished to the hospital of Saint John in Brussels claims in regards to thirteen *bonniers* of land held by the hospital.\footnote{Wauters, *Histoire des Environs de Bruxelles*, t. I, 286. Guillaume’s wife, Béatrix, also appeared in the donations. See Wauters, *Histoire des Environs de Bruxelles*, t. I, 285. Finally, there is also mention of a Marie of Ledebergh on 15 February 1298. It is not clear, however, if she is of any relation to Guillaume and his family. Bonenfant does not provide any information regarding the possible relation, and she is not mentioned in Wauters. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 249, p. 303.}

The bonds that were formed between the hospital and Guillaume continued to flourish via a final family member. On 21 December 1237 from Viterbo, Pope Gregory IX placed both the brothers and the sisters of the hospital of Saint John, the hospital, and its holdings under his protection.\footnote{*Cartulaire de l’Hôpital Saint-Jean*, SJ 50, p. 76. CPAS, SJ 4, fol. 7.} A second document from the same location the next day (22 December) gave the bishop of Cambrai the permission to grant, as he saw fit, to the brothers and sisters of the hospital of Saint Jean a priest and a cemetery.\footnote{Ibid.} The issuance proved significant for the later success of the hospital. Having a priest would extend the ability that the hospital had in several arenas, including granting of indulgences. In addition, the charter and the grant for a cemetery would later have a profound impact on Guillaume and his family.

In 1240 the cemetery was again mentioned, this time in a charter issued by Bishop Gui I (Gui or Guiard de Laon, 1237-1247). Gui I reconfirmed Pope Gregory IX’s allowances to the hospital of Saint John regarding the cemetery. Gui I, similar to other bishops in the past, conceded the responsibility to the dean of chapter of Sainte-
The charter detailed that the brothers and sisters were to receive the cemetery, and it was to be done on the occasion of the funeral of Jacques, a son of Guillaume of Ledebergh. The charter was dedicated on the twenty second day of December, one day after the feast day of Saint Thomas, the Apostle, and it specifies: “Datum in crastino beati Thome apostoli, anno Domini MCCXL.”

The 1195 by Guillaume to the monastic community of Ninove granted the monks property (maisons) near the cemetery in the village of Pamele, which allowed them to disperse and expand significantly. When Walter of Ledebergh died in 1188, on the same day of his interment at the church of Ninove Walter’s son, Guillaume, gave three bonniers of land to the abbey of Ninove. Similar parallels can be drawn from these two acts to the hospital of Saint John, which with the lands would expand. In the charters, Guillaume may have been reenacting the earlier grants made by his father, thus making the role of the family in the transfer significant. The establishment of a cemetery, however, suggests even greater development. While it may be grim to think of a cemetery as proof of hospital expansion, it certainly demonstrates that more people came to the hospital for care. Even when the sick were not cured, the hospital was successfully overseeing its mission. Burial in the hospital grounds, which were now full and

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150 This original is lost. See Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 81.
151 Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 81.
152 Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 82.
154 Ibid.
expanding, only give proof to this notion. The hospital had grown into a significant success.

The institution, however, owed its development to the changes in the urban atmosphere, the creation of new communities and family groups, and to the mid-level family of Guillaume. The evolution of the city created an active arena in which middling noble families could participate in matters of charity. Families were certainly active in charitable donations previous to the high Middle Ages. As hospitals grew more important and more religiously associated, families found a new institution to which they could contribute. By providing over the course of the thirteenth century, Guillaume’s family exhibited solidarity in their gifts to the hospital and other charitable institutions. For this reason, the establishment of the hospital chapel cannot be viewed purely as a success of Henry I. Guillaume and his family not only contributed to the chapel, but they also provided for the hospital both before and after the chapel’s establishment.

From Guillaume of Ledebergh to Arnoul of Meysse and other Mid-Level Nobles

With the influence of the bishops via the hospital statutes, Guillaume and his family, as well as other lay citizens, Henry I’s role in the hospital did wane, but only temporarily before he once again reestablished his position. As we know, in Brussels on 4 February 1225 Henry I granted to Saint John’s hospital the annual collection of five bushels of wheat to be collected from Ruyssche molen in Brussels. The charter was

155 Later, in 1288, the hospital would acquire yet another cemetery on the grounds of the Place du Petit Sablon or Petite-Sablon, which was granted by the bishop of Cambrai. The cemetery would be in use from 1300 to 1704. Part of the land was ceded for the creation of the Sablon Church. See Administration Générale des Hospices et Secours de la ville de Bruxelles: Hôpital Saint-Jean, 2.
156 “Sciant universi quod nos, ob remissionem omnium peccatorum nostrorum, contulimus domui hospitalis beati Johannis in Bruxella singulis annis quinque modios annone, percipiendos de mulctura molendini
witnessed by a Gregorius, the ammannus, or the duke’s representative in the city of Brussels; the aldermen (scabini) of Brussels; and Johannes and Balduinus, both of whom were notaries. The last known issuance of Henry I came on 1 February 1229 from Tervueren, when Henry I placed the abbey of Ninove in possession of 10 bonniers and half the land located in Anderlecht. It was the same monastery with which Guillaume had been so intimately involved. This time the lands had been given to the monastery not by Guillaume, but by a new mid-level knight, Arnoul of Meysse. The two knights, however, were more related than one would think.

Before examining Arnoul’s role in the 1229 charter, it is first necessary to look at his previous involvement; this was not Arnoul’s first appearance. On 3 September 1220 in a charter issued from Anderlecht, Arnoul had given the monastery of Ninove nine bonniers of land he held en alleu at Neerpede in the parish of Anderlecht. Thanks to Arnoul’s donation, the hospital of Saint John later became the recipients of the lands transferred in 1220 and more when on 3 September 1281 the abbey had 12 bonniers of...
land located at Neerpede transferred to the hospital. In addition, on July 1230, the lord of Aa, Gautier presented to the abbey of Ninove a *dime-bonnier* of marsh (swamp) situated at Pede. Later, the abbey also purchased lands from Henri of Pede. Both gifts eventually culminated late in the thirteenth century when on 19 April 1282 the abbot and the convent of Ninove gave to the hospital of Saint John their holdings at Pede. Although Arnoul was not as involved nor as directly as involved with the hospital of Saint John as Guillaume was, he was acting in a manner that was allowed by his status in society, which mostly likely came from the changes in the profit economy and the collapse of the tripartite system.

Beyond Guillaume of Ledebergh and Arnoul of Meysse, other mid-level nobles also appeared in the documents, many of whom were prime contributors to the hospital of Saint John. The appearance of the middling nobles again suggests the active role of mid-level noble families in the new urban institution. Most knights, however, only donated to the hospital once or twice, thus the same consistency in donation as did Guillaume. Others, however, had an ongoing charitable relationship to the hospital. Gautier II (d. ...
1236), lord of Aa, was one of the most prolific donors and champions of the hospital of Saint John. He was the son of Léon of Brussels or of Aa, who was mentioned in July 1215 along with his wife Clémence (who later remarried to the count of Beaumont, Baudouin), and his children Gautier, Arnoul, Mathilde and Clémence. Gautier II, who may have been a namesake of Gautier of Aa, or of Brussels, or of Pollaer, appeared early in the hospital’s history and gave to the hospital throughout the thirteenth century.

Gautier II first surfaced on 29 April 1216 in a charter of Lionnet I, the chatêlain of Brussels. On that day, Lionnet I had given the hospital of Saint John 10 muids of rye to be rented out on Lionnet I’s dime at Leeuw-Saint-Pierre. Gautier II served as one of the many witnesses to the charitable donation. His service to Lionnet I, another ardent supporter of the hospital of Saint John, proved beneficial for the hospital, as Gautier II would grant various rents, lands, and items to the hospital as Lionnet I had also done.

Four years later in July 1220 Gautier placed the hospital of Saint John in possession of one-third of a dime of Tourneppe that was bought back from Gui of Brages and his brother Nicolas. Gui and Nicolas held the dime in security from Alix of Vlesenbeek. Later, Gautier II, who held suzerainty over the land, would cede all his

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166 Wauters, *Histoire des Environs de Bruxelles*, p. 5, t. 1. In addition to the donations in which Arnoul was mentioned, another possible member of Arnoul’s family, Gautier de Bever, was mentioned in the document. Bonenfant identifies Walteri de Beverne as a familiaris d’Arnoul de Meyse. See Cartulaire de l’Hôpital Saint-Jean, 354, and Cartulaire de l’Hôpital Saint-Jean, SJ 18, p. 35. Also, in that same document Arnoul’s serf, Godescale, was mentioned.

rights over the land to the hospital. 168 This rather complicated agreement guaranteed that the hospital would eventually receive the lands and the rights allotted to them. 169

Another six years passed before Gautier II appeared in the documents again. In July 1226, Englebert II, the lord of Enghien, Lionnet I, and Arnoul II, the lord of Wesemael, all guaranteed a sale carried out by Gautier II to the hospital of Saint John. Although the document does not show that he himself made the sale, the nature of the charter suggests that Gautier II was backed by some of the most powerful representatives of the nearby communities. The sale included lands located between Martis fontem and curiam Bauchonis near Pede. 170

Shortly later, Gautier II made another sale of the hospital of Saint John. In July 1227 he sold the hospital sixteen and one-half bonniers of lands located between Marstboore and Neerpede. Included in the agreement was the provision that if his brother Arnoul, with whom the land was held in joint inheritance, would not agree to the
alienation of the land in his majority, Gautier II would assigned in compensation to the hospital eight *bonniers* of land of his own heritable estate, which was located between Veeweide and Aa.\(^{171}\) Gautier II not only provided the sale to the hospital, he also assured that even in the case of a dispute that the hospital would still profit. In 1230, Arnoul, having reached his majority, approved the sale of the sixteen and one-half *bonniers* of land to the hospital, rendering any further dispute over the gift moot.\(^{172}\) Gautier II must have had some influence on his brother, and they surely worked together in solidarity.

While Gautier II was tied to the *chatêlain* of Brussels, Lionnet I, and to some of the most powerful representatives of neighboring communities, he also had ties to more distant communities, such as Ninove. In fact, Gautier II was partially linked to Guillaume of Ledebergh and his transfer to the hospital from Ninove. In July 1230, Gautier II placed the monastery of Ninove in possession of one-half of a *bonnier* of a marsh that was located at Pede. The monastery had sold the land to Henri of Pede.\(^{173}\)

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\(^{171}\) “*Universis presens scriptum inspecturis, ego, Walterus, dominus de Aa, salutem et omne bonum. Universitati vestre fieri notum volo quod ego vendidi XVI bonaria terre et dimidium, site inter Martii fontem et Pedam, religioso domui hospitalis beati Johannis in Bruxella, omni jure, quod ego et frater meus habuimus in dicta terra, legitime renuntiando. Et quia hec terra erat hereditas mea simul et dicti fratris mei, Arnoldi scilicet, ego assignavi jandicte domui religioso octo bonaria terre allodii mei inter Veweidam et Aa in recompensationem, si frater meus factum dictae venditionis impedire vel relamare attemptaverit, cum ad annos discretionis pervenerit.” Cartulaire de l’Hôpital Saint-Jean, SJ 31, p. 54. The original is lost.

\(^{172}\) “...*Labilis est hominum memoria, unde ea que fiunt in tempore memorie indigent commendari. Inde est quod ego presentium officio tam presentibus quam futuris, quibus contigerit presentes litteras videre, satago signari quod, cum vir nobilis, frater et dominus meus, Walterus, dominus de Aa, cum adhuc essem in minori etate, sexdecim bonaria terre site inter Nederpeda et Nederbeca et dimidium bonarium apud Papelhem, in parrochia de Anderlecht, quam ad Anderlechtiensi ecclesia sub annuo censu tenebat jure hereditatis, de assensu et voluntate ejusdem ecclesie necnon et approbatione, Ludoni, magistro hospitalis beati Johannis in Bruxella, et conventui ejusdem loci legitime et secundum consuetudinem solempniter vendidisset, ego, postmodum veniens ad etatem legitimately, dicte venditioni assensum meum adhibiui et ipsam approbavi et adhuc assensum et consensus meum eidem admibui, ipsam spontane approbando...*” Cartulaire de l’Hôpital Saint-Jean, SJ 37, pps. 61-62. The original is lost.

\(^{173}\) “Noverint universi quod Henricus de Peda dimidium bonarium paludis jacentis juxta bona ecclesie Ninivensis apud Pedam, quam paludem opus ipsius ecclesie erga dictum H. legitime emisse dinoscitur, in
Later, on 19 April 1282, the abbot and the convent of Ninove gave to the hospital of Saint John their holdings at Pede, which included the sale by Gautier II to the monastery.\textsuperscript{174}

After the transfer from Ninove, Gautier II appeared again, this time jointly with his brother Arnoul. Possibly between 11 and 30 April 1232, the brothers gave Saint John’s, specifically for the sustentationem of the poor, four and one-half bonniers of wooded land of Elshout, located near Aa in the parish of Anderlecht.\textsuperscript{175} A little over a year later, the brothers again provided for the hospital. This time, in July 1233, the two granted the hospital five bonniers of heritable lands and five jornaria of lands held in census at Anderlecht.\textsuperscript{176} This was the last known donation by either Gautier II or his brother Arnoul.\textsuperscript{177} Gautier II died three years later in 1236. At the time of his death, he

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\textit{manus nostras ad opus ipsius ecclesie Ninivensis coram hominibus nostris, sicut de jure debuit, effostucavit partier et resignavit.” Cartulaire de l’Hôpital Saint-Jean, SJ 36, p. 60. CPAS, SJ 34, fol. 28.}
\textsuperscript{174} “Notum sit universitati vestre per presents quod nos, utilitate et commodo ecclesie nostre diligenter pensatis, unanimi voluntate et assensu, legitimo emptionis et venditionis titulo vendimus hospitali sancti Johannis in Bruxella bona nostra de Peda, videlicet quindecim bonaria et quadraginta quinque virgas, parum plus vel minus, partim terre arabilis et allodii partimque prati sita in territorio de Peda...” Cartulaire de l’Hôpital Saint-Jean, SJ 196, p. 249. CPAS, SJ 34, fol. 23.
\textsuperscript{176} “...Inde est quod nos universitati vestre notum fieri volumus quod nos in remissionem peccatorum nostrorum necnon et antecessorum nostrorum quinque bonaria terre allodii nostri siti in parrochiae de Anderlecht juxta B in Hillenshout domai religiose hospitalis silicet beati Johannis in Bruxella ad opus pauperum eodem loco jacentium in perpetuum possidendam...” Cartulaire de l’Hôpital Saint-Jean, SJ 42, p. 67. CPAS, SJ 4, fol. 6.
\textsuperscript{177} Gautier II, lord of Aa was also mentioned in January 1275 in the context of Lionnet d’Aa’s involvement with the hospital. Lionnet was probably the son of Gautier II. He served as an aldermen of Aa and appeared in an agreement between Guillaume, sometimes called of Prendael, and the hospital of Saint John. Guillaume ceded to the hospital of Saint John one bonnier of land located at Petit-Bigard. The land was held in census to Lionnet of Aa: “Universis presens scriptum inspecturis, scabini Leoni de Aa in Lewis, salutem. Noveritis quod Willelmus, dictus quondam de Prendael, reportavit cum debita renuntiatione in manus villici dicit Leonii, ad opus hospitalis beati Johannis in Bruxella, bonarium unum terre, parum plus vel minus, prout situm est apud Obbigardum ante portam domini Willelmii Lose, militis...” Cartulaire de l’Hôpital Saint-Jean, SJ 166, p. 211-212.
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was one of the most prolific donors of the hospital of Saint John. His gifts were still significant to the growth of the hospital in the mid- and later-thirteenth century.

While Gautier II of Aa provided significant donations and sales to the hospital of Saint John during the first third of the thirteenth century, Gautier de Bodeghem, another knight and mid-level noble, appeared mostly in the last third of the thirteenth century, during the hospital’s “autonomous period.” The nine documents that involved Gautier de Bodeghem make up one of the best-documented transactions in the hospital’s history. Over the course of four years, Gautier sold land, received payments for the land and eventually released the hospital from its debts. The sequence of events both illuminates the abilities of mid-level nobles and illustrates the newly-found autonomy of the hospital within the urban context.

Gautier hailed from Bodeghem, or Sint-Martens-Bodegem (Bodeghem-Saint-Martin). Today, Bodeghem is part of one section of the Belgium commune of Dilbeek, and it is in the province of Flemish Brabant, Belgium less than eight miles from Brussels. During the Middle Ages, Bodeghem was divided in two parts. The first part formed a seignory held in fief to the lords of Dongelberg. Dongelberg, a feudal domain, probably of the County of Leuven and located in the valley of Orbais in Jordigne (about thirty miles from Brussels) had a mayor, alderman, a feudal court, and a seigniorial census. The second section was held in fief to the lords of Gaesbeek. Thus, Bodeghem proved to be more than a simple seignory, and Gautier proved to be more than an average inhabitant.  

Gautier was probably related to a family of knights who had been in the

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area for hundreds of years. As early as 1086, Théodoric de Bodenghem (sic.) was cited in relation to the land, and in 1200, Lambert, a knight of Bodeghem, was also cited.\(^{179}\) While it cannot be certain that Gautier was related to Théodoric or Lambert or tied to the \(fiefs\) named above, we do know that an Arnoul, lord of Bodeghem, founded a chapel dedicated to the Virgn in his castle. Arnoul’s successor was Gautier de Bodeghem.\(^{180}\)

Gautier de Bodeghem first surfaced in the hospital’s documents on 25 March 1277 when he sold to Brother Gautier of the hospital of Saint John a \(dîme\) for \(nongenta libris\). Gautier de Bodeghem held the lands in \(fief\) to the dame of Dongelberg, Ide, at Bodeghem.\(^{181}\) A few days later on 5 April 1277, the hospital mistress, the brothers and sisters of the hospital, and the hospital provisors sought out Enguerrand II, bishop of Cambrai.\(^{182}\) The group requested that the bishop give the power to Jean Hont, the dean of Malines and provisor of the hospital, which would allow Jean to consent to the sale of some holdings to the hospital. Included in those holdings were the lands of Gautier de Bodeghem.\(^{183}\)

\(^{179}\) Ibid., 204.

\(^{180}\) Ibid., 204-5.

\(^{181}\) “\(\textit{Noverint universi ad quos presentes littere pervenerint quod dominus Walterus de Bodenghem, miles, vendidit fratri Waltero de hospitali beati Johannis Bruxellensi ad opus ejusdem hospitalis decimam suam de Bodenghem, quam tenebat a domina de Donghelberghe, pro nongenta libris Bruxellensium in bono et legali pagamento solvendis...}\)” The conditions for the agreement were lengthy and detailed; they have not been provided here but they can be found in \(\textit{Cartulaire de l’Hôpital Saint-Jean},SJ 172, p. 219.\) CPAS, SJ 36, fol. 15.

\(^{182}\) The members and those concerned with the hospital only petitioned the bishop because his lack of involvement. For more on this particular occurrence and why the bishop was not involved with the hospital at this time, see the chapter seven.

\(^{183}\) “…\(\textit{Paternitati vestre significamus quod nos fructus et proventus decime quam dominus Walterus de Bodengem, miles, tenebat in parrochia de Bodengem in (sic) omnibus juribus ad dictam decimam spectantibus comparavimus erga eundem, quam decimam in feodum tenebant a domina de Dongelberga, et hoc pro nongenti libris Lovaniensibus, certis sibi temporibus persolvendis, quam pecunie summam dictum hospitale solvere nequit, nisi alia bona venditioni exponantur pro liberatione pecunie antecedie...}\)” \(\textit{Cartulaire de l’Hôpital Saint-Jean},SJ 175, pp. 223-224.\) CPAS SJ 36, fol. 16.
Later, on 10 June 1277, Dame Ide allowed Gautier of Bodeghem to give in census to the hospital of Saint John the dîme that he held by her in fief at Bodeghem and at Grand-Bigard. In return, the hospital was to pay Gautier\(^\text{184}\) an annual census of three *saus de louvignoise petite mounoie de cens*, which Gautier and his heirs would hold in fief to Ide.\(^\text{185}\) On that same day Gautier placed the hospital of Saint John in possession of the dîme that Ide had sold to him.\(^\text{186}\) The act was, however, not approved by the bishop of Cambrai, Enguerrand II, until 30 September 1277,\(^\text{187}\) and the conditions, for the sale were not drawn up until 11 June 1277.\(^\text{188}\) On 23 June 1277 Gautier then announced that he had received from the hospital of Saint John 300 *libras Bruxellensium*, the first payment for the sale of the dîme to the hospital of Saint John.\(^\text{189}\) The sale resurfaced in February 1281 when Jean of Laeken recognized that he had received from the hospital of

\(^{184}\) Gautier of Bodeghem appeared again on 10 June 1277 when he placed the hospital of Saint John in the possession of the dîme that he had sold and again on 11 June 1277 when the conditions for the sale were announced. Both documents are in Flemish. See, *Cartulaire de l’Hôpital Saint-Jean*, SJ 179-180, pps. 228-235. Gautier also appeared on 23 June 1277 simply to recognize that he had received from the hospital payment for the sale and again on 7 June 1281 to provide a receipt for what he made on the census. Unlike the others, these documents were in Latin, indicating that like Ide, Gautier probably composed the other documents himself. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 181, p. 235 and *Cartulaire de l’Hôpital Saint-Jean*, SJ 192, pps. 245-246.

\(^{185}\) “A tous chaus qui ches letres verront et oront, Ide, dame de Donghelbeert, salut et counissanche de verité. Nous vous faisons a savoir ke nous venimes par devant monsignour le duc et par devant ses homes qui a chou nous furent presté et par devant nos hommes qui chi aprés sunt noumé et se demandames et requesimes a monsignour le duc qu’il nous donnast et delivrast un manbour pour le besoingne a faire qui chi aprees est escrite; et se coisimes pour manbour monsignour Henri dit Setrut, chevalier, lequel messires li dus nous donua et delivra par se sommonse et par jugement de ses hommes selonc le droit et le coustume dou pais; et quant che fu fait, nous et messier Henris devant dis, ensi que nos manbours, consentimes de no propre volenté ke nos chiers et loiaus messier Watiere de Bodeghem, chevaliers, peust donuer en droit heritage a le maison de le hospital Saint-Jehan qui siet dedens Brousele se dime de Bodeghem et de Bigardes, le quale messier Watiere devant dis tenoit de nous en phiet, sauf chou ke chil de le hospital devant dit donront a monsignour Watiere devant dit u a ses oirs trios saus de louvignoise petite mounoie de cens, chascun an, a paiser au Nouel; les ques trois saus de louvignois messires Watiere devant dis demourra tenans en phiet de nous u de nos oirs, il u ses oirs, avuec sen autre phiet qu’il tient de nous...” *Cartulaire de l’Hôpital Saint-Jean*, SJ 178, pps. 227-228. CPAS, SJ 36, fol. 17.

\(^{186}\) See *Cartulaire de l’Hôpital Saint-Jean*, SJ 179, pps. 228-231. CPAS, SJ 36, fol. 18.

\(^{187}\) See *Cartulaire de l’Hôpital Saint-Jean*, SJ 182, pps. 235-236. CPAS, SJ 36, fol. 18.

\(^{188}\) See *Cartulaire de l’Hôpital Saint-Jean*, SJ 180, pps. 231-235. CPAS, SJ 36, fol. 19.

\(^{189}\) See *Cartulaire de l’Hôpital Saint-Jean*, SJ 181, pps. 235. CPAS, SJ 36, fol. 19.
Finally, in a quitclaim deed on 7 June 1281, Gautier gave quittance and released Brother Gautier and the hospital of Saint John of all debt owed to him.\textsuperscript{191} Although only involved in one long and drawn-out transfer, Gautier’s final gift to the hospital was significant. The transfer included substantial holdings that would add to the hospital’s growing property, from which the hospital’s staff could collect funds to support the developing institution. Gautier’s choice to relinquish the institution from all debts owed to him is indicative of growing trends of spirituality of the period. The institution, combating the effects of urbanization on the poor and sick, was worthy of Gautier’s gift, which he was probably able to provide thanks to the profit economy. His decision to provide that gift likely arose out of a heightened awareness of the communal need to provide for the suffering brothers and sisters of Christ.

Together, the acts show a tradition that had begun under the dukes of Brabant but spread to the mid-level nobles, many of whom would have been spurred to donate to the poor and sick in the wake of the urban crisis and the increased lay spiritually movement. Henry I, as well as subsequent dukes of Brabant, Jean I (r. 1267-1294) and Jean II (r. 1294-1312), was deeply concerned with the hospital. On 16 December 1290 Pierre

\textsuperscript{190} “Noverint universi quod Johannes de Laken recognovit coram Everwino Campsore et Henrico Portre, scabinis Bruxellensibus, se recepisse et habere ex parte hospitalis sancti Johannis Bruxellensis ad opus domini Walteri de Bodenghem, militis, de preteritis pagamentis suis noningentas et sexaginta duas libras parve monete Bruxellensis et centum et quadraginta sex libras monete ejusdem, presentium testimonium litterarum dictorum scabitorum sigillis sigillatarum...” Cartulaire de l’Hôpital Saint-Jean, SJ 190, p. 243. CPAS, SJ 36, fol. 22.

\textsuperscript{191} “Noverint universi quod dominus Walterus de Bodenghem, miles, quiticlamavit fratrem Walterum hospitalis beati Johannis in Bruxella de omnibus debitis ex parte ipsius hospitalis et de decima de Bodenghem de omnibus conventionibus et promissionibus usque in hodiernum diem habitis inter ipsos, salvo predicto domino Walero, militi, annuatim hereditario suo censu...” Cartulaire de l’Hôpital Saint-Jean, SJ 192, p. 245. CPAS, SJ 36, fol. 23.
Mouwe of Sterrebeek granted Jean I a *dîme* located in the parish of Woluwe-Saint-Lambert and the surrounding areas. Later, Jean I gave the land back to Pierre as well as the authority to sell the lands to the hospital of Saint John.  

In addition, in January of 1300 Jean II authorized his vassal, Arnoul of Beernem of Erps, to cede to the hospital of Saint John 3 *bonniers* of his fief. The hospital would hold the lands *en censive* for the duke. The hospital, however, was referenced as, “*hospitalis nostri sancti Johannis in Bruxella.*” Thus, with this phrase it might be assumed that despite the role that middling nobles played, the view that the dukes of Brabant were the primary supporters continued to dominate, a role that has probably credited them with sustaining of the hospital even in today’s modern scholarship.

This does not mean, however, that the dukes of Brabant can be ignored for their earlier roles, especially the role of Henry I. Without Henry I’s leadership, the hospital...
may have lacked the necessary backing and funding that forced many hospitals and similar institutions to close their doors in the twelfth and thirteenth centuries. Yet, Henry I’s role did diminish as the tides of lay spirituality began to change and as new trends, such as the profit economy, arose. The new adherents to the Christian calling to care for one’s brother and neighbor sparked a prevalent lay movement in Brabant. This is evidenced in the cartulary, as nearly two-thirds of the extant hospital documentation comes from lay donors.

In addition, thanks to the lay movement, many lay figures, especially mid-level nobles sought out charitable institutions, including Guillaume of Ledebergh and his family, Arnoul of Meysse, Gautier II, lord of Aa, and Gautier de Bodeghem. Guillaume and Gautier II especially acted in solidarity with their families and demonstrated tight patrilinear family identity. Their contributions show that people were becoming more and more defined by networks such as the parish, their family lineages, their lords or retainers, and their economic status, and their donations provide a glimpse into the charitable contributions and the hospital of Saint John during the twelfth and thirteenth century.

Finally, although families had always actively participated in donations to religious institutions, the urban atmosphere created a new institution to which middling families could provide. Given this development and while Henry I did play an important role in the foundation of the hospital, without the mid-level nobles’ contributions the hospital of Saint John may have ceased to exist. The questions that remain include what would these new trends mean for the upper clergy and what would they mean for the
average person in this community, such as the baker, the blacksmith, and even the local women? It is to these subjects that we turn next.
CREATING A “GEOGRAPHY OF CHARITY”

Introduction

Throughout the twelfth and thirteenth centuries Saint John’s hospital was engaging in several urban, social, and religious transitions, many of which have been identified in previous chapters. Ideas about charity evolved considerably in the twelfth century after the birth of the hospital, whereas the subsequent advancements that occurred throughout the history of the hospital proved to be representative of the progression of charity and poor relief in general in newly-formed medieval cities. The occurrences within the hospital were also indicative of the direction of change that the papacy and the episcopacy were undergoing. While all of these changes indicate that the hospital experienced advancements similar to other institutions in the area and on the European continent, there were also developments within the hospital that suggest that Saint John’s was unusual.

In order to understand these changes, it is necessary to examine the various religious people and institutions involved by looking at some different categories related to the hospital, each of which will be examined in their respective chapters. First, I will analyze the various religious leaders and institutions associated with Saint John’s highlighting land grants, donations, and leases, all of which added to the domains of Saint John’s hospital. Then, in the next chapters, the focus will turn to the bishops of Cambrai and the papacy, both of whom were involved with the hospital. Religious personalities will be assessed within the framework of the hospital, the Gregorian Reform, and increased motives related to charity and poor relief. From the mid-thirteenth century
onward, documented involvement by the hospital itself emerged, which occurred precisely at the time when the papacy and the episcopacy were reinventing themselves. To understand the actions of the hospital and the reactions of the papacy and the bishops to it, I will discuss the two in conjunction.

While the papacy and the episcopacy were prominent in many developments, Saint John’s itself began to display significant autonomy in the mid-thirteenth century, which can be discerned from documentation from the hospital. Thus, the final section of these chapters will conclude by analyzing some of the most prominent groups of the hospital and their involvement with the hospital’s holdings, principally after 1250. Included in this group are the sisters and the lesser mistress of the hospital, the Beguines, those involved with the creation and maintenance of the hospital cemetery, and finally, those involved with the hospital chapel. The end result of the various discussions will be an understanding of what the lands were that the hospital gained, how the hospital gained them, what eventually the hospital came to hold at the end of the thirteenth century, and finally, a general understanding of the development of charity and responses to it in the area. All of this, of course, will be viewed through the history of Saint John’s.

Contribution of Outside Religious Communities: Creating a “Geography of Charity”\(^1\)

Currently, the archdiocese of Cambrai encompasses the entire Département du Nord of France. Before 1559, however, the archdiocese was only a bishopric, and its jurisdiction included areas one might expect, such as Lille and Paris, and areas one might not, such as Antwerp and Brussels. The fact that Brussels and its religious institutions,

\(^1\) Throughout this section, please refer to map two for the various areas from which donations, leases and rents came.
including Saint John’s hospital, were once part of the diocese of Cambrai has been largely forgotten since Philip II of Spain created new dioceses in the sixteenth century. This fact, however, cannot be ignored in conjunction with the early religious history of the hospital of Saint John.

The hospital’s foundation and development created a remarkable and unusual atmosphere for Saint John’s. Located in the heart of Brussels, nearly equidistant from all the major urban centers: the market, the ducal palace, and the cathedral chapter, the hospital stood at the center of the town and town life. While its location assured that people from across the social spectrum frequented the institution, it was the changes in the period and the hospital’s atypical creation that set it apart from its counterparts. The economic and religious advances of the period led to the creation and support of a largely urban religious institution. Tied to the rise of cities, the professionalization of healthcare, the rise of a profit economy, and the arrival of mass congregations of poor and sick to the urban centers of Europe, the hospital became the new “urban monastery” and the new recipient of charitable donations.

This development prevailed in all levels of society. Initially thanks to Duke Henry I (r. 1183/1190-1235), several religious institutions, including Saint John’s hospital, flourished. In addition, as society moved from a land-based economy and barter society to a cash society, lands and rents became available to lesser nobles, who

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3 See Henne et Wauters, Histoire de la Ville de Bruxelles, 48-49. Also, Henry I was noted for his “munificence and piety” toward the hospital of Saint Jean. See H. De Bruyn, “Origine de l’Église et de l’hôpital de Saint-Jean, au Marais, a Bruxelles,” in Analectes Pour Servir à l’histoire ecclésiastique de la Belgique, t. 4 (Brussels, 1867), 31.
were then able to participate in some of the customs and traditions that had once been limited to the royalty and the upper nobility. Leading mid-level nobles in the area surrounding Brussels, such as Guillaume of Ledebergh, Arnoul of Meysse, Gautier II of Aa, and Gautier de Bodeghem all provided generous donations to the hospital of Saint John. While the upper aristocracy along with mid-level nobles supplied contributions to the hospital, the transition to an urban society precipitated the largest donor group: urban residents. From the burgenses, hospital provisors and supporters, millers, farmers, fisherman, tanners, blacksmiths, bakers, women and more, many members of the emergent city participated in the growth and development of the hospital.

While wide-spread support from across the social spectrum was certainly represented in the hospital of Saint John, perhaps the most intriguing assistance came from other neighboring religious institutions, communities, and personalities. The earliest intervention began sometime between 1186 and 1194, shortly after the confraternity of Saint-Esprit received its statutes. The Abbot of Jette, Thierry II, and his convent allowed members of the monastery to participate in matters of charity in relation to the sick and the poor who were cared for by the confraternity of Saint-Esprit in Brussels. In addition, we have seen Guillaume of Ledebergh’s connections to the monastery of Ninove meant changes and expansion for the hospital as early as 1226.

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4 This early date does not take into consideration an 1131 faux charter, which will be explained in detail later.
5 “Omnem que auctore Spiritu Sancto in Christo fieri solet fraternitatem ac societatem approbari atque laudari dignum esse fatemur. quinimmo illum que in ejusdem Sancti Spiritus honore observatur superexcellere ac preminere ceteris profiteri non veremur. Nos itaque fraternitatem speciali Sancti Spiritus titulo insignitam Bruxelle cum alacritate et gudio spirituali suscipimus, omnesque qui in ea ad pauperum ac debilium recreationem elenosinarum suarum amminicula transmiserint, in nostre fraternitatis societate connumeramus omniumque beneficiorum nostrorum, orationum, missarum,
While these cases were exemplary, other religious associations were also involved, not only with the early hospital but also throughout the institution’s twelfth- and thirteenth-century history. The associations who participated included all levels of religious communities, those in the same parish and others many miles away, and various ranks of people, from local priests to the abbots of the Premonstratensian order. Despite the disparity in location and status, all the institutions and their leaders seemed to have had a general concern for the hospital of Saint John. The result of the intervention by various communities was the creation of an area in which local charity and patronage can be traced. A “geography of charity” centered on the hospital of Saint John emerges from the pattern of donations.

Before looking at those gifts, it is first necessary to address the nature of charitable donations in the Middle Ages. Unlike in the modern period, in the Middle Ages there was little distinction between a charitable donation and a business transaction. Whereas someone or group may have certainly have benefited financially or otherwise from a donation, lease, or rent, the nature of the transaction was nearly always spiritually

\[\text{vigiliarum atque elemosinarum participes constituimus.} \] Cartulaire de l’Hôpital Saint-Jean, SJ 3, p. 8. CPAS, SJ 4, fol. 11.

\[\text{“…Universitati verstre notum fieri volumus quod nos ad petitionem domini Willelmi de Ledeberghe, immo intuitu Dei, translationi cujusdam capellanie, a dicto Willelmo in parrochia nostra apud Pamellam in capella de Ledeberghe institute, de consilio domini Premonstratensis, assensum prebimus; hoc salvo quod procurator et capillum hospitalis sancti Johannis in Bruxella, ad quod prefata facta est translatio, nobis et ecclesie nostre resarsire debent dampna ab ipsis vel ab ipsorum nuntiis illata, que de facili nobis contingere possent, cum prefate capellanie decima infra terminos memorate nostre parrochie continueatur…” Cartulaire de l’Hôpital Saint-Jean, SJ 28, p. 48. The original is lost. By 21 December 1226 the Bishop of Cambrai prompted Gautier de Braine, a canon of Notre-Dame of Cambrai and the former dean of Hal, to transfer to the hospital of Saint John the chaplaincy of Ledebergh. This original is also lost. See Cartulaire de l’Hôpital Saint-Jean SJ 29, p. 49-51. See also Analectes Pour Servir à l’histoire ecclésiastique de la Belgique, t. 2, 32-5.}\n
\[7\] To trace see the development of this geography, please see map two. Most of the areas from which charity and donations came were located on a few miles away from Brussels itself. The fact, however, that the hospital garnered so much local attention is prevalent.
motivated, and there was often a countergift, either in the form of continued prayer, or in more tangible benefits to the donor. For the people of the Middle Ages, one route to sanctity was through almsgiving, which helped guarantee eternal salvation. The process was an exchange of earthly wealth for heavenly treasure, and it happened through intermediaries, such as monks and hospital staff. As a result of this process, Saint John’s evolved into a new urban repository of generous gifts and thus stood at the center of a “geography of charity.” How, though, did this happen?

The development of the hospital of Saint John’s occurred only gradually. The original confraternity of Saint-Esprit received official sanction from a charter granted on 14 or 31 October 1186 by Bishop Roger de Wavrin (1178-1191). The charter specified that the new confraternity was to be modeled on another similar confraternity in Cologne (instar Coloniensis caritatis), and that the members of the group agreed to “persevere faithfully” in their endeavors related to the confraternity. While the issuance was the first official surviving document pertaining to the confraternity of Saint-Esprit, which would later evolve into the hospital of Saint John, there was much more, however, to the document, Roger, and the confraternity.

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11 *Cartulaire de l’Hôpital Saint-Jean*, SJ 2, p. 7. The original has been lost. Also, see Moreau, *Histoire de l’église en Belgique*, t. III: 75-76, 79, and 678. Bonenfant saw the document as having been issued on 14 October for various reasons, namely the celebration and honor of certain saints and saint days. For the full argument see *Cartulaire de l’Hôpital Saint-Jean*, SJ 2, pp. 6-7.
13 Ibid.
14 This charter has been lost. It appears, however, in several forms including copies from the sixteenth and eighteenth centuries.
Roger de Wavrin became the bishop of Cambrai after the death of Robert d’Aire, which precipitated a double election and the appointment of Roger de Wavrin from 1178-1191.\(^\text{15}\) The Archbishop of Reims, Guillaume, who had been named a cardinal by Pope Alexander III (1159-1181) at Lateran III, consecrated Roger in 1179 at Sainte-Sabine de l’Aventin.\(^\text{16}\) Roger, prior to his election as the Bishop of Cambrai, had been an archdeacon and treasurer of Cambrai. Thus, he enjoyed the protection of the count of Hainaut in addition to his ties to the dukes of Brabant.\(^\text{17}\) These links put the bishop in a powerful position, and they thrust Roger into the social and political context into which the hospital of Saint John’s was born. This context tied the hospital specifically to the city of Brussels for the time being, but later it would help it to expand physically and otherwise into nearby locations. The context also was the first appearance of an link to the local bishopric.

In addition to his local ties, Roger was involved with more international matters. Roger entered into the episcopal seat during a time of renewed crusading fervor. Later during his tenure, Roger would leave for the Third Crusade under the leadership of Frederick Barbarossa (1123-1190), upon which he met his death in 1191.\(^\text{18}\) When he originally approved the constitution, he did so for a group under the guidance and rule of

\(^{15}\) Moreau, *Histoire de l’église en Belgique*, t. III, 75, 678. The other bishop elected was Alard. While Alard was elected, he was not consecrated into the position; he died late in that year (6 December 1177). Again, see Moreau, *Histoire de l’église en Belgique*, t. III, 75, 678.

\(^{16}\) Ibid., t. III, 76.

\(^{17}\) Ibid. Moreau is certainly the best source for understanding the church and the ecclesiastical appointments in the Low Countries throughout the Middle Ages. There are, however, a few items that he neglects. Because Moreau is more concerned with the greater affairs of Europe, such as the 1152-1190 schism that included personalities such as Philip of Alsace and Frederick Barbarossa, he often overlooks the role that many of these bishops played in everyday affairs, such as the granting of a constitution to a local hospital.

the Holy Spirit. With the popularity of the Crusades to the Holy Land, however, several movements related to the Order of the Holy Spirit as founded by Gui de Montpellier\(^\text{19}\) also followed. Roger may have been already familiar with these Orders.

The approval date of 1186 places the founding of the group of Saint-Esprit in Brussels within the official movement of the Hospital Order of the Holy Spirit.\(^\text{20}\) While these Orders only received papal approval from Innocent III in 1204,\(^\text{21}\) they were well-known and dispersed throughout the European continent by the end of the twelfth century.\(^\text{22}\) The foundation, however, in regards to the confraternity in Brussels, would prove to be somewhat backward. Pope Innocent III ordered that for orders of the Holy Spirit, the confraternity should come after the hospital. In the case of Saint John’s, the hospital came after the founding of the confraternity. This backwards founding may have been related to Roger’s ties to the Holy Land and his concern for the crusades.

Other ties aside from Roger to the early hospital associations in the Holy Land also existed with Duke Godfrey III (1142-1190), who undertook a pilgrimage and visited a hospital of Saint John the Baptist in the Holy Land, and between 1197-1198 Duke Henry I journeyed to the Holy Land.\(^\text{23}\) These connections to the dukes and the bishop, while not strong enough to prove that the confraternity of the Holy Spirit in Brussels was purposely modeled on those of the Holy Land may suggest that the rise of similar

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\(^{19}\) See Duparc, “Confraternities of the Holy Spirit and Village Communities in the Middle Ages,” 342. This work was originally published as Pierre Duparc, “Confréries du Saint-Esprit et communautès d’habitants au moyen-âge,” Revue historique de droit français et étranger, 4\textsuperscript{ème} série 36 (1958), 349-367.

\(^{20}\) See Brune, Histoire de l’ordre hospitalier du Saint-Esprit.

\(^{21}\) Duparc, “Confraternities of the Holy Spirit and Village Communities in the Middle Ages,” 342.

\(^{22}\) See Kenneth Pennington, Pope and Bishops: The Papal Monarchy in the Twelfth and Thirteenth Centuries (University of Pennsylvania Press, 1984), 178.

\(^{23}\) See especially Cartulaire de l’Hôpital Saint-Jean, X.
institutions on the continent and the rise of a similar movement throughout the West may
may be tied to the original confraternity.

Understanding the evolution of the confraternity itself proves simpler than
uncovering the origins of its name. Bonenfant, in the introduction of the cartulary, sheds
some light on the rise of the confraternity and its place in the city. He identifies, in
Cologne in the parish of Petit-Saint-Martin, a similar hospital that had been founded in
the twelfth century.\(^{24}\) This hospital was at its heart a “confrérie charitable: y étaient
reserves aux members laics de la confrérie attaints par l’âge ou la maladie et qui
désiraient se retirer à l’hôpital.”\(^{25}\) This confraternity, like many, had nothing to do with
the creation of the Order of the Hospitallers of the Holy Spirit created in the last years of
the thirteenth century\(^{26}\) but was probably related more to the older “confraternity-
communities.” Confraternity-communities were grass-roots affairs. They were not to be
confused with professional or specific confraternities, as they had “no official existence
and generally remained out of sight to the public authorities. Ecclesiastical authorities
were hardly more concerned with them in the Middle Ages, and Episcopal visitations
mention them only on rare occasions, for they had no religious aim.”\(^{27}\) The groups often
participated in charitable acts, such as giving to the poor, providing masses for the dead,

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\(^{24}\) Cartulaire de l’Hôpital Saint-Jean, X, fn 1.
\(^{25}\) Ibid. The entry continues: […] des private camera […] ubi quiete et sine offensione ceterorum tales
maneant et ubi, secundum hoc quod facultas suppetit et expedit, qui fuit honoratior et mollior in seculo,
honoratius et accuratius tractetur et prout illi competit necessaries victus et vestitus tribuatur. See Reicke,
Das Deutsche Spital und sein Recht, t. I, 201.
\(^{26}\) Cartulaire de l’Hôpital Saint-Jean, X.
\(^{27}\) Duparc, “Confraternities of the Holy Spirit and Village Communities in the Middle Ages,” fn 114, 356,
342, 345-346.
helping with communal works (such as repairing a parish church or building a bridge).²⁸

Even so, the confraternity of the Holy Spirit in Brussels still differed considerably from this type of group, namely it had a religious aim.

Bonenfant also argues that the “bourgeoisie”²⁹ may have been specifically concerned with the formation of the later hospital of Saint John’s for their retirement, and hence participated in the founding of a hospital modeled on an association that already accounted for these needs.³⁰ This comes as no surprise since the earliest missions of the confraternity were probably limited to its members. John Henderson has explained that in some communities, care was distributed first among its members. Archbishop Federigo Visconti of Pisa, “himself of noble extraction, praised the consorteria in one of his sermons. For him this institution was a way of promoting Pauline caritas, expressed as love between members and made concrete in the banquet through which the poorer members of the lineage were helped.”³¹ A similar trend occurred within earlier fraternities, who shared “this special sense of solidarity with their own members, but also extended their charity outside the membership for, in common with the French Aumônés or Charités and the confraternities of the Holy Spirit, they distributed alms to the poor of the neighborhood.”³²

The typical nature of confraternities held true in regard to the hospital of Saint John. Over the last few decades of the twelfth century, the confraternity had been a local

²⁸ Ibid.
²⁹ The Latin word to which Bonenfant is referring is burgenses. See Cartulaire de l’Hôpital Saint-Jean, SJ 2, p. 7. The original is lost.
³⁰ Cartulaire de l’Hôpital Saint-Jean, X.
³² Ibid.

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affair, limited to the confines of the town of Brussels. Resident members of the community, especially the burgher class, were associated with the group, and certainly Duke Henry I added to the prestige and effectiveness of the community with various exemptions and privileges. Indeed, charters, such as one by Duke Henry I, allowed exemptions for local people who retired to the community. While the confraternity seemed to care for its own and function as a typical confraternity would be expected, serious changes were on the horizon.

The confraternity, at least according to its original charter, was specifically formed to care for the poor and sick (sustentationem pauperum multiformem), regardless if it functioned as a retirement community. This clause may have served to remind the confraternity of its mission, and even pushed the many local citizens involved with the hospital to act on their original purpose. As the town population grew in the late twelfth century and as more and more people proved to be in need of charity, the mission of the original confraternity became viable. As a result, the transition from a group to an actual institution began to occur.

In its infant stages, the confraternity of the Holy Spirit in Brussels was in little need of lands or property, but sometime before or during 1207 this would change with the formation of a physical hospital, a formation spurred on by the local needs of the poor and sick. In 1207 Pope Innocent III extended his protection to the brothers of the

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33 See Cartulaire de l’Hôpital Saint-Jean, SJ 4, pps. 8-9; SJ 5, pps. 10-13.
34 Cartulaire de l’Hôpital Saint-Jean, SJ 4, p. 10.
36 See especially Vauchez, The laity in the Middle Ages.
37 Bonenfant notes the reception of the 1207 protection by Pope Innocent III, the addition of the chapel of Saint John, and the later 1211 statutes. He draws, however, no conclusions about the actual creation of a
hospital and their holdings, indicating the possible creation of a physical building.

Shortly after Pope Innocent III’s extension of protection to the institution, the hospital, newly referred to as Saint John’s began to garner more local recognition, which led to increased donations and privileges, as well as a procureur and sisters.

After the acquisition of a building, the hospital’s holdings quickly began to expand. In June 1210, the priest of the Forest, Gaulterus (or Gautier), and the prioress, Ida, gave the hospital of Saint John’s the perpetual enjoyment of a courtyard (curtile) situated next to the hospital. In return, the hospital was to remit an annual payment of six sous (sex solidorum). Later that month, the ninth abbot of Afflighem (r. 1203-1227) approved the transfer.

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38 “…fratribus hospitalis Brucellensis” suggests a physical counterpart to the organization. Cartulaire de l’Hôpital Saint-Jean, XVI, SJ 6, p. 14. CPAS, SJ 4, fol. 1.


40 The procureur was to be chosen by the bishop of Cambrai: “Statuimus quod, cum procurator predicte domus obierit vel alias decesserit, alius procurator, de consilio Cameracensis episcopi vel ejus officialis substituat.” Cartulaire de l’Hôpital Saint-Jean, SJ 10, p. 24. The original is lost.

41 See map two.

42 A “Henricus, prepositus,” was also mentioned in the charter. It is not clear who he is, and Bonenfant provides no elaboration. See Cartulaire de l’Hôpital Saint-Jean, SJ 8, pp. 16-17. CPAS, SJ 31, fol. 27.

43 “…Presenti igitur imprimendum duximus memoriali quod nos affectu pietatis et misericordie, communi consensus et voluntate concordi, pauperum, quibus in hospitali beati Johannis in Bruxella servitur, respicientes indigentiam, curtile quodam quod eidem domui propinquum ad nostrum spectat allodium, prefato hospitali et fidelibus in eo Deo servientibus sub annua pensione sex solidorum jure perpetuo contulimus, usui ipsorum profuturum…” Cartulaire de l’Hôpital Saint-Jean, SJ 8, pp. 16-17. CPAS, SJ 31, fol. 27. The donations by lay members of the community will be explored more fully in chapters eight and nine.

44 Gaulterus, dean of the chapter of Anderlecht from May 1210 to 28 September 1215, Franco, who served as a witness in an earlier document regarding the exemption of military service to those entering into the confraternity and who was probably a chaplain of Brussels at an earlier time, the layman Willelmus, and other qualified witnesses (laicius et ali testes idonei) were all witnesses to the charter. See Cartulaire de l’Hôpital Saint-Jean, SJ 8, pp. 16-17, fn 1-2. CPAS, SJ 31, fol. 27. Also Cartulaire de l’Hôpital Saint-Jean, SJ 4, pp. 8-10, fn 3.

45 See map two.

46 See Cartulaire de l’Hôpital Saint-Jean, SJ 9, pps. 17-18. CPAS, SJ 31, fol. 27.
After the acquisition of the courtyard, there is little surviving documentation for the next ten years concerning transfers, bequests, and rents by local religious communities. The outside attention the hospital received, however, was overwhelming. Only five years after the hospital received its statutes in 1211, Lionnet I, châtelain of Brussels, made a donation to the hospital (29 April 1216), which was later confirmed by Jean III, Bishop of Cambrai (7-30 April 1219).\(^{47}\) In addition, Pope Honorius III thrice extended and confirmed\(^{48}\) his protection to both the brothers and sisters\(^{49}\) of the hospital and their holdings, which included gardens, orchards, and pasture for their animals (28 October 1218, 27 April 1219, and 2 December 1225).\(^{50}\) Lionnet I’s donation coupled


\(^{48}\) The confirmation came later on 27 April 1219. “…Specialiter autem libertates et immunitates ac alia bona vestra, sicut ea omnino juste ac pacifice possidetis, vobis et per vos eidem hospitali vestro auctoritate apostolica [confirmamus et presentis] scripti patrocinio communimus…” Cartulaire de l’Hôpital Saint-Jean, SJ 13, pps. 28-29.

\(^{49}\) “Honorius, episcopus, servus servorum Dei, dilectis filiis, fratribus et sororibus hospitalis beati Johannis in Brussella, salutem et apostolicam benedictionem. Solet annuere sedes apostolica piis votis et honestis penitentium desideriis favorem benivolum impartiri. Eaproprier, dilecti in Domino filii, vestris justis postulationibus grato concurrentes assensu, personas vestras et hospitalitium, quo divino estis obsequio mancipati, cum omnibus bonis que imponentarum rationabili possidetis aut in futurum justis modis, prestante Domino, poteritis adipsici, sub beati Petri ac nostra protectione suscipimus…” Cartulaire de l’Hôpital Saint-Jean, SJ 12, pps. 27-28. CPAS, SJ 4, fol. 2. This was the first official and surving mention of the sisters outside of the 1211 statutes.

\(^{50}\) “…Specialiter autem possessiones et alia bona vestra, sicut ea omnia juste ac pacifice possidetis, vobis et per vos eidem hospitali auctoritate apostolica confirmamus et presentis scripti patrocinio communimus, districtius inhinentes ut nullus de ortis et virgultis seu nutrimentis animalium vestrorum decimas vobis exigere vel extroquerque presumat…” Cartulaire de l’Hôpital Saint-Jean, SJ 12, p. 28. CPAS, SJ 4, fol. 2. And “…Eaproprier, dilecti in Domino filii, vestris justis postulationibus grato concurrentes assensu, personas vestras et locam in quo divino estis obsequio mancipati, cum omnibus bonis que imponentarum rationabiliter possidet aut in futurum justis modis, prestante Domino, poteritis adipsici, sub beati Petri et nostra protectione suscipimus. Specialiter autem libertates et immunitates ac alia bona vestra, sicut ea omnia juste ac pacifice possidetis, vobis et per vos eidem hospitali vestro auctoritate apostolica 240
with the protection of the papacy over the hospital’s gardens, orchards, pastures, and animals suggests that by 1219 the hospital was growing and had all the necessary elements of basic sustenance.

In addition, as early as June 1220, Hugues the Venerable (1198-1221), the abbot of Saint-Sépulcre of Cambrai, and his convent authorized the hospital of Saint John to purchase a *dîme* from Gui de Brages, and Godfrey, Bishop of Cambrai, approved the transfer on 15 June 1220. Godfrey also reapproved the statutes of Saint John’s hospital in 1220. In the meantime (1225-1226), Bishop Godfrey, Gautier, the dean of Hal, Gautier de Braine, canon of Notre-Dame of Cambrai, Raoul, abbot of Ninove, and the knight Guillaume of Ledebergh were all working on a transfer of a chapel in Ledebergh…

[confirmamus et presentis] scripti patrocinio communimus…‖ Cartulaire de l’Hôpital Saint-Jean, SJ 13, pps. 28-29. CPAS, SJ 4, fol. 3. Finally, “…Specialiter autem libertates et immunitates necon et possessiones quas bone memorie Cameracensis episcopus hospitalis vestro, capitati sui accedente consensu, pia liberalitate donavit, domum et capellam hospitalis ipsius ac alia bona vestra, sicut ea omn[ia juste, canonice ac pacifice possidetis et in litteris ejusdem episcopi confectis exinde dicitur] contineri, vobis [et per vos hospitali] vestro [auctoritate apostolica confirmamus et presentis scripti patrocinio communimus.]” Cartulaire de l’Hôpital Saint-Jean, SJ 25, pps. 43-44. CPAS, SJ 4, fol. 4. While in the other three issuances Honorius III extended his protection to both the brothers and the sisters of the hospital, in this bull he only offers his protection to the brothers: “…filis magistro et fratribus domus hospitalis sancti Johannis in Bruxella…”


52 “G., Dei gratia Cameracensis episcopus, omnis presentem paginam inspecturis, salutem in Domino. Noverit universitas vestra quod littere sigillate sub tali forma nobis fuerunt presentate: [insert here the previous act]…” Cartulaire de l’Hôpital Saint-Jean, SJ 16, pps. 32-33. CPAS, SJ 45, fol. 24.

53 “…Quoniam injuncti nobis officii est a predecessoribus nostris salubriter inchoata ad consummationis bonum perducere, que felicis memorie predecessoris nostril domini Johannis, quondam Cameracensis episcopio, auctoritate, de prudentium virorum consilio et Sicut igitur memoriati pontificis prudencia et devocione observancie regulars n hospitalis beati Johannis in Bruxella regulariter sunt institute, sic easdem scripti presentis duximus approbatione confirmandas. See Cartulaire de l’Hôpital Saint-Jean, SJ 20, p. 38. The original has been lost.
located in the parish of Pamele\textsuperscript{54} to the hospital of Saint John. The chapel would provide the hospital with a priest.

With the basic establishment of the institution and its local holdings, as well as a chapel and a priest, the developing reputation of the hospital and its cause spurred more involvement from other religious institutions. This was not unusual as many religious organizations took up a concerted effort to garner donations from local and regional institutions. David Kusman has argued that the economic and demographic growth of the thirteenth and fourteenth centuries led to large patrimonies that were financed by various regional hospitals, including the hospital of Saint John in Brussels.\textsuperscript{55} What proves unusual is not the efforts by the hospital of Saint John to bring in donations, leases, and rents as Kusman has suggested, but rather the generous efforts by outside religious organizations to see to the expansion of this nascent institution. For example, the initial involvement of the ninth abbot of Afflighem led to subsequent contributions by other local abbots (examined later), and on 11 October 1229 Conrad, the fourteenth abbot of the order of Premonstratensians (r. 1220-1233), and the general council of the abbots of his order granted the participation of spiritual benefices of the order to all those who made gifts to the hospital of Saint John.\textsuperscript{56} This grant expanded Saint John’s spiritual

\textsuperscript{54} “…Pamellam in capella de Ledeberghe...” See Cartulaire de l’Hôpital Saint-Jean, SJ 28, p. 48. Also, see map two for the location of Pamele.

\textsuperscript{55} David Kusman, “Les hôpitaux,” 355. The hospitals with which Kusman is concerned include Sainte-Elisabeth in Anvers, the grand hospital of Bois-le-Duc, the hospital of Saint John in Brussels, the leprosarium of Saint-Pierre in Brussels, the leprosarium of Terbank in Louvain, and the hospital of Notre-Dame of Malines. Kusman “Les hôpitaux,” 358.

\textsuperscript{56} “…Quoniam, sicut ait apostolus, omnes stabimus ante tribunal Christi recepturi prout in corpore gessimus sive bona sive mala, oportet nos diem extremum misericordie operibus prevenire et eternorum intuitu seminare in terris que, reddente Domino, cum multiplicato fructu recipere debeat necessitatem in celis, credentes quod qui parce seminat parce et metet et qui seminat in benedictionibus de benedictionibus et metet vitam eternam. Cum igitur ad sustentationem pauperum et egenorum domus hospitalis sancti
network and placed the hospital on a spiritual platform similar to that of local monasteries.

Two years (1231) later, Pope Gregory IX granted to Saint John’s hospital the ability to hold mass even when the doors were closed in times of interdict,\(^57\) which would have heightened the prestige and religious importance of the institution. The prestige that followed in the wake of this privilege was augmented when on 9 June 1232 Pope Gregory IX extended his protection specifically to the prioress, the sisters (priorisee \(\text{et sororibus hospitalis}\)),\(^58\) and their holdings.\(^59\) He repeated his extension of protection again on 21 May 1237 in a bull, which placed both the brothers and the sisters of the hospital, the hospital and its holdings under his protection\(^60\) and allowed the brothers and

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\(^57\) “GREGORIUS, episcopus, servus servorum Dei, dilectis in Christo filiabus […] Datum Laterani, [IX Kl.] Martij, pontificatus nostri anno quarto.” Cartulaire de l’Hôpital Saint-Jean, SJ 38, p. 62. CPAS, SJ 4, fol. 5. The charter is damaged, but an analysis of the charter in 1589 provides the context of the bull. See Cartulaire de l’Hôpital Saint-Jean, 62.

\(^58\) The bull is excessively damaged and thus the need for the bracketed material. Cartulaire de l’hôpital Saint-Jean, SJ 41, pps. 65-66. CPAS, SJ 4.


sisters to keep the doors of the hospital open during periods of interdict.  A second document granted the hospital a priest and a cemetery.

With the creation of the chapel, the protection of the papacy, the reception of a priest, and the ability to have a cemetery, involvement from other religious institutions continued to increase. On 10 October 1241 the tenth abbot of Afflighem (r. 1227-1242), Guillaume, approved a sale that had been made between the hospital of Saint John and Henry, the chaplain of the monastery.  The sale included two bonniers (duobus bonariis) of land located in the parish of Assche. Eight years later, in August 1249 the Abbot Daniel and the monastery of Grimbergh sold (vendidimus legitime) to the hospital one bunerium et dimidium terre arabilis from the lands that they held in allodium in the parish of Cortenbergh, and on 7 July 1253 the abbess of the convent of

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61 “…Cum autem generale interdictum ferre fuerit, liceat vobis, clausis januis, non pulsates campanis, exclusis [interdictis et excommunicatis, suppressa voce, dummodo causam] non dederitis [interdicto vel quod vobis] inhibere specialiter [non contingat divina officia celebrare…” Cartulaire de l'Hôpital Saint-Jean, SJ 50, p. 76. CPAS, SJ 4, fol. 7. Furthermore, the allowance suggests that there were cases in which the hospital might have been forced to close its doors. The local and international affairs of the dukes of Brabant and the bishops of Cambrai may have prompted this papal exemption.

62 “…Ex parte dilectorum filiorum fratrum et sororum domus pauperum sancti Johannis Bruxellensis, ordinis sancti Augustini, tuae diocesis, fuit a nobis expositum et humiliter postulatum ut, cum idem priorem non habeant vel prelatum sub cujus regimine possint ibidem devotum impendere Domino famulatum, de eo misericordieram provideremus, eisdem nihilominus, cum capellam habeant juxta eam, pro se ac pauperibus domus ejusdem, cimiterium obtinendi, matricis et vicinarum ecclesiarum in omnibus jure salvo, licentiam concedentes…” See Cartulaire de l’Hôpital Saint-Jean, SJ 51, p. 77. The original is lost.

63 “…Noverit universitas vestra quod nos venditionem illam, quam frater Henricus, elemosinarius noster, fecit erga hospitale sancti Johannis in Bruxella de duobus bonariis terre vel circiter, jacentibus in parrochia de Asca, loco qui dicitur Borne, ratam et acceptam habemus…” Cartulaire de l’Hôpital Saint-Jean, SJ 56, pps. 82-83. CPAS, SJ 35, fol. 49.

64 See map two.

65 “…Noverint universi quod nos vendidimus legitime bunerium et dimidium terre arabilis, paulo plus vel minus, site in parrochia de Cortenbergh, que terra nostrum est allodium, magistre et domui hospitalis sancti Johannis in Bruxella, omni juri quod in dicta terra habuimus dicte domui renuntiantes et effestucantes coram hospitibus ecclesie nostre per omnia secundum morem terre, hoc nobis et ecclesie nostre retento quod dicta domus hospitalis beat Johannis sepe dictam terram a nobis in perpetuum jure hereditario possidebit et de ea duos denarius Lovanienses annuatim ad Natale Domini persolvet…” Cartulaire de l’Hôpital Saint-Jean, SJ 76, pps. 112-113. CPAS, SJ 36, fol. 56.
Forest approved a transfer of land in Anderlecht near Ransfort made (or to be made) to the hospital of Saint John.

The donations became slightly more regular after 1254. During that year, Cardinal Legate Pierre Capocci gave the brothers and the sisters of the hospital of Saint John, who had the rights to collection via the chapel of Saint John, the ability to hold for the sick past letters collected. Two days later, Pierre accorded thirty days of indulgences to those who made donations to the mistress, the brothers, or the sisters for the reconstruction of the hospital.

While the recreation of the hospital was a sign of the times, as “some churches and monasteries organized fund-raising confraternities that secured funds for church

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66 See map two.
67 The transfer included an exchange for three bonniers of land near Obbigarden (Petit-Bigard).
68 “…Noverint universi quod nos ordinacionem, quam fecit seu facere discretit de commutatione terre nostre site in territorio de Anderlecht juxta Ransfort et trium bonariorum juxta Obbigarden dilectus noster Petrus, prepositus Forestensis, erga capitulum et provisores hospitalis beati Johannis in Bruxella, prout viri honesti Johannes discus Clivere et Daniel de Obhem ordinaverunt seu adhuc ordinare proponent, ratum habemus et imperpetuum habebimus et firmum.” Cartulaire de l’Hôpital Saint-Jean, SJ 85, pps. 122-123.
CPAS, SJ 4, fol. 14. Johannes dictus Clivere and Daniel de Obhem served as witnesses to the transfer. For more on the men, see acts 74, 75, and 86.
69 “…in Christo fratribus et sororibus hospitalis Bruxellensis…” Cartulaire de l’Hôpital Saint-Jean, SJ 90, p. 129. CPAS, SJ 4, fol. 17.
70 “…Devotionis vestrre precibus inclinati, ut de ca]pella sancti Johannis Bruxellensis, Cameracensis diocesis, cujus ad vos colla[ti]o per[t]nere d[icitu]r, per litteras nostras imperatras, per quas non sit jus alicui acquisitum, vel [e]t[i]a[m]m impreandas, que de presentibus plenam et expressam non fecerint mentionem, nemini t[eneamin]i pro[vi]dere, auctoritate vobis presentium indulgemus…” Cartulaire de l’Hôpital Saint-Jean, SJ 90, p. 129. CPAS, SJ 4, fol. 17.
71 “…Cum itaque, sicut dicti in Christo magistra, fraters et sorores hospitalis sancti Johannis Baptiste Bruxellensis, Cameracensis dioecesis, sua nobis petitione monstrarunt…” Cartulaire de l’Hôpital Saint-Jean, SJ 91, p. 130. CPAS, SJ 4, fol. 18.
72 See, Cartulaire de l’Hôpital Saint-Jean, SJ 91, p. 130. CPAS, SJ 4, fol. 18.
construction and spiritual benefits for their members,\textsuperscript{74} the ability to collect the letters and the recreation of a new facility may have instigated still greater outside involvement. For example, just a few years later on 5 September 1257, the canons of Meerbeek (\textit{canonici Merbencensis ecclesie})\textsuperscript{75} approved a sale made by their brother (\textit{concanonic}) and the rural dean, Guillaume,\textsuperscript{76} of a \textit{demi-bonner} of a meadow near the Forest.\textsuperscript{77}

Shortly after the grant by the canons of Meerbeek, the donations and privileges enacted to the hospital by members of other religious institutions evolved somewhat to include family ties, and in a sense, the donations, land grants, and leases became more personal, which may have been a sign of the growing profit economy and the sign of greater personal autonomy.\textsuperscript{78} For example, in August 1258, the cleric Henri Stolten (\textit{Henricus dictus Stolten, clericus})\textsuperscript{79} assigned to Saint John’s his property of two (houses) \textit{domistadiis}, all of which was held in census, situated in the town of Brussels towards the rise of Nove Strate.\textsuperscript{80} In addition, an annual rent of twenty \textit{sous} was to be given by his father, Francon, to several institutions including the hospital of Saint John.\textsuperscript{81} In return, all

\textsuperscript{74} Little, \textit{Profit Economy}, 32.
\textsuperscript{75} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 100, pps. 138-139. CPAS, SJ 38, fol. 42.
\textsuperscript{76} Ibid.
\textsuperscript{77} Gautier (\textit{fratri Waltero}), the headmaster of the hospital, was made responsible for the transfer. Both parties agreed that Gautier or whomever [became the headmaster] would be held responsible of their property at Pede. “…\textit{jacente juxta Forestum et ad beneficium suum spectante, fratri Waltero, provisori sancti ospitalis (sic) sancti Johannis in Bruxella, facte, et eidem sive quibuscumque alitis de terra sua de Peda faciende juxta licentiam venerabilis patris nostri Cameracensis episcopi ab eodem W. optentam, plenarie consentimus…” \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 100, pps. 138-139. CPAS, SJ 38, fol. 42.
\textsuperscript{78} Little, \textit{Profit Economy}, 29.
\textsuperscript{79} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 104, pps. 142-143. CPAS, SJ 22.
\textsuperscript{80} This is the \textit{Rue de la Bergère}, which appears to be slightly southwest of the Parc de Bruxelles and north east of the modern facility of Saint-Pierre Hôpital.
\textsuperscript{81} “…\textit{capitulo ecclesie sancte Gudile duos solidos, capitulo ecclesie beati Jacobi Frigidi Montis duos solidos, leprosis de Bruxella tres solidos, hospitali beati Johannis in Bruxella duos solidos, fabrice ecclesie sancti Johannis duodecim denarios, prebytero ibidem et duodecim denarios, fabrice beati Nicholai duodecim denarios et capellanis ibidem duodecim denarios, monialibus ecclesie sancte Katerine juxta Bruxellam duodecim denarios, infirmarie de Vinea duodecim denarios, pauperibus domesticis parrochie
those who received aid from Henri were to celebrate his father’s anniversary every year in perpetuity. Although several institutions received funds from Henri and his father, only the hospital of Saint John received the two houses. Similarly, on 12 February 1259 Michel of Hal, priest of Gysegem (*presbyter de Ghis[en]gem*) in east Flanders, quitclaimed rights to his heritage on eight *bonniers* of arable land near Hal. The latter, however, was to pay Catherine, the daughter of Michel, after the death of Michel, a life rent of two barrels or pecks (*modiis*) of wheat. Although the hospital benefited from the grant, it was not relieved of its responsibilities to the family.

After the involvement by the two families, it was quite awhile before another religious institution imparted any holdings or privileges to the hospital of Saint John.

Thirteen years later, sometime before 30 November of 1276, the ties to the monastery of...
Afflighem again emerged. The abbot of Afflighem\(^{88}\) (r. 1265-1309), Henry, and his convent sold to Guillaume Clabot, a preacher and burgher of Brussels,\(^{89}\) and his wife three houses with their *fonds* and a small meadow\(^{90}\) located in Brussels along the rue *Marché-aux-Poulets*.\(^{91}\) In addition, in April of 1277 the hospital of Saint John and the foundation Terarken conceded to Ode Buchiclinne and to John, her husband, the usage of a *curte* (courtyard) situated in Brussels next to the church of Sainte-Gudule and recognition of the houses that the spouses had ceded to them in the *curte*. The spouses paid an annual fee of two *sous de Bruxelles* to light the Church of Sainte-Gudule. After their death, the payment of the fee was to be assumed by Saint John’s hospital, while the foundation of Terarken would pay to the grand chapter of Sainte-Gudule a fee of the same import for the celebration of the anniversary of the couple.\(^{92}\) The cessation may

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\(^{88}\) Afflighem is a Benedictine monastery founded near Alost in Brussels. Several of the dukes of Brabant and the dukes of Lorraine were patrons of the abbey. The fact that many of the nobles and the dukes of Brabant had ties to the abbey might suggest that it was also affiliated with the hospital of Saint John. H. M. Brock, “Affligem,” in the *Catholic Encyclopedia*, volume 1 (New York: Robert Appleton Company, 1907), accessed 22 September at <http://www.newadvent.org/cathen/01179b.htm>, or 179.

\(^{89}\) Guillaume Clabot was involved with the administrative affairs of the hospital. For more on him, see chapter eight.

\(^{90}\) \*…Noverit vestra universitas quod nos vendidimus bene et legitime Willelmo earum fundis ac etiam parvo sito retro dictas domos, apud Bruxellam in vico per quem itur de ecclesia beati Nycholai versus Scebrugghen situs, prout Oda, filia quondam Everwigherii, ea tenebat et possidebat et nobis in elemosinam contulit, ab ipso Willelmo, ejus uxore et eorum hereditum imperpetuam vel prout ipsis placerit possidendas…* Cartulaire de l’Hôpital Saint-Jean, SJ 169, pp. 215-216. CPAS, SJ 32, fol. 19.

\(^{91}\) The current location of the rue is just off the Grand’ Place to the west; it runs perpendicular to *Boulevard Anspach*. Located in the area is Saint Nicholas’ church. It would have been the traditional location of the market. On the thirtieth of that month, Henry and his convent finished the agreement by ceding to Guillaume Clabot the land with houses and *fonds* of the location mentioned above. Cartulaire, SJ 170, page 217. CPAS, SJ 32, fol. 22. The act was witnessed by *Johannes de Senna et Henricus dictus Portre*, aldermen. Henry and/or his family appear in other issuances. See Cartulaire, SJ 57, page 84-85 and SJ 171, 217-218. Both of these acts were included in the original *Boeck metten Hare*. It is not, however, immediately clear how they were linked to Saint John’s hospital.

\(^{92}\) \*…Pro eo quod Oda, dicta Buchiclinne, et Johannes, ejus maritus, domos nostras in quadam curte sita inter ecclesiam beate Gudille Bruxellensis et abietem quam colit Johannes Niger adheredari procuraverunt, concessimus eisdem et alteri post alterum usumfructum in curte supradicta. Ita quidem quod dicti conjuges duos solidos Bruxellenses ecclesie beate Gudile ad luminare solvere tenebuntur singulis annis, quamdiu vixerint, vel eorum alter, ad Natale Domini. Quibus defunctis, nos, magistra et conventus beati Johannis
have been a reflection of earlier disputes between the hospital and the cathedral chapter of Sainte-Gudule. In addition, it may have also been a reflection of the fact that Saint John’s held its own courtyard from an earlier transfer and thus did not need this one. The fact that the hospital had a courtyard to give speaks to the increased holdings of the hospital over the century.

Furthermore, on 1 September 1281 the abbot of the convent of Ninove, Jean de Hartbeke (r. 1274-1304/5) and the convent gave its protection to John, their prévôt, and to Rasse, the pleban (rural dean) of Borget-Lombeek of Strythem, for the alienation and giving up of their goods at Pede.\(^93\) Two days later, the monastery of Ninove transported to the hospital of Saint John twelve bonniers of land located at Neerpede held by them in allodium and eleven journaux of marsh land that they held in census to the duke of Brabant.\(^94\) The sister and lesser mistress of the hospital, Margarete, was especially prevalent in the transfer. Henricus Ancem, an alderman of Brussels, and the knight, Guillaume of Platea, whose seal adorns the issuance, both served as witnesses.

\(^{93}\) “...constituimus nostros procuratores et quemlibet eorum in solidum loco et vice nostra, dantes eisdem vel alteri eorum, si unum abesse contingat, posttestatem et mandatum speciale vendendi, alienandi bona nostra apud Pede, omnia et singular, prout ibi sita sunt, ordinandi et disponendi cum eisdem, sicut dictis procuratoribus visum fuerit expedire...” Cartulaire de l’Hôpital Saint-Jean, SJ 177, pps. 225-226. The original is lost.

\(^{94}\) “Noverint universi quod frater Raso, canonicus monasterii Ninivensis, presbyter de Lumbeke Castellani, tanquam procurator sive sindicus monasterii predicti habens ad hoc speciale mandatum, reunitando contulit ex parte monasterii ejusdem, sorori Margarete, magistre hospitalis sancti Johannis Bruxellensis, ad opus ejusdem hospitalis, duodecim bonaria terre arabilis velcirciter, prout jacent apud Naderpede, pro allodio, promittendo inde rectam warandiam. Deinde idem frater Raso resignavit in manu Henrici dicti Portre, ad opus hospitalis predicti, undecim jornalia paludis jacentis secus terram predictam et hoc habito predictus Henricus Portre contulit ulterius predicte sorori Margarete ad opus hospitalis predicti eadam undecim jornalia paludis tenenda et possidenda a domino duce hereditarie ac perpetuo annuatim sub eo censu que inde exire teneatur...” Cartulaire de l’Hôpital Saint-Jean, SJ 193, pps. 246-247. The original is lost.
In the next calendar year (19 April 1282) the abbot, not specifically identified in the charter, and the convent of Ninove sold their holdings at Pede, in conjunction with the transferences made by Guillaume of Ledeburgh and the convent earlier in the century, but directly related to an earlier transference of land to the hospital on 3 September 1282 by the monastery. The earlier ties to the monastery of Ninove via Guillaume of Ledeburgh probably assured the amicable agreements between the two institutions.

Eight more years passed before the hospital acquired any more holdings from local religious figures or institutions. In January 1290 John, the presbytery of Laeken, described as being “sick, but of sound mind,” allocated to the hospital of Saint John an annual rent of four sous Turonensis parve monete annuatim from a bonnier of allodial land located at Drootebeek. The agreed-upon rent was to be paid on the anniversary of his internment by the poor table of Saint Esprit of Laeken. Three years later, in

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95 “...Notum sit universitati vestre per presentes quod nos, utilitate et commodo ecclesie nostre diligenter pensatis, unanimi voluntate et assensu, legitimo emptionis et venditionis titulo vendidimus hospitali sancti Johannis in Bruxella bona nostra de Peda, videlicet quindecim bonaria et quadraginta quinque virgas, parum plus vel minus, partim terre arabilis et allodii, partimque prati hereditarii sita in territorio de Peda, ad mensuram de Anderlecht mensurata, a nobis hactenus quies et pacifice possessa et a dicto hospitali similii jure possidenda pro ducentis quadraginta duabus libris Bruxellensium, quatuor solidis minus, ab ipsius hospitalis fratribus et sororibus nobis legitime numeratis, exsolutis et a nosbis in nostre ecclesie utilitatem evidentem conversis...” Cartulaire de l’Hôpital Saint-Jean, SJ 196, pp. 249-250. CPAS, SJ 34, fol. 23.

96 See especially, Cartulaire, SJ 18, 19, 32, 34, 34.

97 The April charter can be found in Cartulaire, SJ 196, page 250. CPAS, SJ 34, fol. 23. The document was witnessed by lord Alard of Tervueren and the abbot of Parco (patris abbatis nostri de Parco). In an earlier charter, Alard is listed as the abbot of Parc (r. 1239-1289) and a delegate of Saint-Siège. See Cartulaire, SJ 159, page 203-4. CPAS, SJ 4, fol. 21. The act was witnessed by lord Alard of Tervueren and another abbot of Parco (“patris abbatis nostri de Parco”). See Cartulaire de l’Hôpital Saint-Jean, SJ 196, pp. 249-250. CPAS, SJ 34, fol. 23.

98 Between 1284 and 1291, all of the extant donations, transfers and sales occurred by local lay figures.

99 “…Noverint universi quod dominus Johannes, curatus de Laken, compos mentis, licet egris corpore, anime sue cupiendi providere supratuli, assignavit et dedit hospitali sancti Johannis in Bruxella quatuor solidos Turonensis parve monete annuatim, super assignamentum bunierii terre allodii sita super Drootebeke, in quam terram benificavit mensam Sancti Spiritus in Laken, a provisoribus dicte mense perpetue in die depositionis sue persolvendos...” Cartulaire de l’Hôpital Saint-Jean, SJ 217, p. 269. CPAS, SJ 39, fol. 46.
December 1293, the provisors of the poor tables of Laeken promised to pay the hospital of Saint John for the upkeep of the sick. The payment included a rent of four soldos *Turonentium parvorum* allocated from a *bonnier* of allodial land that John the Presbyter had left to them. An alderman of Laeken served as a witness to the act. The transference not only brought additional holdings to the hospital, but it also increased the religious and charitable institutions with which the hospital was affiliated. It also signaled the rise of other charitable institutions in Brabant and the communalization of charity in the region.

In the meantime, on 17 November 1293 between the agreements with Laeken, Gilles Blijsmam and Gautier, a priest and Gilles’ son, acknowledged before the tenants of the duke of Brabant the sale of a *demi-bonnier* of meadow located near Machelen, which Gilles had made to profit the hospital of Saint John and the cathedral church of Sainte-Gudule in March of 1264. Three years later in 1296, acquisitions again resumed. Two priests were particularly notable in the acts. The first, Henry of Linkebeek, gave in lease of twelve *annorum* to his relative Henry, the son of Jean of Velde, seventeen *jornalia* of

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100 Noverint universi quod cum Johannes, presbyter de Laken, contulit domesticis pauperibus de Laken in elemosinam bonarium unum terre allodialis, prout jacet prope Exterpoel, provisos eorumdem pauperum dare promiserunt hospitali sancti Johannis Baptiste in Bruxella, ad Christi membra ibidem refocillanda, quatuor solidos Turonentium parvorum, annuatim in perpetuum semper in Nativitate Domini de dicta terra persolvendos...” Cartulaire de l’Hôpital Saint-Jean, SJ 231, pps. 283-284. The original is lost.

101 “Noverint universi presentia visuri vel audituri quod Egidius, dictus Blijsmam, legitime vendidit procuratoribus hospitalium beati Johannis et beate Gudile Bruxellensium, ad opus predictorum hospitalium, dimidium bonarium prati siti in quodam loco qui dicitur Mare, in parrochia de Machle, pro sex libris monete usualis, ipsi ad plenum persolutis. Deinde predictus E., pro se et pro suis heredibus, recepit predictum dimidium bonarium prati a predictis procuratoribus predictorum hospitalium, mandato ac voluntate predictorum hospitalium, ad hereditarium censum annuatim pro decem solidis monete usualis semper in festo beati Augustini predictis hospitalibus persolvendis...” Cartulaire de l’Hôpital Saint-Jean, SJ 230, p. 282. The original is lost. Jean Coninc, chanter and brother of the treasurer Arnoul Coninc, served as a witness. See also Cartulaire de l’Hôpital Saint-Jean, SJ 213 for more on Arnoul.
land and a half *bonnier* of meadow on 5 October 1296.\textsuperscript{102} The second priest, Jean Koukaert, authorized Basilie *de Platea*, a beguine, to charge to the house that she inhabited up to the amount of ten *librarum usuali monete* at the end of her will.\textsuperscript{103} *Henricus Portere et Willelmus Pipenpoy*, alderman of Brussels, both witnessed the charter, which occurred on 23 November 1296. Finally, on 29 November 1299 the prioress (*priorissa*), Alix (r. 1278-1318), and the convent of Val-Duchesse (*ordinis Fratrum predicatorum*) made it known that they were obliged to pay perpetually to the hospital of Saint John a *pitance* (*pitanciam*) of ten *solidis* on the anniversary of Alix of Perwez.\textsuperscript{104} The money was probably designed to go to either one of the brothers or one of the sisters, or even one of the sick inmates for food or care.

At this point, the development of the hospital had been fully realized and involvement by other institutions had come full circle. The hospital of Saint John stood in the center of what can be described as a “geography of charity.” Like concentric circles, charitable donations began small and occurred close to the hospital. In earlier periods, the hospital of Saint John received land donations and rents from various

\textsuperscript{102} “*Notum sit universis quod Henricus dictus de Linkebeke, presbyter contulit Henrico, suo consanguineo, filio quondam Johannis dicti de Velde, septemdecim jornalia terre, parum plus vel minus, et dimidium bonarium prati, parum plus vel minus, prout predicta bona sibi sunt assignata, tenenda et excolenda a festo sancti Bavonis ultimo preterito ad terminum seu spatium duodecim annorum continuo subsequencium annuatim interim pro quatuor libris Bruxellensium denario monete usualis communiter in bursa currentis semper ad festum sancti Andree solvendis, promittendo ei inde interim warandiam…*” Cartulaire de l’*Hôpital Saint-Jean*, SJ 242, p. 294. CPAS, SJ 27.

\textsuperscript{103} “*Notum sit universis quod Johannes, dictus Koukaert, presbyter, promisit quod Bessela, begina, dicta de Platea, posset obligare domum suam in qua manet usque ad summam decem librarum usualis monete ad subsidium sui testamenti…*” Cartulaire de l’*Hôpital Saint-Jean*, SJ 243, p. 295. The original is lost.

\textsuperscript{104} “…*Noverint universi quod nos obligatas esse reognoscimus annis singulis hospitali sancti Johannis in Bruxella in decem solidis monete usualis ad pitanciam in anniversario nobilis domicelle Aleydis de Perwo, bone memorie, tercia die ante festum beati Nicholai, in perpetuum faciendo…*” Cartulaire de l’*Hôpital Saint-Jean*, SJ 265, p. 320. CPAS, SJ 46, fol. 33. Alix of Perwez was the wife of Godfrey II, a lord of Perwez and Grimbergh who was mentioned in an earlier charter regarding the hospital. She died in 1296.
religious institutions and figures, most of which were local. These gifts and transfers were necessary for the development of the nascent hospital. As the hospital grew the nature of the donations changed. They grew bigger and came from further away. In addition, as need evolved and as the profit economy arose, donations became tied less to religious institutions. Instead, while a religious figure may have provided the gift, the donation involved families as well. In other instances, the hospital received donations from new charitable associations, such as the local Poor Tables and *pitance* from the convent of Val-Duchesse.

Thanks to the various donations by several religious institutions, leaders, and their families, the hospital, now clearly established, had come into its own. It was a formidable institution, capable of not only caring for the inmates it housed, but also worthy enough in the eyes of its contemporaries to stand among some of the most important and well-known institutions of care and worthy enough to receive substantial support from local institutions. The question remains, how did the local bishops and the papacy view and support the hospital? It is to the larger religious picture that we now turn.
UNDERSTANDING THE HOSPITAL OF SAINT JOHN AND ITS ACTIONS WITHIN THE CONTEXT OF THE MEDIEVAL PAPACY AND EPISCOPACY

Introduction

While grants and issuances of local priests, abbots, and other religious figures helped to demonstrate the extent to which Saint John’s hospital was known within the area and the extent to which charity and donations to fellow organizations created a “geography of charity,” the issuances, nevertheless, remained generally local. To really understand the importance of the hospital outside of the Brussels and the Brabant region, we must turn to documents that place the hospital in a larger social, cultural, and religious context. This context not only helps to explain the development of the hospital outside the Brussels region, but also demonstrates that a “geography of charity” extended beyond the confines of the Brabant region. Nowhere is this more true than in the interactions between the hospital of Saint John, local bishops, and the papacy.

The rise of medieval bishops, the medieval papacy, and Christendom are not simple topics, and they cannot be explored in great depth here either. What is necessary here is a basic understanding of some of the evolutions that occurred during the high Middle Ages in each group, namely the papacy and episcopate, to understand subsequent developments at the hospital of Saint John. After providing this context, I will turn to questions such as, to what extent were the bishops of Cambrai and the papacy operating within the realm of their ability, how much control the papacy and bishops had over the institution, and how powerful was the hospital religiously speaking, in order to understand better the interactions among bishops, popes, and the hospital of Saint John.
Introduction to the Medieval Papacy and Medieval Bishops: A Brief Survey

The medieval bishop was defined in several ways and occupied many posts, not all, however, on his own. By the opening of the high Middle Ages it had become clear that in theory a medieval bishop was to be “a shepherd of the souls in his care.”¹ Bishops also often saw themselves as “stern corrector[s] of the faults of both clergy and people. [Their] diocesan duties were to go on visitations (tours of inspection), hold law courts for spiritual offenders, consecrate churches, institute rectors to benefices and confirm the faithful.”² Because they could not be everywhere at once, bishops often relied on archdeacons, who were their “eyes” since they “saw the state of the diocese and brought it to their master’s attention.”³ In addition, “custom dictated that the bishop consult with [the cathedral canons] in many matters, especially the alienation of the goods of the church in which cathedral clergy themselves had considerable interest; eventually this custom was sanctioned by canon law.”⁴ Thus, it should come as no surprise that the power of the cathedral clergy grew with the absence of a bishop and vice versa.⁵

According to administrative procedure, the bishop would not have been involved with the hospital of Saint John except during periods of visitation. Rather, the archdeacon would be charged with the mission to oversee most affairs related to the institution. The problem with this theory in regard to Saint John is that only one of the extant documents about which we know from the twelfth and thirteenth centuries was

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² Ibid., 114.
³ Ibid., 116.
⁴ Ibid.
⁵ Ibid.

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issued by an archdeacon, which came on 2 August 1274. Instead of the archdeacon, the bishops of Cambrai were more involved with the hospital. The reason for the bishops’ involvement was partly because of the hospital’s statutes, which placed it under the direct control of the bishop. In addition, unlike other religious institutions, the hospital quickly became independent from the cathedral chapter of Sainte-Gudule, under whose direction the hospital had been originally placed. Because of the role that the bishops played in the hospital, the hospital of Saint John would be placed on the same footing as other religious houses in the bishop’s diocese.

In terms of the evolution of the papacy, much is known about the largescale changes to the administration and the governance of the papacy that came with the Gregorian Reform (c. 1050-1080), which solidified papal elections, centralized the church bureaucracy, created a papal curia, celebrated the all-encompassing power of the pope, sought to rid Christendom of moral abuses such as simony and clerical marriage, and ultimately sought to free the church from secular overlordship. Included in the Reform were significant transformations to those institutions directly in contact with or under the supervision of the papacy. For example, the changes included the

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6 The document was issued by Wibaud of Sarts, Archdeacon of Cambrai at Brussels, and was concerned with the cemetery of the hospital of Saint John’s: “…Cum super terminis et finibus cimiterii beati Johannis Bruxellensis, consistentis in curte ejusdem hospitalis, dubitetur, vobis mandamus quatenus, personaliter accedentes ad dictum cymitetium vocatisque coram vobis senioribus et antiquioribus totius ville Bruxellensis, fines et terminos antiquos dicti cymiterii per ipsos decerni faciatis et quod per vos et ipsos factum fuerit super hiis, per censuram ecclesiasticam, si necesse fuerit, faciatis firmiter observari, ita quod in his exequendis alter vestrum alterum non expectet...” This is not to say that the archdeacons were not involved in other matters or that other documentation regarding the archdeacons does not exist. Here, the example is only used to show that there was not more direct oversight. See Cartulaire de l’Hôpital Saint-Jean, SJ 161, p. 205.

7 See Bonenfant, *D’Histoire des Hôpitaux*, 74-5. This topic will will be explored in detail later in this chapter.

augmentation of the “production of privileges and of letters,” and as a result, more organizations appealed to the papacy for protection, such as the hospital of Saint John.

While developments in the high medieval papacy have been surveyed by historians in the last few decades, little has been done on the specific relations between the papacy and medieval hospitals. Instead, what we know, for example, includes “the relations of the popes of the eleventh and twelfth century with French monasteries[, which have been] found to have been marked by a double alliance, offensive and defensive.”

What we will see is that the hospital system, at least in Brussels, acted much in the same manner as other medieval institutions.

Although it is difficult to compare the relations between the papacy and medieval monastery and the papacy and the medieval hospital on some levels, we do know that bishops and the papacy became largely responsible for the care of the poor, which meant that the two groups were forced to deal with hospitals (as they left the jurisdiction of the monastic house) just as they had with monasteries. In 1140 Gratian summed up a bishop’s duty to the poor: “The bishop ought to be solicitous and vigilant concerning the defense of the poor and the relief of the oppressed.”

Peter Damian asked, “Do you not know that this is why lands were bestowed on the church, so that the poor may be

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10 These changes are highlighted by the records held by the papal chancellory, and the specific sources Falkenstein identifies are “les privilèges, les grands privilèges, solennels, and les lettres.” Falkenstein, *La papauté et les abbayes françaises aux XIe et XIIe siècles*, 12.

11 Falkenstein, *La papauté et les abbayes françaises aux XIe et XIIe siècles*, 1.

supported from them, the needy fed, and so that from them the widows and orphans might receive aid.”

Yet, notions about caring for the poor and sick were already part of church governance before the above-named thinkers composed their statements, and ideas concerning poor and sick relief were in place with the Church Fathers and early councils. Both groups argued that “revenues of the church were designed for the use of the bishop, the clergy, the fabric, and the poor.” With the rise of cities and urbanization, however, a growing need for institutional care for the poor emerged; the responsibility “in canon law rested with the bishop, but, like so many ecclesiastical obligations, it had come to be discharged primarily by monasteries.” When the needs of the poor surpassed the contribution that monasteries could provide, bishops were forced to intervene, as “the clergy as a whole were still under an obligation to make provision for those in need.”

Eventually, though, a time came when the clergy could no longer adequately provide for the poor and sick. When this occurred, they laity took up the reins in what has been characterized as the “lay spiritual movement.” Sometimes lay involvement meant donations and sometimes the creation of confraternities or institutions of care. In this transition, institutions of care, such as hospitals, became the “principal way of providing poor relief in the city was the hospital.” This was not a new idea, but “what was new was the large scale on which this was done in the twelfth century.”

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13 Ibid.
14 Ibid.
15 Ibid., 321.
16 Ibid., 323.
17 Ibid., 324.
18 Ibid.
of the transition from episcopal oversight to lay responsibility, most hospitals were fully functioning in the twelfth and thirteenth centuries. They were formed thanks to the laity, but they were still in the hands of the clergy who oversaw their spiritual mission. The combined efforts of the laity and the clergy led to the creation of some of the most powerful institutions in the high Middle Ages. And while the clergy and laity would work together, they would also disagree.

In the end, however, the spiritual care of these institutions belonged in the hands of the clergy, who supervised the care of the sick and poor as their offices allowed. But was it enough? In these evolutions some historians have deliberated, “did all this constitute, within the possibilities open to a pre-industrial society, an effective response to the problem of poverty?” Most historians will argue that centralized healthcare only came in the wake of post-Reformation Europe. Even Colin Morris claims that, “statistically, we have no means of answering that question,” and while I concur with Morris, this does not mean that we cannot explore the interaction between the two religious groups and the hospital of Saint John to better understand the efforts to combat poverty and sickness in the high medieval city. Perhaps in exploring these efforts we can come closer to understanding the development of proto-centralized system and what it meant to combat the growing problems that sick placed on high medieval society.

The Transformation of the Papacy and Episcopacy in the Context of the Hospital of Saint John: “An Effective Response to the Problem of Poverty” in the First Half of the Thirteenth Century?

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19 Ibid., 326.
20 Ibid.
Providing charitable relief was nothing new to the local bishops of the Brabant region. Several bishops of Cambrai, as well as near-by bishops, engaged in charitable efforts. For example, Bishop Hugues of Liège (1220-1229) was involved in a number of spiritual programs; he liked to create “new plantations” and he extended his solicitude to hospices, lepersaria, and beguinages.

While other gestes demonstrate acts of charity similar to that of Hugues, there seems to be a general lacuna in scholarship examining how bishops funded and participated in acts of charity as related to the local hospitals and hospices. To some extent, one could argue, it was simply their job. By 1140 writers had clarified that care of the poor should be under the watchful eyes of the episcopacy. When, however, bishops and popes are examined in addition to the roles of lay benefactors, a new perspective on the hospital of Saint John emerges, one that suggests that the dukes of Brabant were not solely responsible for the success of the hospital, and one that suggests that there was a general concern on the behalf of the bishops of Cambrai for the hospital. Mid-level nobles, such as Guillaume of Ledebergh and Arnoul of Meysse were as integral to the early success of the hospital as the duke. While Guillaume and Arnoul were pivotal to the success of the hospital, the many popes and bishops involved with Saint John’s show a direct concern for the institution, so much so that the bishop’s role in the hospital’s success probably overshadowed that of the lay figures, including the dukes of Brabant.

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21 See chapter two.
23 Ibid.
24 See chapter two.
The hospital of Saint John in Brussels was particularly receptive of acts of charity by the bishops of Cambrai over several centuries. Of 278 documents in Bonenfant’s cartulary, fifteen issuances between the years of 1131 and 1300 specifically involved bishops. This amounts to roughly 5.3% of the extant documentation. While this percentage seems small, it is still significant. Duke Henry I, after all, has been single-handedly credited with the success of the hospital, and only five issuances by him survive (1.7% of the issuances). The acts by bishops were numerous in the foundational phases of the hospital, and they were at least frequent until c. 1250, precisely the time in which historians have shown that the papacy increased in power and prestige. But, around 1250, the hospital maintained greater autonomy, which may have lessened the need for episcopal support. Finally, while the issuances reflect all these general trends, within the context of the hospital they also take on their own life. Around the last half of the thirteenth century the issuances began to wane, but they accelerated again with extraordinary speed during the last three years of the thirteenth century.

In order to understand the general evolutions to papal and episcopal structure within the context of Saint John’s hospital, it is necessary to start with the founding of Saint John’s hospital. Although the original is lost, several copies of the original 1211

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25 The early date includes the first charter in the cartulary, which has been labeled as “faux” by Bonenfant. Innocent II (1130-1143) issued the charter. For Innocent II, see The Popes: A Concise Biographical History, Eric John, ed., et al. (New York: Hawthorn Books, Inc., 1964), 213-214. It may have been the case that Innocent II was refuged in France at this time (1131—on the third Sunday of Lent), well within the archdiocese of Cambrai, under which Saint John’s was included (later obviously). See A. J. G. Le Glay, Cameracum Christianum ou Histoire Ecclésiastique du Diocèse de Cambrai (Lille and Paris: Libraire de L. Lefort, 1849), XXXIII.

26 The exact document numbers of those acts as they appear in the edited cartulary are 2, 10, 14, 16, 20, 23, 49, 55, 60, 135, 182, 247, 250, 271, and 276.

27 Only seven documents were issued by the dukes of Brabant in the thirteenth century, bringing the total to two and one-half percent of all the documents.
hospital statutes survive. The charter, a declaration of the statutes of the hospital of Saint John, was issued by “Johannes, Dei gratia Cameracensis episcopus,” or Jean III of Béthune, bishop of Cambrai from 1200 to 27 July 1219. In regard to the reception of statutes, the hospital of Saint John was unusual. Several regional hospitals had received their statutes from cathedral chapters or more frequently from the priests, clergy and aldermen. Saint John’s hospital, however, was granted its statues from the bishop of Cambrai, which clearly separated it from other regional institutions.

The statutes were composed of 37 articles, 27 of which were devoted specifically to the regulation of life for the community associated with the hospital. In the initial statutes, the number of brothers and sisters was limited to three brothers and ten sisters, all of whom were to follow the Augustinian Rule. This discrepancy is significant. There was simply a need for more sisters, as they served a direct role in the care of the inmates of the hospital. As a result, at least early on, the brothers of the hospital were generally not concerned with administrative tasks, whereas the sisters were involved in the personal care of the sick. Thus, for the majority of the thirteenth century, the sisters of the hospital would outnumber the brothers.

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28 See Bonenfant’s notes regarding the surviving copies in, Cartulaire de l’Hôpital Saint-Jean, SJ 10, p. 19.
29 Cartulaire de l’Hôpital Saint-Jean, SJ 10, p. 20; and Bonenfant, Cartulaire de l’Hôpital Saint-Jean, fn I, p. 20. See also Moreau, Histoire de l’église en Belgique, 159-163, 678.
30 Bonenfant, D’Histoire des Hôpitaux, 27.
31 All information about the statutes comes from Cartulaire de l’Hôpital Saint-Jean, SJ 10, pps. 19-25; and Bonenfant, D’Histoire des Hôpitaux, 27-28.
32 This is not mentioned in the original statutes; it appears in a later charter in 1232.
33 Care was not limited to the poor, which is specified in point twenty-two of the statutes. It was also designated for the infirm, pregnant women, and poor children (numbers twenty-two through twenty-seven). Cartulaire de l’Hôpital Saint-Jean, SJ 10, pps. 23-4.
34 Bonenfant notes that there was a preponderance of women associated with the groups in the fourteenth century, but he does not place them in the thirteenth century, nor does he comment on the large number of women involved in the hospital in the thirteenth century. Bonenfant, D’Histoire des Hôpitaux, 29.
In addition to the stipulations regarding the brothers and sisters, the statutes specified that the bishop reserved the ultimate say in decisions regarding the hospital, especially the nomination of the procureur, and that the bishop had the power to intervene where necessary in administrative affairs. Finally, the statutes specifically required the hospital to care for widows, orphans, and pregnant women, many of whom were cited in 1140 by Gratian as those who were in need of episcopal care.

While the document itself is important, the context surrounding the granting of statutes by Bishop Jean III is also significant. Jean III was consecrated in Rome, but he owed his position to Emperor Otto IV (1175/6-1218). In fact, Jean III was one of the “most tenacious adherents to Otto of Brunswick and one of the bishops upon whom Innocent III would count the most.” This proved so true that the “commune of Cambrai adopted straight away an attitude opposed to that of its lord and bishop and entered into relations with Philippe of Swabia.” These battles would result in fulmination against and denunciation of, as well as the excommunication of Jean III’s enemies.

In his actions, Jean III certainly had the support of Pope Innocent III (1198-1216), who confirmed Jean III’s excommunication of his enemies on 10 April 1204. This order was enacted on all the provinces of France, which included the Cambrésiens, and the order expelled from the towns those ecclesiastical figures that refused to embrace the

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36 See specifically numbers twenty-five through twenty seven in the statutes. _Cartulaire de l’Hôpital Saint-Jean_, SJ 10, pps. 23-24.
38 Ibid.
39 Ibid.
40 Ibid.
41 Ibid., 161-2.
papal cause. Because of these events, Jean III would develop many enemies and would have to seek refuge in Cologne for some time. After his exile, Jean III was relieved of the undertakings entrusted to him by Otto IV and Innocent III between the years of 1204-1208, and he returned to Rome in 1204 and 1206. In 1208, Jean III assisted in the coronation of Otto IV in Frankfort. Although Otto IV was defeated at the Battle of Bouvines (1214), Jean III remained stubbornly faithful to the emperor until 1215. Only at Frederick II’s second coronation on 29 July 1215 did Jean III finally submit to him.

Thanks to Jean III’s role in larger affairs, the hospital became indirectly involved in the imperial battle. Although Jean III was clearly more involved and concerned with the affairs between the papacy and the empire cause, he was still the bishop of Cambrai, under whose jurisdiction the hospital of Saint John fell. His role in political affairs and his continued support in the hospital suggests that someone (himself or even Innocent III) was certainly looking out for the nascent institution. In October 1211 he granted the hospital its statutes, which were to govern the hospital for centuries to come. The official grant, only made possible by a bishop, was pivotal in the development of the hospital. In fact, the document may have been addressed to the chapter at the same time as another letter by Jean III, which “announced that he had given to the brothers and sisters of the hospital of Saint Jean a forma vivendi.”

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42 Ibid., 162.
43 Ibid.
44 Ibid.
45 Ibid.
46 Ibid., 162-3.
A number of interesting situations arise from the statutes and the attached letter. First, a *forma vivendi*, “way of life,” or statutes that govern an association can simply relate to any religious organization.\(^{48}\) The *forma vivendi*, however, could also be associated with military orders. For example, the Order of Calatrava received an early *forma vivendi* by the Cistercian General Chapter in September 1164.\(^{49}\) The first set was approved by Pope Alexander III (1159-1181), the second by Gregory VIII (1187), and the third by Innocent III.\(^{50}\) These same statutes were later given to the Order of Calatrava by the archbishops and bishops of Castile and León.\(^{51}\) We must wonder, given the similarity of figures—many of the same popes and bishops who were closely involved with the Imperial and Papal Battle—what influence this had on the creation of the statutes of the hospital. The charter itself was delivered during the struggle between the Empire and the papacy, a time during which Bishop Jean III was in good standing with Innocent III. Jean III may have been influenced by Innocent III’s approval of other orders and their statutes in his own sanction of Saint John’s.\(^{52}\) In fact, Innocent III’s may have approved of Jean III’s actions regarding the nascent institution.

The evidence for this relationship is bolstered by the fact that only a few years prior in 1207, Innocent III, in a papal bull written from Montefiascone on 3 August, had extended protection to the brothers of the hospital, but not the hospital itself or the

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\(^{50}\) Ibid.

\(^{51}\) Ibid.

\(^{52}\) In addition, Gregory VIII had made Innocent III a cardinal in 1189. See *The Popes: A Concise Biographical History*, 223.
sisters. This was the first “real” augmentation of papal power to the hospital. The constitutions given to the hospital prove fascinating since “the popes began granting privileges of exemption to religious institutions relatively late in the history of the church. The earliest monastic privileges were not, properly speaking, exemptions, but rather, to use Dom David Knowles’ phrase, “charters of rights.”

There have been significant studies completed on the privileges extended to monasteries in this period, and indeed, “with Alexander’s pontificate, privileges became more specific in describing the rights and liberties of a monastery.” Understanding the privileges in terms of a hospital proves more challenging. First, in Innocent III’s extension of protection there is no mention of an institution *per se*, and any women who may have been involved with the community were absent in the documentation. Thus, it goes without saying that the privileges granted by Innocent were specific to only the brothers. Second, the fact that the hospital was not really functioning as an institution may suggest that with Innocent III’s help and with the relationship between Jean III and

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53 "Innocentius, episcopus, servus servorum Dei, dilectis filiis, fratribus hospitalis Brucellensis salutem et apostolicam benedictionem. Solet annuere sedes apostolica piis votis et honestis petentium precibus favorem benivolium impertiri. Eaproprier, dilecti in Domino filii, vestris justis postulationibus grato concurrentes assensu, personas vestras, cum omnibus bonis que impresentiarum rationabiliter possidetis aut in futurum justis modis, dante Domino, poteritis patrocini o communimus.” Cartulaire de l’Hôpital Saint-Jean, SJ 6, p. 13. CPAS, SJ 4, fol. 1 Walter John Marx has contended that at times, the hospital brothers did not appear in the documents related to the municipal hospital in Louvain, which he takes to mean that the brothers had “disappeared.” He also argues that, “the failure to mention the brothers in certain important documents certainly would seem to indicate that their importance was quite slight during the last half of the thirteenth century,” and that the “exclusion of the brothers from medieval hospitals originally served by brothers alone or by brothers and sisters, seems to have been a common phenomenon.” Marx, The Development of Charity in Medieval Louvain, 29. Innocent III exempted the brothers but not the sisters, seeming to indicate that the sisters were not as important or influential as the brothers. Later, though, the situation would reverse. As the sisters gained more power and influence, they would be the ones identified in the charters. Indeed, Marx notes that “at Brussels, the sisters soon obtained the direction of the hospital of Saint John.” Marx, The Development of Charity in Medieval Louvain, 29.

54 Pennington, Pope and Bishops, 154.
55 Ibid., 156.
Innocent III, the hospital was able to really get its start. Finally, located just north of Rome, Montefiascone may have been one of the places that Jean III stopped en route to Rome in 1206. Jean III’s relationship with Innocent III may have led to Innocent III extending his protection over a hospital that was torn between the two sides of the imperial and papal battle.\textsuperscript{56} Indeed, other than a falsified document issued supposedly by Pope Innocent II in 1131, there are no surviving documents that come from the papal headquarters between 1131 and 1207 with the exception of Innocent’s 1207 extension of protection. Between 1131 and 1207 thirteen different popes served Rome, and it was only after Innocent III’s intervention that more constant involvement occurred between the hospital and the popes.

After Innocent III’s reign, subsequent popes seemed to have been well aware and involved with the hospital. Of the eleven popes that were in power between the reign of Honorius III (1216-1227) and John XXI (1276-1277), over half were directly connected to the hospital. This number, however, is a little misleading. Three of the five who did not have known contact with the hospital served as pope for less than a year, including Celestine IV (1241), Innocent V (1276), and Adrian V (1276). Thus, the only two popes with significant time in office who did not have a known direct role in with the hospital were Urban IV (1261-64) and Clement IV (1265-68). Even more telling is the fact that the popes that were involved after Innocent III often issued numerous bulls regarding the hospital, making up 5.7% of the total extant documentation—the same amount as those

\textsuperscript{56} At this point (1207) the protection that Innocent III extended was only over the brothers of the hospital. Indeed, the hospital was not even mentioned by name in the document: “fratribus hospitalis Brucellensis.” See \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 6, pps. 13-14.
documents issued by bishops. This number increases slightly when papal correspondence via papal legates is included, bringing the total to 22 of the 278 documents, or 7.9%. Similar to the issuances by the dukes of Brabant and by the bishops, the extant papal documents occurred rather frequently at first. Later, however, they become more and more infrequent, indicating that the hospital was gradually leaving the needed protection of the church and moving more and more into the hands of the local burgher population.

Before addressing the papacy and these evolutions, however, let us return to the bishops of Cambrai. Jean III issued the next charters as well, making him one of the most prolific participants in charitable acts in Brussels, at least on the books. He may have been absent during most of his reign, but the fact that he was so involved with the hospital proves important in and of itself, and it also demonstrates that these men, despite the duties of their office, were generally concerned with the care of individuals and institutions in their dioceses. When Jean III issued the second charter he sent it from Santbergen in eastern Flanders sometime between 7 and 30 April 1219. The act remitted to the hospital of Saint John a portion of the tithes (dîme) of Leeuw-Saint-Pierre, which had been made effective by Lionnet I, the châtelain of Brussels. Lionnet I, while

57 Today, Leeuw-Saint-Pierre is a small town on the outskirts of Brussels. It is sandwiched between Flanders and Belgium in Flemish Brabant and thus experiences on-going problems related to language and nationality. Today, the official name of the commune is Sint-Pieters-Leeuw and the language principally spoken there is Dutch.
58 "...Presentium attestatione notum fieri volumus universis quod, honorabili viro Leonio, castellano Bruxellensi, a nobis postulante ut partem decime quam [ipse in] parrochia de Lewes possidebat de manu ejusdem recipien[tes] fratribus et sororibus hospitalis beati Johannis in Bruxella conferemus, nos eundem sedula ammonitione et exhortatione diligenti ad hoc studuius inducere ut dictam decime portionem ad opus ecclesie illius resignaret ad cujus parrochiam pertinebat..." Cartulaire de l’Hôpital Saint-Jean, SJ 14, p. 29. CPAS, SJ 40, fol. 5. In addition, see above for more on Lionnet I. The châtelain was part of the leading families in the town, and thus was clearly important. See Cartulaire de l’Hôpital Saint-Jean, SJ 11, p. 26. Lionnet I is also mentioned in François L. Ganshof, Etude sur les ministeriales en Flandre et en Lotharingie (Bruxelles, 1926), 121.
certainly a châtelain of Brussels, was also the son of Godfrey, the previous châtelain of Brussels. The châtelain was put into office by the dukes of Brabant. Given the possible relationship between Henry I, duke of Brabant, and Jean III, the granting of dîmes on behalf of Lionnet I may point to other relationships. The donations to the hospital and the concern for the charity were family and community affairs that were more than just a concern from the top. Ideas about philanthropy were echoed throughout the ranks, and they were enacted by bishops who seemed to be showing a growing interest in charity.

The next four charters were all issued by Godfrey of Fontaines, bishop of Cambrai from 1220-1237/38. While Godfrey was the only bishop to issue four documents pertaining to the hospital (23.5% of the documents issued by bishops and 1.4% of the total of all the documents), Godfrey’s role in charity and charitable activities was actually more reserved then it first would seem. Rather than create new acts of charity or new precedents for allocating charity, Godfrey followed the work of his predecessor. This may have been because Godfrey was just as embroiled in a struggle against the commune as his predecessor Jean III. Godfrey was even forced in 1223 to leave his bishopric as Jean III did. As the battles between the papacy and the empire also continued with Frederick II and Pope Honorius III (1216-27), so did Godfrey’s role in the affairs, which may have limited or even dictated the ways in which Godfrey was involved.

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59 In addition, Lionnet’s father, Godfrey I, was also concerned with charity and even gave donations from the same location: Leeuw-Saint-Pierre. Instead of tithes, however, Godfrey’s donations were in relation to Petit-Bigard.
60 De Moreau, Histoire de l’église en Belgique, t. III, 164.
61 He may have succeeded as early as 1218 or 1219. See Le Glay, Cameracum Christianum ou Histoire Ecclésiastique du Diocèse de Cambrai, 41.
63 Ibid.
able to respond to the hospital. Despite a struggle with the papacy and empire that took away his time and efforts from his own matters, Godfrey was a popular bishop and was well known for his philanthropic acts.⁶⁴ For these reasons, Godfrey’s role in the issuance of the charters must be reexamined with the understanding that he had some basic concern for the hospital.

On 15 June 1220 at Soignies, just outside of Brussels, Godfrey confirmed an act that had been issued sometime during the first half of that month by Hugues, the abbot of Saint-Sépulcre of Cambrai from 1198 to 1221.⁶⁵ Hugues had authorized the hospital of Saint John to purchase a dîme from Gui de Brages.⁶⁶ In confirming this right, Godfrey gave his approval for the abbot’s actions. Godfrey also helped to expand the holdings of the nascent organization. In addition, Godfrey also reconfirmed that same year (1220) the statutes of Saint John’s hospital that had been granted under his predecessor.⁶⁷ Godfrey was the only bishop aside from Jean III, under whom the original statutes were issued, to reconfirm the statutes of the hospital. In the charter he even rededicated the

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⁶⁴ Ibid., 166. De Moreau alludes to the fact that Godfrey was known for charitable acts, but he provides no other elaboration on the subject before moving on to the next bishop.
⁶⁷ For explanation on the date see Cartulaire de l’Hôpital Saint-Jean, SJ 20, p. 37.
Despite their great struggles, both men continued to look out for the hospital.

In the next issuance on 27 January 1225, Godfrey “delegated his powers to Gautier, dean of Hal and canon of Cambrai, for the erection of the chapellenie that Guillaume de Ledeberg, knight, wanted to establish at the hospital of Saint Jean.”\(^{69}\) In the issuance Godfrey created a chapellenie.\(^{70}\) Bishop Godfrey not only helped to establish what would become the hospital chapel, but he also deliberately transferred his own power to dictate changes to the institution to the dean of Hal and canon of Cambrai.\(^{71}\) The charter demonstrates a special mandate by the bishop, Godfrey, to the dean, Gautier, for the establishment of the chapel. It was, however, the unusual role of the bishop as dictated by the hospital statutes that even allowed Godfrey the power to see to the chapel’s erection. Finally, in 1236, Godfrey issued his final act—an approval of the transfer of the office of the chapellenie of Ledebergh to the hospital of Saint John.

\(^{68}\) “Quoniam injuncti nobis officii est a predecessore nostro salubriter inchoate ad consummationis honum perducere, que felicis memorie predecessoris nostri domini Johannis, quondam Cameracensis episcopos, auctoritate, de prudentium virorum consilio et devocione observancie regulars n hospitale beati Johannis in Bruxella regulariter sunt institute, sic eadem scripti presentis duximus approbatione confirmandas...” The original has been lost. See Cartulaire de l’Hôpital Saint-Jean, SJ 20, p. 38.


\(^{70}\) Cartulaire de l’Hôpital Saint-Jean, SJ 23, p. 42.

\(^{71}\) Another source identifies that in October 1232, Godfrey ratified the foundation of a chapel in the hospital of Saint John. The other documents from the cartulary, however, are not included. See Le Glay, Cameracum Christianum ou Histoire Ecclésiastique du Diocèse de Cambrai, 41. This act was not out of the ordinary since within the church structure the “dean has only delegated jurisdiction, restricted to a particular area and to certain matters specified by the bishop. His powers [were] generally determined by the diocesan statutes, by custom, or by special mandate of the bishop.” David Dunford, “Dean” in The Catholic Encyclopedia, volume 4 (New York: Robert Appleton Company, 1908), accessed 5 December 2008 at <http://www.newadvent.org/cathen/04659a.htm>.
All of this proved important because the chapel allowed the hospital to physically grow and expand.

The grant placed the hospital on a footing similar to local monastic institutions.

In terms of monasteries, the granting of the chapel occurred as follows:

A layman or a bishop could bestow a chapel on the monastery, or the monastery could build one on its lands. If a layman gave the chapel to the monastery, the monks could exercise only the right of patronage. Laymen cannot grant greater rights to a monastery, […] than they themselves have. If a bishop established the church, the rights of the bishop depended on the type of grant. The bishop might reserve spiritual rights, temporal rights, or jurisdiction to himself. If the bishop granted spiritual and temporal rights to the monastery, he might still reserve the rights he had over the other clergy in his diocese: ordination, judgment, the bestowal of sacramental chrism, and obedience. These prerogatives would remain untouched. Such a chapel belonged to the monastery “pleno iure,” and the monks installed the priest. The bishop, however, could judge or suspend the priest without consulting the abbot. […] The bishop’s grant could bestow temporal rights, but not spiritual.72

Since the hospital acted in many ways similar to a monastery, and since the bishops of Cambrai guarded the hospital of Saint John personally, one could assume that the bishop did exercise and reserve various rights and jurisdictions, spiritual and temporal.

In the meantime, during Jean III’s and Godfrey’s reigns as bishop, Pope Honorius III (1216-27) had been elevated to the papacy. On 28 October 1218 from the Lateran, Honorius III extended his protection over both the brothers and the sisters of the hospital of Saint John and its holdings,73 which differed significantly from his predecessor,

72 Pennington, Pope and Bishops, 164-165.
Innocent III, who had only extended the privileges to the brothers. In addition, Honorius III exempted Saint John from the *dîmes* owed for gardens, orchards, and food for their animals.\(^\text{74}\)

A short time later on 27 April 1219 from Rome Honorius III again extended his protection to the hospital, the brothers, the sisters, and the hospital’s holdings, and he confirmed the hospital’s privileges.\(^\text{75}\) Finally, from Rieti on 2 December 1225 Honorius III placed the master of the brothers of the hospital, the hospital itself, and the hospital’s holdings under his protection.\(^\text{76}\) He also confirmed the privileges and possessions as bestowed by the deceased bishop.\(^\text{77}\) While the bishop about whom Honorius was speaking was Jean III, it is not clear if the actions refer to the statutes, granted in 1211, or the *dîme* of Leeuw in 1219.\(^\text{78}\) The several confirmations and reconfirmations, although typical in this period, may have demonstrated the general approval of the papacy of the hospital in this period. The acts also added to the growth of the hospital, which would not have happened without papal support.

\(^\text{74}\) “…*Specialiter autem possesiones et alia bona vestra, sicut ea omnia justae ac pacifice possidetis, vobis et per vos eidem hospitali auctoritate apostolica confirmamus et presentis scripti seu nutrimentis animalium vestrarum decimas vobis exigere vel extrarequere presumat…*” Cartulaire de l’Hôpital Saint-Jean, SJ 12, p. 28. CPAS, SJ 4, fol. 2.

\(^\text{75}\) “…*Specialiter autem libertates et immunitates ac alia bona vestra, sicut ea omnino justae ac pacifice possidetis, vobis et per vos eidem hospitali vestro auctoritate apostolica [confirmamus et presentis] scripti patrocinio communimus…*” Cartulaire de l’Hôpital Saint-Jean, SJ 13, pps. 28-29. CPAS, SJ 4, fol. 3.

\(^\text{76}\) “…*Specialiter autem libertates et immunitates necnon et possessiones quas bone memorie Cameracencis episcopus hospitali vestro, capitali sui accedente consensu, pia liberalitate donavit, domum et capellam hospitalis ipsius ac alia bona vestra, sicut ea omnia justae, canonice ac pacifice possidetis et in litteris ejusdem episcopi confectis exinde dicitur] contineri, vobis [et per vos hospitali] vestro [a]uctoritate apostolica [confirmamus et presentis scripti] patrocinio communimus…” Cartulaire de l’Hôpital Saint-Jean, SJ 25, pps. 43-44. CPAS, SJ 4, fol. 4. While in the other three issuances Honorius III extended his protection to both the brothers and the sisters of the hospital, in this bull he only offers his protection to the brothers: “…*filii magistro et fratribus domus hospitalis sancti Johannis in Bruxella…*”

\(^\text{77}\) See above. Cartulaire de l’Hôpital Saint-Jean, SJ 25, p. 43. CPAS, SJ 4, fol. 4.

\(^\text{78}\) Cartulaire de l’Hôpital Saint-Jean, SJ 25, p. 43. fn 3.
Pope Gregory IX (1227-1241) extended his protection to the hospital twice during his reign. Gregory IX had been a cardinal since 1198, the first year of Innocent III’s reign. Thus, it should not come as a surprise that Gregory IX behaved in many ways similar to Innocent III himself and was embroiled in many of the affairs that had now been plaguing the papacy for so many years. Gregory IX’s first issuance came on 21 February 1231 from Lateran, when he ordered that the hospital’s doors remain open during periods of interdict. In addition, on 9 June 1232 from Spoleto Pope Gregory IX granted protection to the prioress and the sisters of the hospital and their holdings. There is no mention of the brothers or their holdings. The reference to the sisters might have meant that Gregory IX was merely extending his protection over the sisters who were neglected in the earlier protection by Honorius III and might even suggest that the sisters petitioned him for protection. Finally, the protection might have simply signaled the rise of the sisters as a viable group within the hospital, one that was finally recognized as deserving of protection in 1232.

In addition, shortly after Bishop Godfrey had approved the transfer of the office of the chapellenie of Ledebergh (originally in 1225) in October of 1236, Pope Gregory IX made two issuances less than a year later. The first came from Viterbe on 21 May 1237 and in it Pope Gregory IX placed both the brothers and the sisters of the hospital,

80 “GREGORIUS, episcopus, servus servorum Dei, dilectis in Christo filiabus […] Datum Laterani, [IX Kl.] Martij, pontificatus nostri anno quarto.” Cartulaire de l’Hôpital Saint-Jean, SJ 38, p. 62. CPAS, SJ 4, fol. 5. The charter is damaged, but an analysis of the charter in 1589 provides the context of the bull. See Cartulaire de l’Hôpital Saint-Jean, p. 62.
81 The bull is excessively damaged and thus the need for the bracketed material. Cartulaire de l’Hôpital Saint-Jean, SJ 41 pps. 65-66. CPAS, SJ 4, fol. 6. “…Eapropter, dilecte [in Christo] filie, vestris justis […] omnibus bonis […] possidetis et in futurum […] juste ac pacifice possidetis […] auctoritate apostolica confirmamus et prescripti patrocino communimus […] paginam nostre protectionis et confirmationis ausu […]…” Cartulaire de l’Hôpital Saint-Jean, SJ 41, p. 66. CPAS, SJ 4, fol. 6.
the hospital, and its holdings under his protection. The issuance also allowed the brothers and sisters to keep the doors of the hospital open during periods of interdict. A second document from the same location and dated one day later on 22 May gave the bishop of Cambrai permission to grant to the brothers and sisters under the Augustinian Rule of the hospital of Saint John, as he saw fit, a priest and a cemetery. The need for a cemetery at a hospital could be taken as a grim sign of prosperity. Clearly business was booming.

Gui I (Gui or Guiard de Laon 1237-1247), the next bishop of Cambrai, diverged from his predecessors, in that he had a reign that was marked by peace and justice. The fact that both the papacy and bishop experienced periods of peace may have contributed to the growth of the hospital mid-century and may also have allowed the shift from formation to general growth. During his reign, Gui I issued two charters to Saint John’s hospital, which proved to be integral to the later success of the later hospital. One came on 22 December 1240 and the other on 17 September 1242. The two charters differed in


83...Cum autem generale interdictum ferre fuerit, liceat vobis, clausis januis,] non pulsates campanis, exclusis [interdictis et excommunicatis, suppressa voce, dummodo causam] non dederitis [interdicto vel quod vobis] inhibere specialiter [non contingat divina officia celebrare...” Cartulaire de l’Hôpital Saint-Jean, SJ 50, p. 76. CPAS, SJ 4, fol. 7.

84...Ex parte dilectorum filiorum fratum et sororum domus pauperum sancti Johannis Bruxellensis, ordinis sancti Augustini, tuae diocesis, fuit a nobis expositum et humiliter postulatum ut, cum idem priorem non habeant vel prelatum sub cujus regimine possint ibidem devotum impendere Domino famulatum, de eo misericorditer provideremus, eisdem nihilominus, cum capellam habeant juxta eam, pro se ac pauperibus domus ejusdem, cimiterium obtinendi, matrix et vicinarum ecclesiarum in omnibus jure salvo, licentiam concedentes...” See Cartulaire de l’Hôpital Saint-Jean, SJ 51, p. 77. The original is lost. 85 Moreau, Histoire de l’église en Belgique, t. III, 166.
composition and matter. In some ways, the issuances followed the trends marked by Gui I’s predecessors and in others, the issuances diverged. Much of the dirvergence might have been the result of a brief peace between the papacy and the empire and the non-participation in that battle of the bishops of Cambrai.

The first charter was directly related to a papal bull that Pope Gregory IX had issued on 22 May 1237 that had allowed the bishop of Cambrai to grant a priest and a cemetery to the brothers and sisters of the hospital of Saint John. The bull did not name a specific bishop, and the bishop in question would not have been Gui I, since Gui I was in office only after 1238. In 1240 Bishop Gui reconfirmed Gregory IX’s allowances to the hospital of Saint John. The brothers and sisters were to receive the cemetery, and the creation of the cemetery was to be done on the occasion of the funeral of Jacques, the son of Guillaume of Ledebergh. The charter was dedicated on the twenty second day of December, one day after the feast day of Saint Thomas, the Apostle. In the charter, Gui I passed the responsibility to the dean of chapter of Sainte-Gudule, under whose

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86 Gui is identified as Guiard de Laon by Bonenfant. See Bonenfant, Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 82, fn 1 and de Moreau, Historie de l’égliise en Belgique, t. III, 166, 678.
87 “...Inde est quod vobis mandamus quatenus, ad decanum et capitulum Bruxellense personaliter accedentes, ipsos ex parte nostra moneatis, rogantes eosdem ut permittant predictis fratribus corpora fratrum et sororum ac pauperum, qui in dicta domo decesserint, in cimiterio, quod habere dicuntur, sepelire nec impediant quominus illi qui elegerint in dicta domo sepulturam, sive sint parochiani sancte Gudule sive alterius parochie, ibidem valeant sepeliri, precipe cum dicti fraters, sicut nobis ex parte eorum intimatum est, parati sint et fuerint quoslibet conservare indempnes super jure sepulture predictorum et aliis quibuscumque...” Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 82. The original is lost.
88 “...Verum, cum nuper sicut intelleximus, dicti decanus et capitulum corpus cujusdam Jacobi defuncti, filii quodam Williemi de Ledeberghe, qui Jacobus in neadem domo habitum eorum susceperat et decepit, in prejudicium dictorum fratribus non modicum et gravamen ab eadem domo asportaverint violenter, ita quod dicti frates corpus ipsius non potuerint ecclesiastic tractare sepulture, vobis iterato mandamus, quatenus dictos decanum et capitulum moneatis ut, si ita est, super hoc dictis fratribus satisfaciant indiliter, alioquin dictis fratribus deesse non poterimus, quin secundum mandatum apostolicum ipsis exhibeamus juris debiti complementum...” Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 82.
89 Ibid.
90 Ibid.
jurisdiction the hospital of Saint John had originally been placed. The re-emergence of the dean would be the sign of later struggles between the hospital and the cathedral chapter.

Bishop Gui I’s second issuance was on 17 September 1242 where he made it known to the rural dean (plebano)\(^91\) of Sainte-Gudule that he was revoking a previous ruling that was burdening both brothers and sisters of the hospital of Saint John and preventing them from delivering their goods and services.\(^92\) It is not clear what rulings he is revoking. The charter may have been a reference to the earlier role of the chapter of Sainte-Gudule and its ability to intervene in the hospital. Despite the ambiguity, the charter contains some strong language that suggests grave concern on the part of the bishop. While it is not clear if the rescinding had any adverse affect on the chapter of Sainte-Gudule, we do know that not long after the ruling the hospital and the cathedral chapter would begin to engage in a lengthy battle in regards to the collection of offerings at the chapel of Saint John.

After the 17 September 1242 issuance, there were no further episcopal charters until 30 September 1277, during the stormy episcopate of Nicolas II de Fontaines (1249-

\(^91\) “G., Dei gratia Cameracensis episcopus, dilecto filio plebano Bruxellensi...” Cartulaire de l’Hôpital Saint-Jean, SJ 60, p. 87.
\(^92\) “...Cum apostolus ad ipsum pertingere asserat infirmitates quorumlibet aliorum, terror nobis incitat si, quorum cura nobis committitur, utputa hospitalium et ibidem egrotantium, quorum dispositio et defensio nostro incumbit officio, eorum paci et tranquillitati providere negligamus. Ne igitur servitutibus in rebus propriis aggraventur qui defectu virium, paupertate et egritudine opprimunt, volumus et decernimus ne quique servitudes in rebus suis, vita, itineris, usus vel usufructus, a rectoribus hospitalis sancti Johannis in Bruxella in nostra diocese constituatis, fratribus vel sororibus ejusdem hospitalis, cuiquam concedatur (sic.). Quod si contra fecerint, id irritum habeatur et tam dans quam recipiens indignationem Domini incurrere vereatur. Ad quod exequendum, scilicet quod in hac parte statuimus, te exequorum deputamus, mandates tibi quatinus quicquid in hac parte contra hoc inveneris attemptari in statum pristinum revoces, attemptantes ad desistendum per censuram ecclesiasticam compellendo, ut sic libertate rerum suarum dictum hospitale ab inquietudine que exinde posset contingere defenduatur...” Cartulaire de l’Hôpital Saint-Jean, SJ 60, pps. 87-88. CPAS, SJ 4, fol. 14.
c. 1273).\textsuperscript{93} Between 1249 and 1272 Nicolas II was forced to apply himself particularly to providing defense for the episcopacy against local communes, which culminated in his construction of the castle of Fontaine.\textsuperscript{94} Nicolas II also sought protection from the local alderman, who had been committing hostile acts against the local canons. Despite the fight with the local burghers, as early as 1251 the bishop announced that he favored the \textit{bourgeois},\textsuperscript{95} and on 29 June 1258 he even declared null and void all the excommunications and interdicts of his chapter and enacted diverse measures in favor of the magistry.\textsuperscript{96} Several other decisions followed, and by the end of the rule of Nicolas II, peace reigned between the bishops of Cambrai and the commune for fifteen years.

While the wars between the commune and the bishop tormented the two factions, the battles may have occurred thanks to the wars between Saint John’s hospital and the cathedral chapter. Just as the episcopacy supported the local aldermen so did the hospital have the support of the bishops and alderman, and both groups warred against the local canons. Indeed, without the support and intervention of the bishops of Cambrai the hospital came increasingly under the attack of the local cathedral chapter.\textsuperscript{97}

In the papal realm, events linked to the hospital of Saint John differed. Unlike those from the bishops, grants from popes and papal legates increased during this period, which may explain the absence of the local bishop. Between 1242 and 1277 four popes

\textsuperscript{93} During the gap only one bishop served at Cambrai: Nicolas II, the nephew of Godrey de Fontaines. Before entering the episcopate, Nicolas served as the archdeacon of Valenciennes and as a \textit{prévôt} of Soignies. He was elevated to bishop under Innocent IV. See Le Glay, \textit{Cameracum Christianum ou Histoire Ecclésiastique du Diocèse de Cambrai}, 42-45. See also Moreau, \textit{Histoire de l’église en Belgique}, t. III, 159.


\textsuperscript{95} “\textit{Bourgeois}” is Moreau’s word. See Moreau, \textit{Histoire de l’église en Belgique}, t. III, 168.

\textsuperscript{96} Ibid.

\textsuperscript{97} See especially, Zacour, \textit{An Introduction to Medieval Institutions}, 161.
and one papal legate were all involved with the hospital. The fourteen total documents representing the popes and their correspondence during this time demonstrate a number of factors. First, the documents issued by the popes and their legates tended to cluster. For example, all of the documents from Innocent IV (1243-1254) came in rapid succession, as did the documents of papal legate Pierre Capocci and Pope Alexander IV (1254-1261). In addition, the acta that were issued in the periods between the papal bulls were increasing in both number and frequency. To explore these changes, we turn first to Pope Innocent IV.

One of the most prolific proponents of the hospital of Saint John during this period was Pope Innocent IV (1243-1254), who issued a number of charters of several privileges. While most know Innocent IV for his struggle with the Empire and Frederick II, Innocent IV’s relationship with the hospital of Saint John may show a different side of the pope, one that was concerned with charity and the welfare of religious women. Pope Innocent IV (1243-54) followed his predecessor by extending the papacy’s protection over the mistress, the sisters of the hospital of Saint John, and their holdings on 13 October 1245 from Lyon.98 In addition, Innocent IV exempted the dîmes that were being used for the hospital animals and confirmed both the hospital’s lay and ecclesiastical privileges.99 In some ways, Innocent IV’s grants differed from Gregory IX’s acts of protection, especially in the exemption of the dîmes. Yet, Innocent IV permitted the

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98 The original is lost and no copies survive. The description of the document comes from Bonenfant’s comments in the cartulary and from a 1589 analysis of the document. See Cartulaire de l’Hôpital Saint-Jean, SJ 64, p. 91.
99 Cartulaire de l’Hôpital Saint-Jean, SJ 64, p. 91.
hospital church to say masses even when the doors were closed for interdict,\textsuperscript{100} which
recalls Gregory IX’s privilege that allowed the hospital to hold the mass in cases of
interdict and excommunication.\textsuperscript{101}

While Innocent IV’s privileges proved similar in someways to those of his
predecessors, his work with the hospital also indicates a number of changes occurring
within the institution. Both Gregory IX’s and Innocent IV’s protection over the sisters
may signify a growing sisterhood in the hospital itself and the establishment of a fully-
functioning staff who would need protection. The privileges concerning prayers during
interdict confirms this suggestion. If indeed the hospital was growing, then being able to
say prayers and masses for the dying would be a necessity. For a pope to concede these
privileges demonstrates Saint John’s growing importance to the city, as well as its good
reputation with the papacy.

These notions are bolstered by the fact that less than a year later, on 16 October
1246 from Lyon, Innocent IV offered four days of indulgences to those who made
charitable donations for the reconstruction of the hospital of Saint John.\textsuperscript{102} The issuance

\begin{flushright}
\textsuperscript{100} Ibid.
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\textsuperscript{101} “…Cum autem generale interdictum ferre fuerit, liceat vobis, clausis januis,\, non pulsates campanis, exclusis [interdictis et excommunicatis, suppressa voce, dummodo causam] non dederitis [interdicto vel quod vobis] inhibere specialiter [non contingat divina officia celebrare…” Cartulaire de l’Hôpital Saint-
Jean, SJ 50, p. 76. CPAS, SJ 4, fol. 7.
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\textsuperscript{102} “…Quoniam, ut ait apostolus, omnes stabimus ante tribunal Christi recepturi, prout in corpore gessimus, sive bonum sive malum fuerit, oportet nos diem messionis extreme misericordie operibus prevenire et eternorum intitu seminare in terries, quod, reddente Domino, cum multiplicato fructu recolligere debeamus in celis, firmam spem fiduciamque tenentes, quoniam qui parce seminat, parce et metet, et qui seminat in benedictionibus, de benedictionibus et metet vitam eternam. Cum igitur sicut ex parte dilectarum in Christo filiarum, priorisse et conventus hospitalis sancti Johannis, in Bruxella, ordinis sancti Augustini, Cameracensis dioecesis, est propositum coram nobis, quod eedem dictum hospitale cum ecclesia et officinis ipsius inceperint edificare de novo opera non modicum sumptuoso, et ad consummationem tanti operis proprie sibi non suppetunt facultates, universitatem vestram rogamus, monemus et hortamur in Domino, in remissionem peccaminum vobis injungentes, quatenus de bonis vobis a Deo collatis pias eleemosinas et grata eis charitatis subsidia erogetis, ut per subventionem vestram
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specifically mentions the priorisee and conventus of the hospital, who were under the Augustinian Rule. The language of the charter suggests a strong female presence, while the offering of indulgences implies a new and important physical counterpart. Whereas the ability to offer indulgences may have widened the hospital’s popularity, the simple fact that the hospital was entering into a stage of reconstruction less than one hundred years after its creation suggests considerable physical growth. In addition, it was precisely after this document that the frequency in donations, particularly lay donations, began to rapidly increase. From 1131 to 1247 during a span of 116 years, sixty-seven documents are extant. Thirty-one of those documents, or roughly 46%, were issued by lay members of the community no including the dukes of Brabant. From 1247 to 1255, in only twelve years, twenty-eight documents were issued, of which fifteen, or 53.5%, were of lay origin. A similar trend continued after 1255.

The papal bulls continued when on 4 December 1246 from Lyon again, Innocent IV issued yet another bull pertaining to the hospital. It too was an extension of protection to the hospital of Saint John, its brothers, sisters, and its possessions. The document even confirmed the privileges in accordance with Innocent IV’s previous issuances,

Innocent IV’s predecessors, and their exemptions, such as allowing the hospital’s doors

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prefatum opus valeat consummari, et vos per hec et alia bona, que, Deo inspirante, feceritis, ad eterne felicitates gaudia possitis perveni...” Cartulaire de l’Hôpital Saint-Jean, SJ 65, pps. 91-92. The original is lost. See also the importance of this issuance in regards to Guillaume of Ledebergh in chapter five.

103 Cartulaire de l’Hôpital Saint-Jean, SJ 65, p. 92.

104 “...Preterea quascunque possessiones, quaecunque bona idem hospitale imspetarum juste et canonice possidet aut in futurum concessione pontificum, largitone regum vel principum, oblatione fidelium seu alis justis modis, prestante Domino, poterit adipisci, firma vobis et hiis que vobis successerint et illibata permaneant. In quibus hec proprisi duximus exprimenda vocabulis: locum ipsum in quo prefatam hospitale situm est, cum omnibus pertinentiiis suis, cum pratis, vineis, terries, nemoribus, usuagiiis, pascuis in bosco et plano, in aquis et molendinis, in viis et semitis et omnibus aliiis libertatibus et immunitatibus suis...” Cartulaire de l’Hôpital Saint-Jean, SJ 66, p. 94. The original is lost.
to remain open in cases of interdict and excommunication. Innocent IV also exempted new dîmes and plots that served to feed the hospitals animals, many of which had recently come into the hospital’s possession. The issuance was rather lengthy—one of the longest in the collection of twelfth- and thirteenth-century charters—and the bull confirms both the growth of the sisters of the hospital and the overall growth of the hospital and its possessions.

Furthermore, the confirmation of more dîmes suggests that not only was the hospital growing but that it also had several new lay donors in only a few years. In addition, the language of the charter implies firm changes to the administration of the hospital. The document contained an extensive witness list composed of many church leaders: Pierre of Bar, the abbot of Igny of the order of Cîteaux, cardinal and bishop, Guillaume of Talliante, abbot of Sahagun (Léon) of the order of Saint Benoît and cardinal, Jean of Toletto, English Cistercian, bishop and cardinal, Hugues of Saint-Cher, Otto of Montferrat, Cardinal-Decon, Pierre of Collemedio or Colmieu, the provost of Saint Omer in 1229 and archbishop of Rouen in 1236, Guillaume of Savoie, bishop of Modène and cardinal bishop of Sabine, Gilles of Torres, canon of Burgos and cardinal

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105 “...Cum autem generale interdictum terre fuerit, liceat vobis, clausis januis, exclusis excommunicatis et interdictis, non pulsatis campanis, dummodo causam non dederitis interdicto, suppressa voce, divina officia celebrare...” Cartulaire de l’Hôpital Saint-Jean, SJ 66, p. 94.
106 “...Sane novalium vestrorum, que propriis sumptibus colitis, de quibus aliquis hactenus non percepit, sive de vestrorum animalium nutrimentis, nullus a vobis decimas exigere vel extorquere presumat...” Cartulaire de l’Hôpital Saint-Jean, SJ 66, p. 94.
107 “...Prohibemus insuper ut infra fines parrochie vestre nullus sine assensu diocesani episcopi et vestro capellam seu oratorium de novo construere audeat, salvis privilegiis pontificum Romanorum. Ad hec novas et indebitas exactiones ab archiepiscopis, episcopis, archidiaconis seu deanis aliisque omnibus ecclesiasticis secularibusve personis a vobis omnino fieri prohibemus...” Cartulaire de l’Hôpital Saint-Jean, SJ 66, pp. 94-95.

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Finally, the work was created by Marin of Eboli, a Dominican and vice chancellor of the Roman Church who served from 27 September 1244 to 31 December 1251. In the face of such a wide selection of church personnel, one cannot deny the importance of this hospital. Clearly Innocent IV saw the significance of the hospital, and certainly the extensive list of witnesses proves that others saw the growing magnitude of the hospital as well.

Finally, from Lyons on 27 March 1247 Innocent IV issued his last bull pertaining to the hospital of Saint John. Innocent IV granted the mistress and the sisters of the hospital the authority to receive holdings. The issuance suggests that if someone gave lands or goods to the sisters, either by heritage or by another way *(mobilia et immobilia, exceptis feudalibus)*, the lands could not be revoked. Innocent IV not only extended his protection to the sisters and the hospital, but he also made certain that the hospital and its staff would be protected in the future.

The innovations concerning the hospital mid-century were incredibly significant. Just before 1250 the hospital received funds to rebuild through papal indulgences and privileges. In addition, donations from townspeople, laymen and women, nearby religious organizations, and local members of the community increased with such speed that Innocent IV needed to reapprove and confirm privileges. The wide distribution of

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109 “…Devotionis vestre precibus inclinati ut possessiones et alia bona mobilia et immobilia, exceptis feudalibus, que personas sororum, ad domum vestram, mondi relictam vanitate, volantum et professionem facientiam in eadem, si remansissent in seculo, ratione successionis vel quocumque alio justo titulo contigissent, petere, recipere ac retinere libere valeatis, vobis auctoritate presentium indulgemus…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 67, p. 97.
110 Ibid.
religious figures included in the confirmation spoke to the growing fame and importance of the hospital. Finally, the papacy played such an extensive role in the hospital that intervention by the local bishops became superfluous. Thus, by c. 1250 the hospital of Saint John was fully established. What followed was the beginning of a new era. The mood and the content of the privileges issued by the papacy would begin to change. Less intervention would come from the bishops of Cambrai, while issuances by the hospital itself emerged and grew significantly.

The Beginning of a New Era: From Papal and Episcopal Support to Growing Autonomy

It was not a coincidence that the first grant to have come from within the hospital itself occurred rather late in the hospital’s foundational period (September 1248), or in another view, early in the hospital’s autonomous phase. The first fifty years of the thirteenth century were marked by papal and episcopal intervention in and oversight over the hospital’s affairs. Most of the interventions included the granting of both customary and special privileges needed for the growth of a nascent institution. The papacy granted exemptions from certain roles held by religious institutions, local bishops provided the structure for the institution, and the local duke and lesser nobles supplied the financial and political support for the creation of the hospital. In addition, neighboring religious organizations supported the hospital via land transfers, and the town population donated lands and money where they could. If these were not actions of that created a proto-healthcare system, it hard to say what would be.

What is missing from this picture is the hospital itself as an actor in its own story. It was only after the foundational period that the hospital could function on its own, and it
was only during the last fifty years of the thirteenth century we detect an increase in autonomy on the part of the hospital. The hospital brothers, sisters, and even the lesser mistress\textsuperscript{111} became prominent figures in the administration of the hospital. Their roles, however, were not separate from those of the papacy and episcopacy. This section explores the documents issued from the hospital and from certain religious figures between 1248 and 1300 surveying the growth of the hospital from an infant institution to an autonomous organization. The development of the hospital as an autonomous institution and its efforts to combat sickness and poverty in one town may prove to be the answer to the development of a centralized healthcare system.

The first charter in the autonomous phase was administered in September 1248 by the hospital’s magistra, Ide, and was in relation to disputed lands. Ide proved that lands reclaimed from Sophie of Coudenberg (Sophia de Frigido Monte) by Gertrude Schalie (Gertrude de Obbruxella) were part of an allodium belonging to the hospital.\textsuperscript{112} The witness list included was extensive.\textsuperscript{113}

\textsuperscript{111} A letter that detailed the transfer of the municipal hospital in Louvain to its current location also mentions that the municipal hospital “was served by both brothers and sisters (fratres ac sorores). The sisters may have been the more numerous and important, for the administration of the hospital was confided to one of them, the mistress or mother (magistra, moeder van het gasthuis).” Marx, The Development of Charity in Medieval Louvain, 28. A similar situation occurred in Brussels.

\textsuperscript{112} Bonenfant explains the providence of both women’s names in on Cartulaire de l’Hôpital Saint-Jean, SJ 73, pps. 104-105, fn 1-2.

\textsuperscript{113} “…Henricus, filius quondam Beatricis, Stephanus, dictus Ludo, Walterus de Berghen, dictus Longus, Henricus de Mere de Stertbeke, Ingelbertus de Speculo, Juvenalis de A et Adam de Wolue, scabini de Huclo, Henricus de Campenhout, Gosuinus, presbyter, capellanus dicti hospitalis, Gilbertus, Johannes de Linkenbeke, Johannes de Foresto, Gerardus Ekart, Hugo Moor, Adam de Obbruxella, Johannes, dictus van den Vorde, et Willelmus de Cutcenghem et plures alii…” Cartulaire de l’Hôpital Saint-Jean, SJ 73, pps. 104-105. Henricus de Mere de Stertbeke served as a witness to an earlier charter (1 February 1229) associated with the hospital, Duke Henry I, the monastery of Ninove, and Arnoul of Meyes. See chapter five. In the earlier charter he appeared as “Heinemanni de Stertbeca,” Heineman de Sterrebeek, or Henri II de Sterrebeek. He also was listed in other places as Henri de Mere de Sterrebeek. Cartulaire de l’Hôpital Saint-Jean, SJ 73, p. 106, fn 1. Cartulaire de l’Hôpital Saint-Jean, SJ 34, p. 58, fn 7. See also Wauters, Histoire de l’église en Belgique, t. III, pg. 176. Wauters explains that Henri had been an alderman of Uccle
Ide clearly issued the charter to exercise the hospital’s rights to the land, a right she had received from Pope Innocent IV. Walter John Marx claimed that for the municipal hospital in Louvain the appearance of women in the charters indicated their importance and power.\(^{114}\) This argument could be extended to the case of the women at the hospital of Saint John. Ide’s grant argued that lands or goods given to the sisters could not be revoked.\(^{115}\) While this is clearly an important aspect to the history of the hospital, Ide and the office of the *magistra* have been neglected in previous studies. Paul Evrard, for example, explained in his study that little by little, the original community evolved from one that was dominated by the sisters to one that was dominated by the brothers and the priests.\(^{116}\) While this is a valid assertion, the simple fact glosses over the history of women involved in the hospital.

Clearly, Ide was powerful and important officer of the hospital. Ide’s successful claim required the support of the community to affirm and enforce. The fact that the community was willing to aid her speaks to the importance of both the hospital and the sisters. There was certainly a community ethos at work, but there was also a growing autonomy on the part of the hospital itself. As the hospital’s power and holdings increased, the mistress became determined to maintain the institution’s holdings, especially after the 1248 dispute.

\(^{114}\) See Marx, *The Development of Charity in Medieval Louvain*, 29.
\(^{115}\) Ibid.
On 6 July 1249 Ide and the sisters of the hospital appeared again in the charters, along with the dean of the chapter of Sainte-Gudule, Godfrey. The charter, presented before the episcopal court of Cambrai, recorded an arbitration over a disagreement between the hospital and the cathedral chapter of Sainte-Gudule. The disagreement dealt with the subject of oblations originating from the funerals that occurred at the chapel of the hospital, as well as daily oblations and funerals of the brothers, the sisters, and the sick that occurred in the same chapel.\footnote{117} The knight, Everkoy, Henrici Beatricis, and Johannis Clivere, both aldermen in Brussels, and the headmaster of the hospital all witnessed the arbitration.\footnote{118} On 9 August 1249 the sentence of arbitrations regarding the 6 July dispute was settled. In the sentence, ten arbitrations were set forth in regards to the hospital, the brothers, and the sisters. While several of the arbitrations addressed both the brothers and sisters, many others only addressed the sisters and specifically the lesser mistress.

The first point agreed upon in the arbitration was that if the people of the town of Brussels chose to be buried at Saint John’s and did not have the right to be buried there, they were not permitted to do so unless they obtained that right from the cathedral chapter. Having attained, however, authorization previously granted by the chapter

\footnote{117} \textit{...Noverit universitas vestra quod cum inter nos in curia Cameracensi super possessione oblationum provenientium ex funeribus eorum qui ad sanctum Johannem suam eligebant sepulturam controversia vertetur, posset etiam inter nos super oblationibus cotidianis offerendis ad eandem capellam, maxime cum nos, magistra et sorores, dicamus eas nos habere ad firmam perpetuam a capitulo supradicto et super oblationibus offerendis in funeribus fratrum, sororum et infirmorum nostrorum, quas nos decanus et capitulum dicimus ad nos de jure pertinere, oriri controversia, nos omnem controversie occasionem a nobis amovere cupientes pro bono pacis inter nos conser[van]do,...”} Cartulaire de l’Hôpital Saint-Jean, SJ 74, pps. 106-108. CPAS, SJ 4, fol. 15. 

\footnote{118} Ibid.

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regarding funeral offerings, the dean and the chapter would gain the offerings from the service unless it was declared of equivalent value of the offering recompensed. In the second point regarding the offerings declared of the chapel, the lesser mistress and sisters were exepted from the offerings of the funerals previously mentioned in association with lesser distinguished observances, namely Christmas, Easter, Pentecost, and All Saints’ Day; they would be considered in lasting perpetuity to the chapter for twelve solidis of Brussels. In addition, the mistress and the sisters would be released from the chapter each year in future Pentecosts from the previously mentioned offerings.

Likewise, if one was to present an offering to the chapel, it would remain in the hands of the lesser mistress and the sisters, as well as the chaplain of said chapel. Not yet, however, would it be proclaimed in common. The arbitration also allowed the mistress and sisters, the brothers and the sisters, families previously mentioned, and the sick to be buried in its [Saint John’s] cemetery, while the last four sentences concerned candles and offerings presented at those funerals. In the concluding sentences of the settlement, the original witnesses reemerged: Everkoius, knight, Henricus, son of Beatricis, and Johannes, called Clivere, who were aldermen of Brussels.

In discussing these two documents, one must realize that the disputes between the hospital, the hospital sisters in particular, and the chapter of Sainte-Gudule only occurred

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120 Cartulaire de l’Hôpital Saint-Jean, SJ 75, p. 110.
122 Cartulaire de l’Hôpital Saint-Jean, SJ 75, p. 110.
123 Cartulaire de l’Hôpital Saint-Jean, SJ 75, p. 111.
124 Ibid.
125 Ibid.
126 Ibid.
because Saint John’s hospital had acquired a chapel beginning in 1226 and a cemetery in 1238. Shortly after the hospital was granted the cemetery, Bishop Gui I had reconfirmed Sainte-Gudule’s jurisdiction in the hospital, perhaps to relax some of the tensions that arose between the two institutions and their accompanying members. Later in 1242, however, Gui I had revoked a ruling that he had made earlier that concerned both the hospital and the chapter of Sainte-Gudule, although it is not clear what ruling that was. From this ruling, which lessened the brothers’ and sisters’ burdens, the hospital went forth independently from Sainte-Gudule, allowing for the possibility of conflict with the local cathedral chapter. The addition of the cemetery and the chapel, along with the special status of the bishops in the hospital, drew Saint John’s into conflict with the cathedral chapter. While the hospital did have to have permission to establish a chapel, consent did not always guarantee amicable relations. This was certainly the case with the hospital of Saint John and the cathedral chapter of Sainte-Gudule. The conflict was serious enough that it went before the episcopal court of Cambrai.

After the 6 July 1249 arbitration it seems, at least for the time being, that the chapter of Sainte-Gudule had won out. While events had quieted between the two parties, another issue was arising concerning the sisters of the hospital of Saint John’s and especially the lesser mistress. Two arbitrations in particular suggest that the sisters might have been stirring up trouble but that they were also seeking to redress a loss of power. The final ruling, however, seemed to have stifled rather than increased the women’s power.

127 See, Cartulaire de l’Hôpital Saint-Jean, SJ 55, p. 82. Also, see above.
128 See Cartulaire de l’Hôpital Saint-Jean, SJ 60, pps. 87-88. CPAS, SJ 4, fol. 14. Also, see above.
On 18 November 1253 a dispute arose that involved Gérard II, the abbot of the monastery of Saint-Sépulcre of Cambrai, the patron and the parish priest of the church of Notre-Dame de la Chapelle on one part, and Ide, the lesser mistress, the brothers, and the sisters of the hospital of Saint John on the other part. The subject of the charter was the exercising of parishioner rights for those persons living in the part of the parish of the church of Notre-Dame de la Chapelle, which was within the enclosure belonging to the hospital. The dispute determined to where offerings of denariis and candelis went and also determined matters of Christian burial.

In addition to the funeral rights that the hospital would receive according to the settlement, the charter would also restructure the hospital’s jurisdiction, splitting it between the first and second city walls. While the hospital itself would remain within the first city walls, the church of Notre-Dame would be located outside those walls. The placement of the hospital’s jurisdiction inside the first city walls positioned the hospital at

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129 Gérard II had previously been a prévôt of the church of Notre-Dame de la Chapelle, which helps to explain his involvement in the affair. See Cartulaire de l’Hôpital Saint-Jean, SJ 86, p. 124, fn 1.

130 In 1210, Notre-Dame de la Chapelle was established in the parish by an accord reached between the abbot of Saint-Sépulcre and the chapter of Sainte-Gudule. See de Maisières, Eglises Gothiques de Bruxelles, 13. The involvement of the cathedral chapter in the creation of Notre-Dame de la Chapelle would help to explain its later involvement over arguments of jurisdiction with Saint John’s hospital.

131 “…Noverit universitas vestra quod, cum quaedam particula parrochie de Capella infra septa hospitalis sancti Johannis sit sita et super oblationibus oblatis in funeribus quorundam commorantium infra predictam particulam inter nos in curia Cameracensi controversia verteretur, nos, omnum controversie occasionem de nobis volentes amovere et bonum pacis inter nos conservare, de consilio proborum, talem inter nos fecimus ordinationem, utilitate ecclesiarii nostrarum considerata diligentiarum in eadem: quod illi, qui in posterum habitu dicti hospitalis sibi non assumpto infra predictam particulam in habitu seculari manebunt, tenebantur peccata sua presbytero de Capella confiteri nisi ea alias confiteantur de ipsius licentia speciali; oblationes suas in quatuor majoribus solemnmitatibus videlicet in solemnmitate Omnium Sanctorum, Natalis Domini, Pascha et Pentecostes, unoquoe anno facere ad altare ecclesie de Capella supradicte; jura christianitatis recipere a presbytero memorato et infra cimiterium dicte Capelle, nisi alias, salvo jure parrochiali, suam elegerint sepulturem, sepeliri; et oblationes que in funeribus eorum offerentur, tam in denariis quam in candelis, penes nos, abbatem sancti Sepulcri, conventum ejusdem loci et presbyterum de Capella, remanebunt tanguam nostre, eo nobis non obstante quod predicti habitationes dicte particule infra septa dicti hospitalis suas habuerint masiones…” Cartulaire de l’Hôpital Saint-Jean, SJ 86, pps. 123-125. The original is lost.

132 In addition to the charter, see Jacobs, “Plutôt vaste, l’ancien hospital Saint-Jean.”
the hub of the city’s political, religious, and economic affairs. While the split may indicate a loss of property to some extent, the relocation of the hospital’s jurisdiction solidified its importance to the city center. Each party agreed to uphold their divisions as granted by the charter, and the charter was witnessed, in addition to the involved parties, by the aldermen Everwini, knight, Henrici Beatricis, and Johannis dicti Cliever.\textsuperscript{133}

While the hospital was growing during this period due to the addition of a cemetery, several religious privileges, and even physical expansion, it was also butting up against the jurisdiction of other religious institutions. As with the chapter of Sainte-Gudule, the church of Notre-Dame de la Chapelle sought to reclaim its rights from Saint John’s. Although the dispute did not require the assistance of the court of Cambrai, it was still severe enough to require the involvement of several members of local and religious community. Many of the personalities present at previous disputes appeared again: Ide, the lesser mistress, and the above-named three witnesses. Ide, in this case, may have been the antagonist or she may have been attempting to salvage the hospital’s lost rights. Without further documentation, it is hard to say. As for the three witnesses, their involvement in the three different affairs points to their importance as members of both the community of Brussels. Finally, the hospital, in expanding, was dealing with the issues of urban crisis. While they were providing relief to some, they were also hindering others, bringing the hospital into a seeming conflict with some of the most important religious institutions of the area.

Several years passed before the hospital appeared in anymore outside affairs. During this time, Pope Alexander IV (1254-61) and papal legate Pierre Capocci were both involved in the hospital, and after their involvement the hospital grew even more in power and jurisdiction. While seven documents were all issued during the pontificate of Alexander IV, the pope was only directly responsible for one of those bulls. The rest of the charters were issued by cardinal legate Pierre Capocci. Pierre was intimately involved in both religious and political matters of the Low Countries, especially during 1254 when he returned to the area after reconciling some political and religious matters in Germany.\(^{134}\) The first three of his charters were issued in Anvers and all were produced within three days of the first (25-28 August 1254). The last issuance by Pierre came from Liège and occurred 20 November 1254. All but two of the letters bear the name of \textit{Magister Nich[olaus] Metensis} in some form.\(^{135}\)

In the first two documents, Pierre granted indulgences that would allow for the institution’s reconstruction. The charter gave the brothers and the sisters of the hospital of Saint John the ability to hold for the sick past letters collected.\(^{136}\) Two days later, Pierre issued another document, which accorded thirty days of indulgences to those who

\(^{134}\) De Moreau, \textit{Histoire de l’église en Belgique}, t. III, 316. It was during this time that supposedly Pierre negotiated a reconciliation between Guillaume of Holland and Marguerite of Flanders. See de Moreau, \textit{Histoire de l’église en Belgique}, t. III, 316.

\(^{135}\) Some of the charters contain the full first or last name, and some only contain the initials N. M. Documents numbered 92 and 95 do not have the name included. See, \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 90-95, pps. 128-135.

\(^{136}\) “…\textit{Devotionis vestre precibus inclinati, ut d[e cape]lla sancti Johannis Bruxellensis, Cameracensis diocesis, cujus ad vos colla[ti]o per[t]hore d[icitu]r, per litteras nostras impetrates, per quas non sit jus alicui acquisitum, vel [e]t[ia]m impetrandas, que de presentibus plenam et expressam non fecerint mentionem, nemini t[eneamin]i pro[v]i[dere, auctoritate vobis presentium indulgemus…”} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 90, p. 129. CPAS, SJ 4, fol. 17. I am assuming that the types of letters to which Pierre was referring were letters of indulgences held by the chapel on behalf of the ill. The original document does not give better clarification. The word used is simply \textit{litteras}; “…\textit{per litteras nostras impetratas…”} See \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 90, p. 129. CPAS, SJ 4, fol. 17.
made donations to the mistress, the brothers, or the sisters\textsuperscript{137} for the reconstruction of the hospital.\textsuperscript{138} The Latin describes the hospital as having been newly planted (\textit{quod est novella plantatio}),\textsuperscript{139} and the charter offers indulgences to those who would help in the construction of the new hospital.\textsuperscript{140}

Also, on 27 August 1254 Pierre confirmed Guillaume of Ledebergh’s previous foundation made for the hospital.\textsuperscript{141} This charter authenticated the original 27 January 1225 charter issued by Godfrey, the Bishop of Cambrai, who had “delegated his powers to Gautier, dean of Hal canon of Cambrai, for the erection of the \textit{chapellenie}.”\textsuperscript{142} Pierre’s charter was completed in the memory of Bishop Godfrey (\textit{bone memoire G[odefroid]}),\textsuperscript{143} and his reconfirmation was at the behest of the brothers, sisters, and the mistress of the hospital.\textsuperscript{144} Finally, Pierre placed the eulogist of Brussels in charge of upholding their rights.\textsuperscript{145} Overall, the chapel was crucial to the later success and growth of the hospital, and it certainly points to the growing autonomy of the institution. From this point

\textsuperscript{137}“…\textit{Cum itaque, sicut dilecti in Christo magistra, frater et sorores hospitalis sancti Johannis Baptiste Bruxellensis, Cameracensis diocesis, sua nobis petione monstrarunt…” Cartulaire de l’Hôpital Saint-Jean, SJ 91, p. 130. CPAS, SJ 4, fol. 18.
\textsuperscript{138}“…\textit{idem hospitale ipsum, quod est novella plantatio,inceperint edificare de novo opera sumptuoso, ad quod proprie non suppeterint facultates, universitatem vestram rogamus et hortamur in Domino, in remissionem vobis peccaminum injungentes, quatinus, de bonis Deo Vobis collatis, pias elemosinas et grata eis caritatis subsidia erogatis ut, per subventionem vestram adjuti, dictum opus valeant consumare…” Cartulaire, SJ 91, p. 130. CPAS, SJ 4, fol. 18.
\textsuperscript{139}Ibid.
\textsuperscript{140}Ibid.
\textsuperscript{141}Cartulaire de l’Hôpital Saint-Jean, SJ 92, p. 131. The original is lost. Also, see chapter five for more information on Guillaume and this transfer.
\textsuperscript{142}Cartulaire de l’Hôpital Saint-Jean, SJ 23, p. 41. The original is lost.
\textsuperscript{143}Cartulaire de l’Hôpital Saint-Jean, SJ 92, p. 131.
\textsuperscript{144}“…\textit{fratrum et sororum hospitalis sancti Johannis Baptiste Bruxellensis…” Cartulaire de l’Hôpital Saint-Jean, SJ 92, p. 131.
\textsuperscript{145}“Petrus, miseratione divina sancti Georgii ad Velum aureum dyaconus cardinalis, apostolic sedis legatus, discreto viro cantori Bruxellensi, Cameracensis diocesis, salutem in Domino…” Cartulaire de l’Hôpital Saint-Jean, SJ 92, p. 131.
forward, the hospital seems to have functioned more independently, both religiously and administratively.\footnote{Bonenfant has identified that most hospitals experienced a period of efflorescence or reinvention. Yet, he is not entirely clear on where he is placing the efflorescence of the hospital of Saint John. In the paragraph in which Bonenfant discusses the efflorescence of Saint John he also discusses the efflorescence of several other nearby hospitals and the dates that the reinventions occurred. Included are Louvain in 1233, Ypres in 1235, the leprosarium in Brussels in 1250, Saint-John’s (with no date given), Saint-Pierre (also with no date given) and Bruges in 1290. For more on this discussion in Bonenfant, see Bonenfant, D’Histoire des Hôpitaux, 24.}

One day later on 28 August 1254, Pierre issued two more charters that complemented each other. Similar to the document released three days earlier, the later charter allowed the brothers and sisters to collect letters of indulgence and to hold them for the sick.\footnote{“…Devotionis vestre precibus inclinati, vobis auctoritate presentium indulgemus quod per litteras nostras [im]petratas, per quas non sit ad citationem processum, vel etiam impetrandas, non facientes plenam et expressam de verbo ad verbum de presentibus menti[o]nem, [a]ttrah[i] ad [judicium] comuniter non possitis, quamdiu fuerint coram ordinario [vestro] exibere justitie complementum…” Cartulaire de l’Hôpital Saint-Jean, SJ 93, p. 133. CPAS, SJ 4, fol. 19.} That same day Pierre ordered the dean of the Church of Louvain to uphold the privileges granted to both the brothers and sisters regarding the collection of letters as prescribed in the above-described document.\footnote{“…Dilectorum in Christo magistri, fratrum et sororum hospitalis sancti Johannis in Bruxella, Cameracensis dieocesis, precibus inclinati, eis auctoritate litterarum nostrarum duximus indulgendum quod per litteras nostras impetratas, per quas non sit ad citationem processum, vel etiam impetrandas, non facientes plenam et expressam de verbo ad verbum de nostris litteris mentionem, [tr]ahi comuniter ad judicium mi[nime] possint, quamdiu parati fuerint coram eorum ordinario de ipsis conquerentiis [ex]hibere justitie complementum…” Cartulaire de l’Hôpital Saint-Jean, SJ 94, p. 134. CPAS, SJ 4, fol. 16.} Finally, from Liège on 20 November 1254, Pierre granted the mistress, brothers, and sisters of the hospital the ability to collect 40 livres of common money.\footnote{“…Devotionis vestre precibus inclinati, presentium vobis auctoritate concedimus ut in dyocesi Cameracensi de inventis et aliis male acquisitis, quorum veri domini inventiri non possunt, usque ad quadraginta libras usualis monete, prosustentatione degentium in hospitali vestro, libere recipere valeatis…” Cartulaire de l’Hôpital Saint-Jean, SJ 95, p. 134-5. The original is lost.}

A short time later in 1255, Pope Alexander IV issued his final known document concerning the hospital. From the Lateran on 3 December, he granted the mistress and
the sisters of the hospital the right that had not been charged of “pains d’abbayes” by the Apostolic See or by its legates, if it had not been mentioned in the previous concession.

The special mandate was probably referring to Pierre’s last known document as cited above. While Alexander IV’s concern with the hospital in general is exemplified through the many privileges granted by his legate in 1254, the issuance to only the sisters and the mistress in 1255 may point to Alexander’s special interest in the hospital’s sisters.

By June of 1260, the hospital was back to protecting its interests in another sentence arbitration that again included the mistress, brothers, and sisters of the hospital, as well as brother Rasonem, parish priest of Pamele and canon of Ninove. According to the arbitration, Saint John’s hospital, under the reserve of payment to the presbytery of Pamele of one annual fee of four muids and one-half of rye and of oats, held rights to new dîmes in the part of the parish where the institution already drew from an older dîme. The agreement may have come from previous amicable ties to the monastery of Ninove.

Another issue arose on 4 February 1261, when Gérard, the house instructor (preceptor domorum) of the Knights Templar of Brabant and of Hesbaye, declared that the hospital of Saint John and the lesser mistress, brothers, and sisters give him

150 “…Quietati et tranquillitati vestre paterna volentes in posterum sollicitudine ptro[v]i[dere], auctoritate vobis presentium indulgemus ut [ad sustent]ationem vel provisionem alicujus in pensionibus vel beneficiis ecclesiasticis compelli non possitis per litteras apostolice sedis seu legatoris ejusdem, absque ipsius sedis speciali mandato, faciente plenam et expressam de indulto hujusmodi mentionem…” Cartulaire de l’Hôpital Saint-Jean, SJ 96, p. 135. CPAS, SJ 4, fol. 8.

151 Cartulaire de l’Hôpital Saint-Jean, SJ 108, p. 147. CPAS, SJ 43, fol. 28.

satisfaction in regards to the subject of the fief of Elisabeth, daughter of Godfrey Onin of Saint-Gilles, held by the duke and who was to receive the allodium of the brothers and sisters of the hospital. Later in 1262 sometime before 24 June the matter was again revisited by Godfrey’s widow. This time, the sentence arbitration concerned the subject of the fonds of Nieuwmolen and of the lands situated in proximity of Obbrussel.

*Henricus Beatricis* and *Johannes Clive[re]* both witnessed the act.

Disagreements resumed when later that same year and month the hospital of Saint John and Gertrude Schalie divided up in agreement the hereditary successions of Godfrey Onin, Gertrude’s father. The accord between the two specified exactly to whom what items went. *Henricus, filius quondam Beatricis*, and *Johannes Clivere* again served as witnesses in addition to *Johannes de Senna*, an alderman of Brussels. While the accord was settled and while the hospital did gain some new lands, in some ways Gertrude lost out again when she was forced to split her share with the hospital. Yet, all three

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153 Godfrey was the father of Gertrude Schalie. See above for more on Gertrude. *Cartulaire de l’Hôpital Saint-Jean*, SJ 109, p. 149, fn 2.

154 “…Noverint universi presentes litteras inspecturi quod magistra, fratres et sorores hospitalis beati Johannis in Bruxella de feodo et homagio, que tenuit Elizabeth filia quondam Godefridi de Obbruxella a domino duce, predictis magistre, fratribus et sororibus in allodium transmutata, nobis satisfecerunt et nos eisdem magistre, fratribus et sororibus omnes jus et omnem actionem, que in dictis feodo et homagio habebamus per conventiones inter nos habitas, acquitavimus et acquitamus…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 109, p. 149. CPAS, SJ 44, fol. 2.


156 Notum sit universis presens scriptum inspecturis quod Gertrudis, quondam Godefridi, ex una parte, et hospitale beati Johannis in Bruxella, ex altera, super bonis que fuerunt ipsius Godefridi de communi volutante sua rectam et legitimam fecerunt partificationem...” The list of divisions is long. For more, see *Cartulaire de l’Hôpital Saint-Jean*, SJ 112, pps. 153-154. CPAS, SJ 44, fol. 4.

157 Later, on 10 June 1266, Gertrude would recognize that the hospital of Saint John had sold to her certain holdings that produced incomes that were part of her inheritance: “…Noveritis quod Gertrudis, quondam Godefridi, coram nobis constituta, recognovit hospitale beati Johannis in Bruxella erga ipsam emisse de bonis, que cesserunt eidem Gertrudis in portionem s[ua]m, hec bona...” *Cartulaire de l’Hôpital Saint-Jean*, p. 296
arbitrations demonstrate the growing holdings of the hospital, as well as its increased autonomy and power to engage in disputes regarding the hospital’s holdings.

By May of 1264, the hospital moved on to different agreements with other members of the community, but sister Ide was still present in the dealings. During that time, the hospital of Saint John, the lesser mistress Ide, the brothers, and the sisters took up several engagements with Guillaume of Ruysbroeck and his wife Béatrix, to whom they had ceded their rights and goods near Leeuw-Saint-Pierre.\textsuperscript{158} The land was held by Henrico of Gazebeke, his son, and in memory of his lord, Godfrey of Louvain.\textsuperscript{159} Ide was probably present in the decision and may have even have had a voice within the hospital’s administration.

In the meantime, one charter was issued by a bishop outside of diocese of Cambrai, and it was issued on 31 May 1268 from within Brussels. The Bishop of

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\textsuperscript{159} This act may have been in relation to an earlier charter that was issued on 12 May 1256 by Marie, wife of Godfrey of Louvain, and Henry of Louvain, Godfrey’s son. See Cartulaire de l’Hôpital Saint-Jean, SJ, p. 137. The original is lost.

297
Chiemsee, Henri de Lützelburg, granted the charter. Henri was the Bishop of Chiemsee from 13 February 1263 until his death in 1273. Before becoming Bishop of Chiemsee, Henri had been the Bishop of Semgallen; he was also a member of the Ordo Fratrum Minorum. In regards to the issuance to Saint John’s hospital, Henri allowed for forty days of indulgences and remission of sins to the benefactors of both the hospital of Saint John and the church attached to it. While the charter was not enacted by the bishop of Cambrai, the current bishop of Cambrai, Nicholas II de Fontaine-l’Évêque (Bishop since 9 April 1249 until his death in 1273), served as a witness to the charter.

Why, one must ask, was a Franciscan brother and bishop from Germany in Brussels, and why was he allowing for indulgences to be granted to this institution? While there is no immediate or known explanation, the intervention on behalf of the mendicant points to several possible developments. First, the hospital once again serves as a microcosm of greater development in Brussels, Cambrai, and Christendom. The development of the mendicant as a religious order coincides with developments of the

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160 See Cartulaire de l’Hôpital Saint-Jean, p. 179, fn 1. Chiemsee is located in Germany. The bishop had journeyed to Brussels where he allowed the indulgences. This may be important, and it certainly shows an exchange of ideas. Indeed, Bonenfant, in his footnotes, faults a study on the bishop Henri by Eubel, who may have been unaware of Henri’s trip to Brussels. See Eubel, Der Minorit Heinrich von Lützelburg, Bischof von Semgallen, Curland und Chiemsee, In Historisches Jahrbuch, t. VI (1885), pp. 92-103.

161 Cartulaire de l’Hôpital Saint-Jean, SJ 135, p. 179. CPAS, SJ 4, fol. 20.

162 “…Cum igitur domus hospitalis in Brussella, in honore beati Johannis constructa, defectus plurimos patiatur et nisi fidelium elemosinis adjuvetur, minime v[a]e sustenri, universitatem vestram in Domino rogandum ducimus et monendam atque in remission[et] peccatorum, quatinus, de bonis a Deo vobis collatis, pias elemosinas et grata subsidia dicto [hospitali…] mini impartiri ut per hec et alia bona, que, Domino inspirante, feceritis, ad eternae possitis [felicitatis] gaudia pervenire…” Cartulaire de l’Hôpital Saint-Jean, SJ 135, p. 179. CPAS, SJ 4, fol. 20.


164 Cartulaire de l’Hôpital Saint-Jean, SJ 135, p. 179.
hospital itself. As the new monastic groups grew, so did the hospital, the hospital’s autonomy, and the hospital’s importance to other lay members of the community. In addition, the issuance echoed Pierre Capocci’s grant for the collection of indulgences for the reconstruction of the hospital, yet it expanded the network with which the hospital was associated.

These facts proved to be true as the hospital continued to expand throughout the end of the century with several new acquisitions. In November 1268, the hospital of Saint John acquired from Jean van den Berg (Johannem de Monte), son of Gérard, a bonnier of land situated in parish of Goyck and another half of a bonnier in the location that was designated as Ter Scept. The charter asserted that the bonnier of land would be conveyed and relinquished to the hospital in return for payment of an annual census of one muid of rye equal to one-sixteenth denarium for the sale cloth at the hospital.¹⁶⁵ Less than a year later on 24 September 1269 the hospital of Saint John bought lands from Henry of Groenbeka, a knight, for an annual rent of three livres three deniers of Brussels. Henry received in security three bannières from a fief near Assche, for which the hospital

¹⁶⁵ “...Noveritis quod hospitale beati Johannis Baptiste in Bruxella acquisivit per legem et judicium erga Johannem de Monte, filium Gerardi, unum bonarium terre sitæ in parrochia de Goyke, cujus dimidium bonarium jacet inter Rusbruch et Macharium de Goyke et aliud dimidium in loco qui dicitur Ter Scept supra culturam juxta Widengat. Dictum autem bonarium terre contulit et concessit dictum hospitale dicto Johanni hereditarie possidendum et tenendum annuatim pro uno modio siliginis de meliori, juxta denarium in sextario, dicto hospitali in festo sancti Bavonis deliberando, ad pannum lineum ipsius hospitalis pertinentem...” Cartulaire de l’Hôpital Saint-Jean, SJ 137, p. 180-181. The original is lost. This may have been akin to a hospital practice that occurred at Louvain. We know that “during the reign of Henry I (1190-1235), the duke ceded the hospital the product of the station in the Cloth Hall rented by Amelricus de Novo Puteo, in compensation for the cens of six solidi, four denarii, four capones, which the hospital possessed on the part of the land upon which the Cloth Hall was to be constructed.” A similar scenario may have occurred at Saint John’s. Marx, The Development of Charity in Medieval Louvain, 27. Also, Marx explains that “capo, etymologically the same as the English ‘capon’. While having its modern meaning in the Middle Ages, at times it was also used to denote a small coin valused at six or twelve denarii.” Marx, The Development of Charity in Medieval Louvain, fn. 3, 27.
would pay Henry an annual census of three *deniers* on the *festum beati Stephani.* In addition to the hospital’s representatives and Henry, brother *Gerardus de Coudenberghe,* was also mentioned in the charter.

Two more years passed before the hospital acquired any more addition holdings. Sometime in October of 1271, though, a cleric, Henry of Wanghe, placed the hospital of Saint John’s in possession of a *bonnier* of land in two parcels, which was to be for the profit of the sick. The land was situated at Ternath and held in census of Sainte-Gertrude of Nivelles; it had been ceded to Henry by Baudouin of Dornent, after which Henry van den Bossche had renounced his rights on the land. Two months later on 3 December 1271, the dean of Sainte-Gudule, Jean Pipenpoy (r. 1267-1273), the knight Guillaume de Platea, and Gilles Lose all ceded to the hospital of Saint John eight *bonniers* of land located between Melsdal and Veerweide. The charter was witnessed by *Johannes de Platea et Godefridus de Pahuse,* aldermen.

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166 “...ad opus ejusdem hospitalis rite ac legitime secundum judicium nostrum emit, videlicet erga dominum Henricum de Groenbeke, militem, hunc annuum censum, scilicet tria trium librarum et trium denarius Bruxellensium quolibet anno, dictum censum ad Circoncisionem Domini ab eodem milite apud Bruxellam deliberandum et solvendum. Pro qua solutione census fideliter facienda et implenda, dictus miles in tria bonaria phoedi sui, intra parrochiam de Ascha in campo dicto Scoenarden siti, sub annuo censu tria trium denarium ad festum beati Stephani solvendorum, predictum fratrem nomine dicti hospitalis legitime, nobis presentibus, heredavit...” Cartulaire de l’Hôpital Saint-Jean, SJ 139, pps. 182-183. CPAS, SJ 35, fol. 50.


168 “...Quo facto, dictus Walterus, villicus, contulit dicto Henrico, cleric, bonarium terre antedictum, sub eo censu, qui inde exire tenetur, hereditarie a Sancta Gertrude de Nivella tenendum. Deinde dictus Henricus, clericus, adhersavit fratrem Gerardum hospitalis beati Johannis Bruxellensis, ad opus infirmorum ibidem, in dictum bonarium terre, per monitionem judicis et sententiam scabinorum, salvo dicto Henrico et Assele, matre sue, in dicto terre bonario usufructu suo...” Cartulaire de l’Hôpital Saint-Jean, SJ 147, pps. 190-191. The original is lost.

169 Bonenfant believes Gilles to have been listed by error since he did not appear in the records until sometime between 1298 and 1299.

170 “Notum sit universis quod dominus Johannes dictus Pipenpoi, decanus ecclesie beate Gudile Bruxellensis, dominus Willelmuus de Platea, miles, et Egidius dictus Lose, renuntiando contulerunt fratri
Finally, on 20 November 1272, the dean and the chapter of Sainte-Gudule, possibly Jean Pipenpoy, sold to Henry Coman of Capella the *fonds* of the house that he lived on and that constituted a census held by the hospital.\(^{173}\) A few days later (24 November 1272) the priest Henry of Beersel acknowledged to have sold to the hospital of Saint John a life annuity of ten *muids* of rye on the *dîme* of Leeuw-Saint-Pierre.\(^{174}\) The charter addressed the brothers and sisters of the hospital, as well as the lesser mistress, and the witnesses included *Henricus de Frigido Monte et Henricus Pyliser*, aldermen of Brussels. Based on these acquisitions alone, it is safe to assume that throughout the early 1270s the hospital continued to expand with little outside intervention, either from the papacy or the local episcopacy. Indeed, the hospital may have been able to expand simply because it lacked outside intervention. The lack of papal and episcopal protection, however, would have serious consequences.

Shortly after this expansion, the papacy reemerged in the history of the hospital when issuances came from Pope Gregory X (1271-1276) on 26 and 28 of January 1274.

}\(^{172}\)\(^{173}\)\(^{174}\)
Both bulls were written in Lyon, and both directly involved the mistress of the hospital and the sisters. In the first, Pope Gregory X confirmed, on behalf of the mistress and the sisters of the hospital, all the privileges that had been accorded to them and to the hospital by previous bishops (predecessoribus nostris Romanis pontificibus),\textsuperscript{175} reasserting the papacy’s continued support and concern for the institution. While there are clear relations between the pope and the hospital mistress in this document, the association becomes much clearer in a second document from 28 January 1274.

In the second bull, the pope, on the behest of the mistress of the hospital, who had made complaints on behalf of both the brothers and the sisters of hospital, ordered the dean of Saint-Pierre of Louvain (decano ecclesie Sancti Petri in Lovanio)\textsuperscript{176} to announce that all those who fraudulently assumed the holdings of the hospital owed restitution to the hospital and its members in a certain amount of time, which was guaranteed through the threat of excommunication.\textsuperscript{177} The threat of excommunication insured that the

\textsuperscript{175}“...Eapropter, dilecte in Domino filie, vestris justis postulationibus grato concurrentes assensu, omnes libertates et immunitates a predecess[oribus] nostris Romanis pontificibus sive per privilegia seu alias indulgentias vobis vel hospitali vestro concessas, necnon libertates et exemptiones secularium actionum a regibus et principibus vel aliis Christi fidelibus rationabiliter vobis seu hospitali predicto indultas, sicut eas juste ac pacifice optimetis, vobis et per vos eidem hospitali, autoritate apostolica confirmamus et presentis scripti patrocinio communimus...” Right after “communimus,” the charter transitions to what seems like a new phrase beginning with “Nulli.” Most of the other papal correspondences follow this pattern. There seems to be punctuation missing (at least in the modern cartulary) between “communimus” and “Nulli.” Since the original is lost, I am not able to check to see if it is missing in the cartulary or in the original document. Cartulaire de l’Hôpital Saint-Jean, SJ 157, p. 201. The original has been lost.


\textsuperscript{177}“...nobis significare curarunt quod nonnulli iniquitatis filii, quos prorsus ignorant, diversos redditus, census, terras, domos, vineas, ortos, possessiones, jura, jurisdictiones, instrumenta publica et quedam alia bona ipsius monasterii temere occultarunt et occulte detinere presumunt in animarum suarum periculum et dicti monasterii non modicum lesionem. Quare eidem magistra, fratres et sorores nobis humiliter supplicarunt ut per [litteras nostras eorum]dem ministerio super [ec apostolice]a sollicitudine curaremus. Ideoque discretioni tue per apostolica scripta mandamus quod omnes hujusmodi occultos detentores reddituum et aliorum predictorum, publice in ecclesiis coram populo, per te vel per alium moneas, ut post competenter terminum a te prefigendum eisdem, ea dictis magistre, fratribus et sororibus a se debita resituant et revelent. Alioqui in eos si, post alium terminum peremptorum competenter quem
holdings acquired by the hospital would stay in the possession of the hospital and assured the future success of the institution.

Furthermore, the growing power of the sisters and the mistress in the bull cannot be ignored, for it was not the brothers who petitioned the papacy for help but rather the sisters. In addition, while Gregory X did reconfirm privileges that had previously been granted to the hospital, a common act by the papacy, he also did not provide additional exemptions and rights. Rather, he dealt a threat of excommunication for those who would not restore to the hospital’s lands. The content of Gregory X’s bull and the warning he presented seems to indicate the seriousness surrounding the issue—the hospital needed additional protection as it grew.178

Shortly later, the hospital and the chapter of Sainte-Gudule entered into another disagreement. This time, a new issue arose on 11 April 1274 concerning the cemetery of the hospital. Alard, the abbot of Parc (r. 1239-1289) and a delegate of Saint-Siège,179 ordered the provost and the treasurer of Saint-Jacques-sur-Coudenberg, the ducal chapel, to respect the rights that the lesser mistress and the community of the hospital of Saint John had in regards to the burial of the sick who had died there.180 The issuance may

178 The content of the issuance also suggests that the pope may have been intervening with the absence of the episcopacy. Paul Evrard explains that the hospital found the protection of the papacy less necessary in 1274 because of heightened communal involvement. The bull seems to suggest otherwise. See Evrard, Formation, organization générale et état du domaine rural de l’hôpital Saint-Jean au Moyen-Âge 7.
179 For more information in another act related to Alard, see Cartulaire de l’Hôpital Saint-Jean, SJ 196, pps. 249-250. CPAS, SJ 34, fol. 23.
180 “...Ex gravi conquestione magistre et conventus hospitalis sancti Johannis Bruxellensis, ordinis sancti Augustini, Cameracensis dyocesis, ad nos pervenit quod quidam, qui nomen Domini in vacuum recipere non formidant, tam clerici quam laici, sue salutis immemores Deumque pre oculis non habentes, Dei timore postposito, super his, de quibus per plures annos et tempora retroacta (diu est) fuerunt in
have gone back to the 1255 issuance by Pope Alexander IV, which gave delegates of Saint-Siège power as representatives to the hospital.

The dispute continued into August of that same year when on 2 August 1274, Wibaud des Sarts, the archdeacon of Cambrai at Brussels, organized matters so that the dean of Christendom of Brussels, and Jean, parish priest of Hérinnes, could make a inquiry regarding the boundaries of the cemetery of Saint John, which was located in the enclosure of the hospital. Here, the archdeacon defended the established church rather than the hospital, and as a result the dispute pitted the hospital and the papacy against local religious institutions. The dispute, however, was only the beginning of troubles, and at a time when the hospital needed protection the bishop of Cambrai was no where to found. As had been the case throughout Europe, the absence of the bishop signaled the rise of the cathedral chapter. For Saint John’s a similar situation occurred.

On 8 August 1274, the issues that had occurred earlier related to offerings made at the church of Saint John’s hospital and the disagreement concerning the offerings made at the hospital chapel between the hospital sisters and the deans of Sainte-Gudule, crept up again. Fortunately, a plan of agreement between the dean and chapter of Sainte-

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possessione pacifica et quieta et esse consueverunt, ipsis magistre et conventui graves inferunt injurias et jacturas, prohibendo ne corpora fidelium pauperum in eodem hospitali decedentium in loco et cymiterio consueto, imfra immunitatem et clausuram dicti hospitalis consistente, prout consueverunt, valeant sepelire, metas, terminos seu limites imfra dictam clausuram ipsius hospitalis, libertatem it immunitatem infingendo, hiis et alii modis contra indultum privilegiorum, ipsis magistre et conventui a sede apostolica concessorum, nequiter ac temere veniendo in ipsorum magistre et conventus prejudicium non modicum, injuriam et jacturam...” Cartulaire de l’Hôpital Saint-Jean, SJ 159, pps. 203-204. CPAS, SJ 4, fol. 21.

181 “…Cum super terminis et finibus cimiterii beati Johannis Bruxellensis, consistentis in curte ejusdem hospitalis, dubitetur, vobis mandamus quatenus, personaliter accedentes ad dictum cymiterium vocatisque coram vobis senioribus et antiquioribus totius ville Bruxellensis, fines et terminos antiquos dicti cymiterii per ipsos decerni faciatis et quod per vos et ipsos factum fuerit super hiis, per censuram ecclesiasticam, si necesse fuerit, faciatis firmiter observari, ita quod in his exequendis alter vestrum alterum non exspectet...” Cartulaire de l’Hôpital Saint-Jean, SJ 161, pps. 205-206. The original is lost.
Gudule and the chaplain of the church of Saint John on one part and the lesser mistress of the community and the headmasters of the hospital on the other was finally reached.\textsuperscript{182} Included in the agreement was the promise that the lesser mistress and the community (\textit{conventus}) would promise to give payment to, each year perpetually as necessary, the chaplain officiating in the chapel of the blessed John [the Baptist]. The payment amounted to an annual imbursement of six \textit{libras Bruxellenses}. During the feast of the All Saints, the feast of the Blessed Virgin Mary, and the feast of the Nativity of the Blessed John the Baptist the chaplain was to receive forty \textit{solidos} for each ceremony.\textsuperscript{183}

In addition, the hospital mistress and convent were held responsible for other matters, such as the expense of a \textit{custode} who was both “competent and qualified.”\textsuperscript{184} The entire agreement was witnessed by the archdeacon, Wibaud of Sarts, the only archdeacon to appear in the extant documents as both a witness and a prime participant.\textsuperscript{185}

Overall, the agreement speaks specifically to the development of the roles of the sisters and the lesser mistress. It seems that although the chapter of Sainte-Gudule and the hospital had reached an agreement earlier, disputes continued to occur. This time, however, the disputes extended into the ranks of the hospital itself. Not only was the

\textsuperscript{183} “…Dicti magistra et conventus dabunt et persolverent et dare ac persolvere promiserunt singulis annis perpetue, tribus temporibus, capellano pro tempore in dicta ecclesia beati Johannis celebranti, nomine annue pensionis, sex libras Bruxellenses, in festo scilicet Omnium Sanctorum quadraginta solidos, in Purificatione beate Marie, virginis, quadraginta solidos, et in Nativitate beati Johannis Baptistse immediate sequente, quadraginta solidos…” Cartulaire de l’Hôpital Saint-Jean, SJ 162, p. 207. CPAS, SJ 4, fol. 22.
\textsuperscript{184} “…Et tenebuntur dicti magistra et conventus providere i[fn exp]ensis propriis dicto capellano de custode competenti et ydoneo…” Cartulaire de l’Hôpital Saint-Jean, SJ 162, p. 207. CPAS, SJ 4, fol. 22.
\textsuperscript{185} See also Cartulaire de l’Hôpital Saint-Jean, SJ 161, p. 205. The original is lost.
cathedral chapter upset but so too was the chaplain associated with the hospital. Since
the chapter of Sainte-Gudule oversaw all other functions of other chapels, it had a
responsibility to the hospital chapel, one that the sisters were clearly usurping. Without
the bishop to protect the hospital, the cathedral chapter stepped forward to reclaim their
lost rights.

Later that month, another agreement was reached between the dean of the chapter
of Sainte-Gudule and the chaplain of the church of Saint John on one part and the lesser
mistress of the community of the hospital of Saint John on the other. The subject again
focused on offerings made at the church. In fact, the original accord was used
extensively in the new agreement with only a few changes having been made in the
opening and concluding paragraphs. Later, however, a new provision was added in
regards to the conditions of interdict and the collection of fees, and to the last provision
was added the phrase, “hec autem ordinate sunt et condicita,” noting that the all the
arrangements had been agreed upon. The archdeacon, Wibaud of Sarts, again served
as a witness but not as a direct participant.

Little by little after 1274, as Paul Evrard predicted, the hospital community passed
from one that was dominated by the sisters to one that was dominated by the brothers and

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186 Only one change occurred in the opening paragraph, which was the addition of the words ipsius hospitalis and parte. See Cartulaire de l’Hôpital Saint-Jean, SJ 163, p. 208. The original is lost.
187 “...Nec est permittendum quod si dictam ecclesiam beati Johannis aliquo casu vel infortunio, quod absit fieri vel ponit contigerit sub interdicto et ipsum interdictum per mensem unum duraverit non amplius, dicto capellano nihil discomputabitur de summa sex librarum sibi promissa si vero plus duraverit, minus ei solvetur de summa prenotata pro rata temporis sibi discomputando...” Cartulaire de l’Hôpital Saint-Jean, SJ 163, p. 209.
188 “...Hec autem ordinate sunt et condicita salvis omnibus litteris, omnibus privilegiis, ordinationibus, consuetudinibus et munimentis dicti hospitalis seu etiam inter partes predictas habitis et confectis...” Cartulaire de l’Hôpital Saint-Jean, SJ 163, p. 209.
the priests.\textsuperscript{189} Even so, the abilities the sisters gained in the brief periods in which they were in the majority and the ways in which they made their voices heard cannot be ignored. While the mistress and the sisters of the community would appear less and less, other women would eventually appear in the documents. At least five issuances related to the hospital of Saint John came specifically from beguines or the local Beguinage.\textsuperscript{190}

In December 1274 Hedwige van der Maerct, \textit{becghina}, granted to the hospital of Saint John a \textit{bonnier} of land situated at Karreveld.\textsuperscript{191} Both \textit{Henricus dictus Wert et Johannes de Senna}, aldermen, served as witnesses. Only three months later in March 1275, the Infirmary of the Beguinage, \textit{begghinarum}, of the Virgin and Margareta, the mistress of the infirmary, ceded to the hospital of Saint John seven \textit{bonniers} of land situated in Heckensberch.\textsuperscript{192} Mentioned in the charter was Godescalc, the presbytery of the Beguinage. Godescalc appeared again later in October of 1277 when Elisabeth, the daughter of Englebert, brother of Éverwin Vos, a knight, ceded to the Infirmary of the Beguinage of the Virgin three \textit{bonniers} of land at Dieghem. The land, however, was

\textsuperscript{189} Evrard, “Formation, organization générale et état du domaine rural de l’hôpital Saint-Jean au Moyen-Âge,” 3.
\textsuperscript{190} See chart two and document numbers 165, 167, 187, and 263.
\textsuperscript{191} The document reads: “\textit{bonarium terre, prout situm est apud Karlevelt.}” Cartulaire de l’Hôpital Saint-Jean, SJ 165, pps. 210-211. CPAS, SJ 42 fol. 19. Hedwige also appeared in 1266 sometime before August. She is listed as the daughter of Francon van der Maerct, and in the charter she renounced to the profit of the hospital of Saint John a \textit{bonnier} of land located at Woluwe and held in census of Sainte-Gertrude of Nivelles. There is no indication that she was a beguine at this point. She was, however, probably of middling or upper class status given her ability to engage in land transfers. The document reads, “\textit{Notum sit universis quod Heilewidis, filia quondam Franconis de Foro, resignavit cum debita renuntiattione Johanni de Ossenhem, villico sancte Gertrudis Nivellensis, apud Woluwe, in loco dicto Putdale.}” Cartulaire de l’Hôpital Saint-Jean, SJ 125, pps. 167-168. CPAS, SJ 46, fol. 23.
\textsuperscript{192} “...adheredaverunt et adheredari procuraverent per legem et judicium hospitale beati Johannis in Bruxella in septem bonariis terre, parum plus vel minus, sitis in loco dicto Heckensberch...” Cartulaire de l’Hôpital Saint-Jean, SJ 167, p. 213. CPAS, SJ 46, fol. 26.
ceded under the condition that upon Elisabeth’s death, the beguinage would pay a perpetual and annual rent of ten *solidos* to the hospital of Saint John. Ide Scattinne, *beghina*, also transferred one-sixth of a *bonnier* of a meadowland that was located in Marais in Brussels on October 1279 to the hospital. Johannes de Platea and Mychael Leo, aldermen, both served as witnesses. Much later in 1296, the priest, Jean Koukaert, authorized Basilie de Platea, a beguine, to charge to the house that she inhabited an amount up to ten *librarum usualis monete* at the end of her will. Henricus Portere et Willelmus Pipenpoy, aldermen of Brussels, both witnessed the charter, which occurred on 23 November 1296. Finally, Marguerite of Uccle, *begina*, transferred for the benefit of Elisabeth Wassard, the widow of Jean Papen, a dyer (*tinctoris*) lands from property that she held *in domistadio* that were located next to the hospital of Saint John. The document was dated on 21 July 1299 *in vigilia* of the blessed Mary Magdalene.

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193 “*Noverint universi quod Elyzabet, filia Ingelberti, fratris domini Everwini, dicti Vulpis, militis, renuntiando contulit magistre infirmarie beghinarum de Vinea, ad opus ejusdem infirmarie tria bonaria terre, prout jacent apud Diedenghem, pro allodio, promittendo ei inde rectam warandium. Recipiens haec iterum tenenda annuatim ad vitam ejusdem Elyzabet pro uno denario. Ita tamen quod predicta infirmaria dabit annuatim hereditarie ac perpetuo, postquam ipsa Elyzabet obierit, hospitali sancti Johannis in Bruxella decem solidos et albis domicellabus juxta portam beate Katherine manentibus similiter quinque solidos de terra antedicta...*” Cartulaire de l’Hôpital Saint-Jean, SJ 183, pps. 237. The original is lost.

194 “…sextam partem de quodam bonario prati...” Cartulaire de l’Hôpital Saint-Jean, SJ 187, p. 240. The original is lost.

195 Basilie was related to the others of bearing the same surname, such as the Johannes de Platea mentioned in the 1279 document.

196 “*Notum sit universis quod Johannes, dictus Koukaert, presbyter, promisit quod Bessela, begina, dicta de Platea, posset obligare domum suam in qua manet usque ad summam decem librarum usualis monete ad subsidium sui testamenti...*” Cartulaire de l’Hôpital Saint-Jean, SJ 243, p. 295. The original is lost.

197 “…juxta Sanctum Johannem in Bruxella...” Cartulaire de l’Hôpital Saint-Jean, SJ 263, pps. 318-19. The original is lost.

198 Cartulaire de l’Hôpital Saint-Jean, 318-19. The original is lost. Also, Elisabeth’s relative or parent, Everwin Wassaert, was mentioned as an alderman of Brussels on 18 November 1317, and he possessed in 1314 holdings next to the hospital of Saint John. See Cartulaire de l’Hôpital Saint-Jean SJ 263, p. 318, fn 3.
The five documents represent twenty-five years of a history of women associated with the hospital and demonstrate the unique role that the hospital filled as a point of intersection for some religious groups, especially the beguines. We know that “the beguines did not fit the ordinary pattern: they were women who were in the world, but not really part of it; pious women whose devotional ardor often surpassed that of cloistered nuns.”\(^{199}\) We also know that the growth of their movement was tied to the lay spirituality movement:

As towns grew, small communities of devout people too keen on freedom to take vows appeared. They devoted themselves to good works but outside the traditional ecclesiastical framework which raised practical problems for the church, especially in the ears of pastoral care and economic upkeep.\(^ {200}\)

It was the need for independence and religious creativity that really spurred the movement.\(^ {201}\) Thus, it comes without surprise that “these women were determined to live a life of prayer combined with charitable works, taking their biblical cue from the mission of the seventy in Luke, rather than the call to communal life in Acts.”\(^ {202}\) Their place in society was strictly urban in character,\(^ {203}\) similar to the hospital of Saint John.

What marked the transition for the rise of the Beguines in Brussels seems to have been a closing of certain vocations that might have been available to women in the early thirteenth century. During the hospital’s autonomous period, the hospital sisters and the lesser mistress played a pivotal role in hospital affairs. It was only after the women were limited within the hospital itself that the Beguines began to appear in the hospital.

\(^{199}\) Marie A. Conn, *Noble Daughters: Unheralded Women in Western Christianity, 13\textsuperscript{th} to 18\textsuperscript{th} centuries* (Westport and London: Greenwood Press, 2000), 1.
\(^{200}\) Conn, *Noble Daughters*, 5.
\(^{201}\) Ibid.
charters. Thus, as women were shut out from the affairs of the hospital “middle- and lower-class women pursuing religious life outside the convent” appeared at the hospital of Saint John—these beguines made donations to the hospital and helped to increase its holdings.

In the meantime, there had been little invention by the bishops of Cambrai in the hospital’s affairs during the 1260s and 1270s. While the bishops of Cambrai had altogether disappeared from the pictured during the reign of Nicolas II, by 5 April 1277, the power of the hospital had increased enough that the brothers and the sisters of the hospital, as well as their temporal headmasters, could call on the new bishop of Cambrai, Enguerrand II (r. 1274-1286). The hospital staff purposely appealed to the bishop, as they were upset with recent events. Recent neglect by the bishop had launched the hospital into a series of affairs with local religious institutions, which eventually limited the power of the hospital in general and the sisters specifically.

Thus, the brothers and the sisters demanded that Bishop Enguerrand II give power to Jean Hout, headmaster of the hospital, so that he could consent to sell a part of the goods held by the brothers and sisters of the hospital of Saint John for the purchase of a

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204 Ibid., 3.
205 Those named include the following: Willelmus dictus Rex, miles, Willelmus Blomart, Johannes Losa et Johannes de Senna. Willelmus dictus Rex or Guillaume Coninc appeared in Cartulaire de l’Hôpital Saint-Jean, SJ 148, pps. 191-192. CPAS, SJ 46, fol. 25. Willelmus Blomart or Guillaume Blomart was an alderman of Brussels between 1282 and 1285. John Lose was an alderman in 1251 and Johannes de Senna or Jean van der Zennen appeared as an alderman from 1265-1279. See Cartulaire de l’Hôpital Saint-Jean, SJ 175, pps. 222-223, fn 3-6. CPAS SJ 36, fol. 16.
206 For more on Enguerrand or Ingeramus, see Cartulaire de l’Hôpital Saint-Jean, SJ 182, p. 236. CPAS, SJ 36, fol. 18. See also de Moreau, Histoire de l’église en Belgique, t. III, 169-170, 678.
207 Jean Hout was also the dean of the chapter of Saint-Pierre at Anderlecht and canon of Saint-Rombaut of Malines beginning in 1253.
dîme and a fief held near Bodeghem from the knight Gautier de Bodeghem. They also beseeched the bishop himself to become involved in affairs related to the hospital. Enguerrand II answered the hospital’s calls on 30 September 1277. The document issued by the bishop approved the previous act related to a sale to the brothers and sisters of the hospital of Saint John of a dîme from Gautier de Bodeghem (Walterum de Bodenghem, militem) held near Bodeghem and near Grand-Bigard. Indeed, the document to which the bishop’s charter refers had placed the hospital of Saint John in the possession of the dîme that Gautier had sold in Brussels on 10 June 1277. The hospital needed the support that it had once enjoyed from both the local bishops and the papacy.

Further retribution occurred shortly after the request of the bishop’s intervention when Pope John XXI (1276-77) appeared in the documents on 9 April 1277. Pope John

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208 “...Paternitati vestre significamus quod nos fructus et proventus decrem quam dominus Walterus de Bodengem, miles, tenebat in parrochia de Bodengem in (sic) omnibus juribus ad dictam decimam spectantibus comparavimus erga eundem, quam decimam in feodum tenebant a domina de Dongelberga, et hoc pro nogentis libris Lovaniensibus, certis sibi temporibus persolvendis, quam pecunie summam dictum hospitale solvere nequit, nisi alia bona venditioni exponantur pro liberatione pecunie antedictae...” Cartulaire de l’Hôpital Saint-Jean, SJ 175, pps. 223-224. CPAS SJ 36, fol. 16.

209 “...Hinc est quare vestre supplicant paternitati, cum magna sit utilitas hospitalis antedicti, quaternus viro venerabili et discreto, domino Johanni dicto Cani, decano Machliniensis (sic), provisori nostro, qui se nobis multum favorabilem exhibit et exhibet in nostris negotiis promovendis, dare vestris digna litterae in mandatis ut, cum sibi una vobiscum visum fuerit expedire, venditioni faciende auctoritate vestra, quotiens opus fuerit, suum prebeat consensum pariter et assensum, alia quoque negotia dicto hospitali concedendo secundum quod dictus dominus decanus et Egericus, capellanus dicti hospitalis, vobis exponet, quibus, si placet, vel alteri eorum, super hiis que vobis explanabunt, fidem adhibere velitis...” Cartulaire de l’Hôpital Saint-Jean, SJ 175, p. 224. CPAS SJ 36, fol. 16.

210 “…attendentes in utilitatem, commodum et profectum hospitalis ejusdem factos esse, ipsas venditionem et emptionem ac contractum super his initum et omnia et singula in litteris presentibus annexis super dictis venditione et emptione confectionis contenta, narrata et expressa laudamus, approbamus, grata et rata habemus, eis nostrum assensum prehenum et ea omnia et singula auctoritate nostra ordinaria confirmamus...” Cartulaire de l’Hôpital Saint-Jean, SJ 182, p. 236. CPAS, SJ 36, fol. 18.

211 Cartulaire de l’Hôpital Saint-Jean, SJ 179, p. 228. CPAS, SJ 36, fol. 18. In addition, the next extant document in the cartulary also involved Gautier de Bodeghem and was issued on 11 June 1277. Gautier gave to the hospital a dîme that he held at Bodeghem. See Cartulaire de l’Hôpital Saint-Jean, SJ 180, pps. 231-235. CPAS, SJ 36, fol. ?.
XXI ordered the dean of Saint-Rombaut of Malines\textsuperscript{212} to restore to the hospital of Saint John the holdings from which the mistress and the sisters might have been alienated wrongly,\textsuperscript{213} a request that went back to even the earliest popes involved with the hospital of Saint John. The intervention suggests that the sisters and the mistress protested the pope to help to alleviate their problems, again pointing to their autonomy and the lack of episcopal involvement.\textsuperscript{214}

In the meantime, in February of 1284 the hospital of Saint John invested Francon, the son of Arnoul Suaef and the spouse of Lélie Serclaes, with \textit{bonario u/no} exchanged between his father and him at Saint-Gilles (\textit{Obbruxella}).\textsuperscript{215} Noted in the charter was the lesser mistress, Margareta. Between February 1284 and 1291, however, no documents exist that point to activity by the religious patrons and staff except the earlier-detailed transition by John, the presbytery of Laeken. Instead, between those dates, the hospital increased its holdings via transferences and sales made by members of the local community.

\textsuperscript{212} Cartulaire de l’Hôpital Saint-Jean, SJ 176, p. 224. CPAS, SJ 4, fol. 10.

\textsuperscript{213} “…Quia vero nostra interest super hoc de oportuno remedio providere, discretioni tue per apostolica scripta mandamus, quatinus ea que de bonis ejusdem hospitalis per concessiones hujusmodi alienata inveneris illicit vel distracta ad jus et proprietatem ipsius hospitalis, non obstantibus litteris, renunciationibus, pensis, juramentis et confirmationibus supradictis, studeas legitime revocare, contradictores per censuram ecclesiasticam appellatone postposita, compescendos…” Cartulaire de l’Hôpital Saint-Jean, SJ 176, p. 224. CPAS, SJ 4, fol. 10.

\textsuperscript{214} This also suggests that Evrard’s contention that the pope did not intervene after 1274 is misnoted.

On 4 May 1291, the hospital returned to expanding its holdings by contracting a lease of *quadraginta annorum* payable to Oston de Klapscheut for half a *bonnier* of land that was located between Wambeek and Goudveerdegem.\(^{216}\) This time, however, the provisor and headmaster of the community, Walter, contracted the agreement. The charter included two witnesses: “*Radulphus, dictus Mol, et Henricus, filius Geldulphi, scabini Bruxellenses.*”\(^{217}\) A similar lease was made between the brothers of the convent of the hospital of Saint John,\(^{218}\) the hospital chapel’s beneficiary, and presbytery Amauri de Quercu and Gérard Pistor. The agreement included the lease of *annuatim interim pro sex libris Bruxellensium monete* collected from *quinque jornalia terre* located at *Bruxelles au Marché au Bétail*,\(^{219}\) and the witnesses included *Everwinus Campsor*\(^{220}\) and *Willelmus de Platea, dictus Rex*, aldermen of Brussels.\(^{221}\)

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\(^{216}\) "*Noverint universi quod frater Walterus, provisor et magister hospitalis sancti Johannis in Bruxella, ex parte ejusdem hospitalis contulit Ostoni, dicto de Clapscoetece, dimidium bonarium terre parum plus vel minus, jacentis inter Wambeka et Goutverdinghem, tenendum et excolendum a data litterarum presentium ad terminum sive spatium quadraginta annorum subsequentium, annuatim interim pro quatuor sextariis siliginis melioris, in qualibet inde sextario juxta duos denarios, deliberandis infra Bruxellam, et cum mensura Bruxellensi, et semper ad festum sancti Andreae solvendis, promittens ei una cum Everwino Campsore, provisore dicti hospitalis, inde interim warandiam…*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 226, pp. 278-279. The original is lost.

\(^{217}\) *Cartulaire*, SJ 226, p. 279.

\(^{218}\) See also *Cartulaire de l’Hôpital Saint-Jean*, SJ 208, 209, and 219.

\(^{219}\) "*Notum sit universis quod frater Wedricus et frater Walterus, ex parte conventus sancti Johannis, et Amelricus, dictus de Quercu, presbyter, ex parte cappellanie sue, contulerunt Gerardo Pistori quinque jornalia terre site supra Veemarch retro mansionem Willelm, dicti Loze, parum plus vel minus, prout jacent, tenenda et excolenda a festo Nativitatis Domini proximo futuro ad terminum sexaginta annorum continue subsequentium, annuatim interim pro sex libris Bruxellensium monete usualis communiter in bursa currentis semper ad Natale Domini solvendis, promittentes ei inde ex parte dicti conventus et ex parte dicte cappellanie interim warandiam…*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 234, pp. 286-287. The original is lost.

\(^{220}\) *Everwinus Campsor* appeared in a previous document regarding a lease to the hospital of Saint John. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 226, pp. 278-279.

\(^{221}\) *Cartulaire de l’Hôpital Saint-Jean*, SJ 234, p. 287. Guillaume appears at an earlier date as *Willelmus de Platea* or Guillaume de Platea. He also appears as *de Via Lapidea* or *Rex*. *Cartulaire de l’Hôpital Saint-Jean*, SJ 148, pp. 191-192. CPAS, SJ 46, fol. 25. He became one of the temporal headmasters of the hospital at an earlier date. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 175, pp. 222-223. CPAS SJ 36, fol. 16.
It was only on 16 March 1296 that invention by the bishops of Cambrai again occurred, which came via a judgment of the episcopal court of Cambrai.\textsuperscript{222} The court ruled in favor of the hospital of Saint John in regards to twelve \textit{bonniers} of land located at Pamele.\textsuperscript{223} The lands were originally sold after Godfrey II, count and lord of Grimberghe, and his older son Philippe approved an agreement between the hospital and knight Bernier of Ledebergh.\textsuperscript{224}

Less than a year later, on 22 January 1297 during the papacy of Boniface VIII (1294-1303),\textsuperscript{225} a seemingly unusual document to the collected extant works was issued from Rome. The charter named the following people: Pierre, the Patriarch of Constantinople, Basile, Patriarch of Jerusalem, Gilles, Archbishop of Bourges, Philippe, Archbishop of Salerne, Jean, Bishop of Winchester, Bartolo, Bishop of Caserte, Jacques, Bishop of Mylopotamos, Adhemar, Bishop of Huesca, Renaud, Bishop of Alatri, Jacques, Bishop of Chalcedoine, and Maur, Bishop of Amelia.\textsuperscript{226} The bull allowed for forty days of indulgences and remission of sins for those who gave back to the hospital with their piety or to the hospital’s chapel.\textsuperscript{227} The charter’s unique character suggests the clear

\begin{footnotesize}
\begin{enumerate}
\item The Bishop of Cambrai could have been either Guillaume I or Gui II at this time. See Le Glay, \textit{Cameracum Christianum ou Histoire Ecclésiastique du Diocèse de Cambrai}, 46.
\item Nothing more can be said of the intervention by the court since no text survives other than a 1589 analysis. See \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 239, pps. 291-292. The original is lost.
\item See \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 236, pps. 288-289. The original is lost.
\item This was one year after Boniface VIII had issued \textit{Clerici laicos} (24 February 1296). Moreau identifies that we simply cannot separate the events of the Empire from what was going on in the bishoprics at the same time. See Moreau, \textit{Histoire de l’église en Belgique}, t. III, 160-1.
\item Bonenfant details carefully all the positions and the dates held. See \textit{Cartulaire de l’Hôpital Saint-Jean}, p. 300 fn 1-11.
\item "...Cum igitur hospitale beati Johannis Baptiste in Bruxellis, Cameracensis diocesis, ubi paupers benigne recipiuntur et misericorditer reficiuntur, tanto... (sic) onere sic sit oppressum quod ad sustentationem pauperum in eodem commorantium et quotidie confluentium proprie non suppeditant facultates, nisi fidelium elemosinis adjudetur, universitatem vestram roganus, monemus in Domino et hortamur, in remissionem vestrorum peccaminum injungentes, quatenus, de bonis a Deo collatis, ad dicti hospitalis et pauperum sustentationem pias elemosinas et alia caritatis subsidia largiamini, ut per hec et
\end{enumerate}
\end{footnotesize}
importance of the hospital by the end of the thirteenth century. The hospital, born and raised in a newly created city and founded at a time of increased lay piety, had evolved into an institution worthy of the reception of the town’s peoples’ piety.

In the last years of the thirteenth century donations, leases, and agreements between the hospital and others continued. Sometime before 24 June 1298, the hospital of Saint John contracted another lease. The terms of the lease lasted for one hundred years, and the hospital issued to Baudouin, parish priest of Herent and official to the bishops of Cambrai, one *fonds* of a house located in Brussels near the wall of Bogards.228 The headmaster, the lesser mistress, the brothers, and the sisters all were involved in the deal.229 Less than a year later in February 1299, the hospital of Saint John rented to Gertrude of Uccle for fifty years a *fonds* a habitation in Brussels at Putterie.230 Again, the lesser mistress, brothers, and sisters, but not the headmaster, were listed in the agreement.

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228 *“…prout ei est assignatum et deputatum tenendum et possidendum a festo sancti Petri ad Vincula proxime futuro ad terminum seu spacium centum annorum continue subsequentium, annuatim pro viginti solidis Bruxellensium denariorum monete usualis communiter in bursa currentis, simper ad Natale Dominis solvendis, promittendo et inde interim warandiam...”* Cartulaire de l’Hôpital Saint-Jean, SJ 247, p. 299. The original is lost.

229 *“…Est etiam conditum et promissum inter dictas partes quod si dicti magister, magistra, fratres et sorores supra dictum domistadium domum construere voluerint, quod hoc licite facere poterunt vel supra alia ibidem sua domistadia...”* Cartulaire de l’Hôpital Saint-Jean, SJ 252, pps. 306-7. The original is lost.

230 *“…Noveritis quod nos per consensum Gerelmi dicti Heinkaert, provisoris nostri in temporalibus, contulimus Gertrudis de Uccle, latori presentium, domistadium situm in Pottera ex opposito domine Helewigis de Nova Domo, tenendum a nunc temporis (sic) ad terminum quinquaginta annorum continue sequentium, annuatim pro duodecim solidis monete communiter in bursa currentis, semper ad Natale...”* Cartulaire de l’Hôpital Saint-Jean, SJ 252, pps. 306-7. The original is lost.
The proof of the increased size of the holdings of Saint John’s and its power in the center of the town came again on 28 March 1299. Amauri de Quercu, the perpetual chapelain (perpetuus capellanus) of church of Saint John, ceded lands en allodio to the headmaster and the hospital of Saint John for the establishment of yet another cemetery. One-third of the lands were located outside the city walls of Brussels. The headmaster and the hospital promised to compensate the chaplaincy by placing it in possession of equivalent lands. Gerelmus, dictus Heinecart, et Godefridus de Mons both served as witnesses.

Some of what the hospital gained, however, was lost when in June 1299 the hospital of Saint John sold to André of Tournepe, a cleric, and to his wife Beltrix an annual rent of twenty solidos, of which the guarantee was assigned to the lands located at Tournepe and held by the abbey of Cambre. The procurator, Godescalcus, was

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*Domini persolvendis, et duobus caponibus simili modo solvendis...” Cartulaire de l’Hôpital Saint-Jean, SJ 257, p. 311. Putterie is east and slightly south of the Grand’ Place.

231 “...mediante consensu et voluntate sui patroni et propter urgentem et evidentem necessitate, renuntiando contulit magistro hospitalis sancti Johannis predicti ad opus cimiterii construendi tertiam partem unius jornalis terre, parum plus vel minus, site foris muros Bruxellenses, pro allodio, promitendo ei inde ex parte sue capellanie rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 258, pps. 312-313. CPAS, SJ 33, fol. 5.

232 “…Et dictus magister ipsius hospitalis, mediante consensu et voluntate provisoris dicti hospitalis, vice versa promissit dictam capellanian in monitionem ipsius capellani adheredere in tercia parte unius jornalis terre ibi juxta site, in qua dicta capellania nullum jus optinet, vel, si optinet dicta capellania aliquod jus in terra predicta, equepollenter secundum quod exheredata fuit dicta capellania, ita quod sit dicte capellanie satisfirmum...” Cartulaire de l’Hôpital Saint-Jean, SJ 258, pps. 312-313. CPAS, SJ 33, fol. 5.

233 André also appears in the cartulary at an earlier date. See Cartulaire de l’Hôpital Saint-Jean, 199, pps. 252-253.

234 “…Noverint universi quod frater Godescalcus, procurator legittimus hospitalis sancti Johannis in Bruxella, acquisitivit emptione legitima viginti solidos annui et hereditarii census erga Andream de Tornepia, clericum, et Beltricem, ejus axorem, semper ad natale Domini persolvendos in moneta legali communiter in bursam currente; et hoc mediatus viginti una libris predicto Andreae et axori sue bene et legitime pagatis a dicto procuratore hospitalis predicti...” Cartulaire de l’Hôpital Saint-Jean, SJ 262, pps. 316-318. CPAS, SJ 45, fol. 25.
named in the charter. The mention of the procurator, as well as only a general mention of the sisters, seems to demonstrate the lessoned role of the hospital women.

The year 1300 marks a transitional stage in the history of the hospital. Bonenfant ends his cartulary and the contents of the original Boeck metten Hare at this point. In February 1300, the hospital of Saint John conceded to Guillaume of Rodenbeke and his son John, in return for the payment of annual fees of ten solidos and four chapons, a house with its fonds located near Sainte-Gudule. The temporal provisor, Gerelmi dicti Heinecart, was again named in the charter. After this concession, the bishop of Cambrai, Gui II, once again intervened in hospital affairs, this time regarding the earlier indulgence of 1297 and the establishment of a new cemetery. Gui II de Colmieu served as a bishop of Cambrai from 1296 to 1306. Although Gui II did not take part in the earlier issuance of indulgences in 1297, his 8 April 1298 charter approved and confirmed the indulgences that were granted by the group of bishops, archbishops, and patriarchs mentioned in the previous issuance, and in the charter, the bishops and other

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235 Both men were mentioned in an earlier charter. See Cartulaire de l’Hôpital Saint-Jean, SJ 255, pps. 309-310.
236 “…Noveritis quod nos, mediante consensu Gerelmi dicti Heinecart, provisors nostri in temporalibus, contulimus Willelmo de Rodenbeke et Johanni, filio suo, domum nostram cum domistadio, sicut sita est prope Sanctam Gudilam ex opposito mansionis plebani sancte Gudile, possidendam et inhabitandam ad vitam amborum, ita quidem quod qui diutius vixerit intergraliter predictam mansionem ad vitam suam possidebit, salvo eo quod censum inde exeuntem, videlicet decem solidos et III capones, singulis annis quandiu vixerint persolvent et omnia edificia que in dicto domistadio construere eis contigerit post mortem amborum ad nos devolventur…” Cartulaire de l’Hôpital Saint-Jean, SJ 270, pps. 325-326. CPAS, SJ 33, fol. 36.
237 Bonenfant classifies the provisors as lay. Because, however, they are tied to the charters and their religious figures, they have been included here. For more on the list of lay peoples, see Cartulaire de l’Hôpital Saint-Jean, XLIV-XLV.
238 Gui II was named to the bishopric of Cambrai by Boniface VIII. Thus, where influence by the popes seems to drop off after John XXI, it does continue, but only indirectly. See de Moreau, Histoire de l’église en Belgique, t. III, 210.
figures were named and reconfirmed. The act was important enough to merit a second mention, and the names were clearly important enough to mention twice.

Like his predecessor Gui I, Gui II saw it fit to authorize the establishment of a new cemetery for the hospital of Saint John since its previous cemetery had been filled. His act was issued on 25 March 1300 at Thun-l’Évêque. Finally, in a rather odd act, Bishop Gui II on 10 September 1300 issued a charter that would allow the master, brothers, the mistress, and the sisters of the hospital of Saint John to consume milk, cheese, eggs and butter during Advent, and to likewise be able to wear shoes of leather. The issuance invoked the names of the master, the brothers, the mistress, and the sisters.

On the reverse of the document, however, appears, “magistro et sororibus hospitalis sancti Johannis Bruxellensis.” Finally, the last issuance from a religious figure came in June 1300 when Jean, parish priest of Leerbeek, made it known that he owed the hospital of Saint John, during the course of his life, an annual fee of five solidis monete
Conclusion

In the end, Saint John’s hospital exhibited many of the trends that had occurred throughout the papal and episcopal ranks during the thirteenth century. The question posed by Colin Morris—“did all this constitute, within the possibilities open to a pre-industrial society, an effective response to the problem of poverty?”\(^\text{245}\)—proves difficult to answer. Since we do not have documents that directly discuss the problems of or the responses to poverty, we must infer from the documents whether the bishops, popes and members of the hospital staff really alleviated the problems that we know plagued new city life. In short, I believe the answer to be yes. The continued support of the hospital by the papacy, episcopacy, and sometimes even local institutions points to the incredible importance of this hospital for the relief of poverty. And for what other reason than for assistance of the poor and sick would members of the community, local and abroad, support the hospital? There seems to have been a genuine concern for Saint John’s hospital, so much so that that it was only with the support of the papacy and episcopacy that it flourished, and it was only with that support that the hospital grew into a formidable institution that was able to alleviate some of the problems of poverty created in the wake of the urban crisis.

\(^{244}\) “...Noveritis quod ego teneor magistre et conventui hospitalis sancti Johannis in Bruxella in quinque solidis monete communiter in bursa currentis, singulis annis, quamdiu vixero, simper ad Natale Domini solvendi, de tercia parte dimidii jornalis domistadii, retro ecclesiam siti...” Cartulaire de l’Hôpital Saint-Jean, SJ 273, p. 328. The original is lost.

\(^{245}\) Morris, The Papal Monarchy, 326.
Thus, it is not only the dukes of Brabant that can be held as largely responsible for the creation and functioning of the hospital of Saint John. When we place the hospital in its greater context, the breadth of responsible parties begin to appear. In the Middle Ages, especially at the height of the spiritual movements of the laity, there was an increased pressure placed on the clergy, bishops, and papal legates to oversee the foundation and functioning of certain organizations and institutions. Without papal approval, or without the approval of the local bishop, these groups and their institutions were not official, and in the case of some, heretical.

In the case of Saint John’s, approval was there, and it was echoed again and again throughout the thirteenth century by the majority of popes in office. In addition, the local bishops and papal legates granted to Saint John’s the necessary means for creation and survival. Their acts demonstrate not only an official movement in Brussels, but also a clear desire to continue charitable acts by these profoundly religious people outside of the city. Similar to local religious leaders who participated in a “geography of charity” in association with the hospital, the religious leaders of Europe also played a significant role in expanding the networks with which the hospital was involved.

More importantly, when specific charters are extracted from the greater collection of the cartulary, patterns and trends begin to emerge. The papacy and the episcopacy were foundational in the early years of the hospital. Both groups supported the institution and helped it thrive. In fact, repeated grants, such as the allowance of indulgences, and repeated protection, such as the right of the hospital sisters to recover lands taken from them, assured the success of the institution. During the middle of the thirteenth century,
however, the hospital entered into an autonomous phase. The hospital sisters and especially the hospital mistress appeared as substantial forces from within the hospital itself. The hospital continued to gain lands, cemeteries, and even a new building.

While the hospital expanded considerably during this period, and while the women continued to make their voice heard, the growing autonomy also meant that the hospital would have to deal with and answer to other institutions upon whose lands and rights they were encroaching. The hospital of Saint John’s thus entered into several battles with local institutions. Sometimes the hospital won, but for the most part, its growing power was stifled, and most certainly the power of the sisters was subdued. It was precisely during this period that the sisters were forced to seek out the papacy. Little intervention on the behalf of the episcopacy left the sisters especially and the hospital in general in need of an ally. Only later did the bishops again emerge in hospital affairs, a point at which they arrived thanks to the protest of the brothers, sisters, and the mistress. In the end, the sisters began to fade away as the prime participants in the hospital, while simultaneously the Beguines became prevalent in the town of Brussels and in hospital donations. Their role in the establishment of the hospital cannot be ignored, especially at a time when women were largely neglected politically and religiously.

Finally, something must be said of the hospital at the turn to the fourteenth century. In only a short fifty years during the autonomous phase, several important religious groups and figures had been involved with the hospital. Included in these groups were the Beguines, the Franciscans, the Dominicans, and some of the most important religious leaders of all Christendom. A German Franciscan, the majority of the
popes of the period, all but one local bishop, Jacques de Vitry, the patriarchs of Constantinople and Jerusalem, some of the most important non-local archbishops and bishops of the period, and more prove that the “geography of charity” in which Saint John’s hospital operated was truly expansive. After all, this was no ordinary hospital.

Despite the setback in terms of the right to offerings, rights to certain lands, etc., the hospital had grown into a formidable institution by 1300. Especially between 1248-1300, Saint John’s won the respect of the local community, religious and lay alike. Although we cannot be certain to what extent the institution offered relief to the poor and sick of the community, the support that it received indicates that the hospital was responding in every way it could to the poor and sick. An urban institution dedicated to the sick and poor, aided by religious and lay alike, was about as centralized as it gets. This was such the case that the hospital’s growth during the last fifty years of the thirteenth century must be explored by looking to the lay patrons. It is to them that we turn next.

Introduction

The last few chapters have examined the hospital of Saint John via its noble, mid-level noble, and religious patrons. While these groups were integral to the success and continued support of the hospital of Saint John, other members of the community were certainly present at the institution. Although not always identified by name, the members of the town of Brussels were significant figures in the history of Saint John’s hospital. An exploration of the town’s people reveals the make up of the social hierarchy in Brussels and helps us to better understand town life in the high Middle Ages.

In fully situating the hospital of Saint John in the history of the town of Brussels and its social hierarchy, one must first return to the emergence of towns and cities during the high Middle Ages. Many of the towns that arose in the high Middle Ages were “the conscious and deliberate creations of territorial lords, always for their own profit.”¹ These types of towns stood in contrast to the unplanned towns that survived from earlier periods.² In addition to increased urbanization, the new towns of the high Middle Ages were also marked by new social developments. Before the rebirth of cities in the high Middle Ages, “society had recognized only two active orders: the clergy and the nobility.”³ The rise of cities c. 1000, however, precipitated the growth of several new social classes, many of which were not part of the traditional social and economic

¹ Pounds, The Medieval City, 12.
² Ibid., 22-24.
³ Pirenne, Medieval Cities, 213.
spectrum of the early Middle Ages. Thus, throughout the high Middle Ages, urban society become more and more defined, not by the “three orders” and not by “three neatly bound classes, but [by] a continuum, which reached from the richest merchant to the poorest of the unskilled.”

Included in this continuum of classes were merchants and tradesmen who depended on the urban landscape for their survival and success.

While most historians accept that new social divisions of the high Middle Ages emerged and quickly dominated the urban landscape, the people associated with the new trades are sometimes taken for granted, leaving one to question who exactly these people were, in what place they fit in the urban hierarchy, and in what ways they contributed to the growing urban landscape. Whereas we cannot always answer these questions, we do know that many of these people were from the same group involved in the lay spiritual movement. Several of them used their newfound positions in society, as well as their newly acquired wealth, to contribute to local religious institutions. Thus, in many ways, the simplest means through which to answer the above-asked questions is to look to the hospital of Saint John, whose patrons were drawn from all levels of the social spectrum but especially from the new urban classes.

Before, however, turning to the new urban class, we must first take into consideration the surviving documents from the hospital of Saint John in which they appear. Paul Bonenfant, in the introduction to the cartulary of Saint John’s hospital, classified the extant documents into three authorial categories: ecclesiastical, lay, and

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4 Pounds, The Medieval City, 139.
author undetermined. As has been demonstrated in previous chapters, the ecclesiastical and undetermined documents were grouped to show the various peoples associated with the hospital, both patrons and participants. Bonenfant divided the ecclesiastical figures into groups such as the papacy, the episcopacy, and even local religious chapters. From these divisions we were able to get a sense of the number of documents issued by those with religious affiliation. We were also able to see the overall pattern of issuances from the late twelfth century to the early thirteenth century.

Similarly, Bonenfant divided the lay documents up into ten separate categories: the dukes of Brabant, ducal officers, the accompanying lords or non-members of their family, the members of seigniorial families, nobles, non-nobles, the alderman’s court, the court censale of Henry Lopere of Louvain, the temporal provisors of the hospital of Saint John, and the provisors of the Foundation Terarken at Brussels. The group that comprised the greatest number of documents was by far the alderman’s court, in which the cities of Brussels, Goyck, Laeken, Leeuw-Saint-Pierre, Tervueren, Uccle and Wambeek, and the people of the Lord of Assche, Sainte-Gertrude of Nivelles in Brussels, and Léon d’Aa à Leeuw-Saint-Pierre all appeared. One-hundred-thirty-three documents were represented in this group alone.

5 See Cartulaire de l’Hôpital Saint-Jean, XLIII-XLVI.
6 See Cartulaire de l’Hôpital Saint-Jean, XLIV-XLV.
7 Ibid., XLV.
8 It is without a doubt that the aldermen were significant to the donations that came in and out of the hospital of Saint John. These men oversaw the legal business conducted by the hospital. Several of them appear multiple times in the documents, often in association with connected charters (for example, see below the case of Guillaume Clabot and the aldermen associated with his grants). While the aldermen are significant, the purpose of this chapter is to move beyond the legal aspect of the documents in an attempt to establish an understanding of the social atmosphere of the city at the time, which can be done through an examination of those people not necessarily identified by Paul Bonenfant.
While the ecclesiastical divisions helped us to better understand the evolutions that occurred at the hospital and within the society in which the hospital was situated, the lay divisions are not as easily deciphered from the categories presented. The ten set groups, divided according to the authors of the documents, neglect the other people who appeared in the various charters. This is especially true of those who did not hold an office in the city or who were not of noble or middling status. When dissected in this way, the charters reveal a fascinating history pertaining to the hospital of Saint John, the city of Brussels, and the rise of new social classes—mentioned in the documents are burgenses, butchers, bakers, fishermen, candle makers, leather workers, women, and several others, none of which are listed in the introduction to the cartulary.

It is therefore necessary to reexamine the documents aside from their arbitrary groups in order to have a better understanding of the multi-faceted community in which Saint John’s hospital was situated. By understanding the various peoples and the professions from which they came, an overall picture of the diversity of occupations and their physical counterparts, such as mills, rivers, and other land-based structures required for trade and the production of goods, emerges. From rivers and bridges to gates, walls, and even workshops, the identification of the everyday people of Brussels in the documents—the burgenses, the hospital provisors and supporters, millers, farmers, fisherman, tanners, blacksmiths, bakers, women and more—helps to show what life was like in the town of Brussels during the twelfth and thirteenth centuries.

Thus, the next two chapters will focus on these developments. Chapter eight examines the châtelain of Brussels, Lionnet I, the burgensis class, the hospital supporters,
representatives, and *mambours*, and their contributions to the hospital of Saint John. The chapter also explores the role of the hospital provisors, who were legal lay supporters of the hospital. Chapter nine turns to the townspeople of Brussels, focusing on women and common people, such as merchants and craftsmen, as well as the town structures. The people of the town, situated at the very bottom of the social hierarchy, will conclude our study, which will have taken us from the most important people of the region, the dukes of Brabant, down through the simple people of the town. Despite their differences socially, all members of the community were linked by the institution of Saint John’s.

The *Burgenses*\(^9\)

With the rise of towns and cities in the high Middle Ages, new classifications for the settlements, as well as for the people who inhabited the communities, followed. Often, the new mercantile center, or the “new burg,” that arose in the city was distinguished from the “old burg.”\(^10\) Those who were socially significant in the old burg were called the *castellani* or *castrenses*.\(^11\) Only one person of this status appears in the documents of Saint John’s hospital: Lionnet I, a lord of Aa and a thirteenth-century *châtelain* of Brussels (1210-1253). Lionnet I was the son of Godfrey, the previous *châtelain* of Brussels, and *Heylewige*. Lionnet I’s father first appeared in the documents of Saint John’s hospital in January 1209 when he and his wife, *Heylewige*, exempted the rents and charges owed on eight *bonniers* of land that the institution held in census to him.

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\(^9\) Whereas the participants in the documents in other chapters have appeared in chronological order, this chapter, because of the nature of the donors, is best presented in alphabetical order according to the participants. The exception to this is the story of Guillaume Clabot, who appears last. His late role in the hospital of Saint John, as well as his unusual position in the city of Brussels, makes him more of a transitional figure. See below for more information.


\(^11\) Ibid., 151.
Lionnet I and his son Godfrey were named in the act, and in doing so, Lionnet I may have been influenced by the charitable acts of his father. In fact, Lionnet I went on to become a châtelain of Brussels from 1210-1253, as well as one of the most ardent supporters of the hospital of Saint John. In his lifetime, he and his family appeared ten times in the documents related to the hospital of Saint John. While this only accounts for 3.59% of the total charters, it does make Lionnet I and his family some of the most prolific participants in charitable donations to the institution.  

Lionnet I himself first appeared on 29 April 1216 when he gave the hospital of Saint John in charity (elemosinam) ten muids of rye to rent out on his dîme at Leeuw-Saint-Pierre. Included in the agreement was the understanding that the gift would remain in the possession of the hospital even if the dîme had been sold. The witnesses to the document included several important figures from Brussels and the nearby regions. Three years later, between 7-30 April 1219, Jean III, the bishop of Cambrai, issued a charter from Santbergen, which finally conferred to the hospital of Saint John the portion of the dîme of Leeuw-Saint-Pierre that had been given to the hospital by Lionnet

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12 “...Godefridus, dictus Bruxellensis castellanus, una cum uxore mea Heylewige, de consensu et voluntate liberorum nostrorum Leonii et Godefridi et ceterorum, octo bonaria terre, que apud Bigardis frateres et sorores hospitalis beati Johannis in Bruxella a nobis jure tenent hereditario, ab omni exactione et inquietudine qua nobis tenebantur, tam ipsa quam mansionarios in ipsis commorantia vel ipsa colemente, preter servos nostros et ancillas nostras, intuitu divine retributionis in perpetuum libera esse concessimus et exempta...” Cartulaire de l’Hôpital Saint-Jean, SJ 7, p. 14. The original is lost.

13 If one includes the documents in which Lionnet I served as a witness or to which he gave his consent, the number jumps to twelve, accounting for 4.3% of the total documents.


15 Santbergen was a province in eastern Flanders.
While Lionnet I was clearly acting in a charitable manner, he was also setting an example—other men of the urban class would follow his lead.

Before, however, Lionnet I presented more donations directly to the hospital of Saint John, he partook in other matters related to the institution. In July 1226, Englebert II, a lord of Enghien, Lionnet I, and Arnoul II, a lord of Wesemael, all guaranteed a sale carried out by Gauthier, a lord of Aa, to the hospital of Saint John. The sale included lands located between *Martis fontem* and *curiam Bauchonis* near Pede. As representatives of the communities near Brussels, the men, including Lionnet I, assured a successful and significant donation to the hospital of Saint John.

Furthermore, soon after Pope Gregory IX (1227-1241) had extended his protection to the priests, sisters and the holdings of Saint John’s hospital, Lionnet I again provided for the hospital of Saint John. On 13 September 1233 the *châtelain* gave to the hospital an annual and perpetual rent of forty-four *sous* and six *chapons* of an income from property located at Molenbeek. Lionnet I’s sons, Godfrey and Lionnet II,

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17 Lionnet I did appear in the documentation between the 1219 grant and the 1226 donation. He was not, however, a main participant. Rather, he served as a witness when Henri Pau gave to the hospital of Saint John a *bonnier* of meadow located between Neder-Over-Heembeek and Werfunder on 6 July 1224. The agreement was granted with the consent of Duke Henry I. Lionnet I, named as a *castellanus Bruxellensis*, Godfrey of Louvain, Henry I’s son, and several others all served as witnesses. See, Cartulaire de l’Hôpital Saint-Jean, SJ 21, p. 39. The original is lost.

18 “... *Noverint universi quod cum Walterus, dominus de A, XVI* cum bonaria terre et dimidium bonarium site inter Martis fontem et curiam Bauchonis et juxta Pede, que cum Arnoldo, fratre suo, communia habebat et indivisa, ad ecclesiam Anderlechtensem spectantia, que sua et fratris sui Arnoldi errant hereditas, religiose domui hospitali beati Johannis in Bruxella vendidit...” Cartulaire de l’Hôpital Saint-Jean, SJ 27, p. 47. CPAS, SJ 34, fol. 15.

19 Cartulaire de l’Hôpital Saint-Jean, SJ 41, p. 65.
were named in the act and may have been exercising family solidarity in their joint efforts.20

Only four years later in May of 1237, Lionnet I again gave to the brothers and sisters of the hospital of Saint John (contuli in elmosinam fratribus et sororibus), providing, in census, ten bonniers of marsh land located between Evere and Helmet. Lionnet I made reference to both his parents and his son Godfrey in the document: “pro remedio anime mee et pro animabus patris et matris mee necnon et filii mei, Godefridi, et omnium amicorum meorum defunctorum et viventium.”21 Lionnet I’s son, Lionnet II, gave his consent to the donation, again suggesting that the family was acting in solidarity.22 Lionnet II, however, was not the only one to provide his approval. Like the 29 April 1216 donation, several witnesses appeared within the charter, many of whom were also present at the previous 1216 donation.23

In March 1240 Lionnet I and his son, Lionnet II, conferred in allodium to Arnoul of Grand-Bigard, called Halfelle, a dîme that both men held in fief at Leeuw-Saint-

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20 “…Universitati vestre notum fieri volumus quod nos de consensu filiorum nostrorum, Godefridi et Leonii, majorum etate, contulimus in elmosinam hospitali beati Johannis in Bruxella ad opus pauperum ibidem decumbentium quendam censum annualem XL or solidorum et sex caponum, quem habemus in quadam terra, juxta Molenbeka versus Bruxellam sita, de nostro existente dominio, quam a nobis detinet Balduinus et sui conparticipes, libere et absolute perpetuo jure possidendum…” Cartulaire de l’Hôpital Saint-Jean, SJ 43, p. 68. CPAS, SJ 42, fol. 18.
21 Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.
22 “…Inde est quod ego, Leonius, castellanus Bruxellensis, presentium offitio, notum fieri volo tam presentibus quam futuris quod ego, pro remedio anime mee et pro animabus patris et matris mee necnon et filii mei, Godefridi, et omnium amicorum meorum defunctorum et viventium, contuli in elmosinam fratribus et sororibus, necnon et pauperibus hospitalis sancti Johannis in Bruxella decem bonaria paludis, jacentis inter villam que dicitur Everna et vicum qui dicitur Elmpt. Ego autem, Leonius, predicti castellani filius, adhibui et adhibeo huic patris mei elmosine spontaneum concensum et ascensum (sic.).” Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.
23 See below for more on these people and their roles.
Pierre. While the charter did not mention the institution directly, the document was probably included in the collection of Saint John’s because it referred to previous holdings granted to the hospital by Lionnet I in 1216. Also included in the hospital’s documents was a February 1242 sale by Lionnet I to Gregory, the son of Sisaire, of a *fonds* of a house located in Brussels between the port of Chapelle and *Ruysbroeck*. Later, though, in February 1242, the sale came under dispute. Two aldermen, *Radulphus*, *dictus Meyer*, *Willelmus filius Emekini*, argued that they and others had been witnesses when Lionnet I acquitted Gregory of twenty-five *libris Bruxellensibus*, which Gregory had promised to pay Lionnet I for the sale of a *fonds* of a house. This was the last mention of Lionnet I until 1253.

While Lionnet I did not appear as a donor again for sometime after 1242, other members of his family did. Included in this group was Lionnet’s granddaughter,
Mathilde. On 11 June 1253, the same year in which Lionnet I concluded his rule as châtelain and his son Lionnet II took up the reigns, Mathilde transported to the hospital of Saint John ten bonniers of land located at Petit-Bigard and held in fief to her grandfather, Lionnet I.28 After Mathilde’s donation, Lionnet I again emerged either sometime between 20-30 April 1253 or between 1-11 April 1254, at which time Lionnet I, Lionnet II, and Mathilde all gave the hospital of Saint John eight bonniers of arable land located at Molenbeek-Saint-Jean.29 The donation was most likely related the January 1209 grant by Godfrey and Heylewige, Lionnet I’s parents, which exempted the rents and charges owed on eight bonniers of land that the hospital of Saint John held in census at Petit-Bigard. Clearly the family was acting in solidarity for the benefit of the Saint John’s hospital.30

Finally, in October 1265, Arnoul Halve Elle gave to the hospital of Saint John a dîme located at Petit-Bigard partly in Ruysbroeck and partly in Leeuw-Saint-Pierre.31

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29 “…Noverit universitas vestra quod nos, pro animarum nostrarum, predecessorum successorumque nostrorum salute, libere conferimus in elemosinam domui hospitalis sancti Johannis in Bruxella octo bonaria terre arabilis jacentia in parochia sive in territorio ville de Molenbeke prope Bruxellam, firmiter et fideliter promittentes eidem domui bonam et legitimam de predicta terra contra omnes juri parere volentes prestare grandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 89, p. 127. The original is lost. While several witnesses are identified, including Johannes Rufus, or Jean Roede. Jean was noted as an opidanus Bruxellensis, or a townsman of Brussels.

30 See above for the details of this charter. Cartulaire de l’Hôpital Saint-Jean, SJ 7, p. 14. The original is lost.

The donation was without a doubt related to the previous donations of the family of Lionnet I concerning lands in Leeuw-Saint-Pierre.\textsuperscript{32} It was also the last appearance of Lionnet I in the documents.

For over fifty years, Lionnet I served as the châtelain of Brussels (1210-1253). During all but six years of that time and for several years after, Lionnet I and his family provided charity to the hospital of Saint John—they were undoubtedly acting in solidarity in their gifts to the institution. As one of the most powerful and visible figures in Brussels, Lionnet I not only gave much needed support to the newly-founded hospital, but he also set an example. Other burgenses would soon follow in Lionnet I’s path by contributing to the hospital. Many from the burgensis class had served as witnesses in Lionnet I’s charters, which provided a direct link between the generous châtelain and his family and the burgher families of Brussels. While many burgenses would serve only as legal representatives to the charters, some would still provide direct support for the hospital of Saint John. It is to them that we now turn.

In addition to the denominations that arose from the old and new burg came the term “burgher,”—or burgensis—which characterized the inhabitants living in the quarters of the city, new and old.\textsuperscript{33} Henri Pirenne explained that the “first known mention of this word occur[red] in France in 1007. It appear[ed] again in Flanders, at St. Omer, in 1056.”\textsuperscript{34} In some areas, the term was not universally applied, as many still sought to classify themselves as cives.\textsuperscript{35} As for Brussels, we do know that the term was certainly

\textsuperscript{32} See Cartulaire de l’Hôpital Saint-Jean, fn 2, p. 165.
\textsuperscript{33} See Pirenne, Medieval Cities, 218. The burgenses of Brussels may well have been part of either group.
\textsuperscript{34} Ibid., 151.
\textsuperscript{35} Ibid.
present in the twelfth- and thirteenth-century documents of the hospital of Saint John, which serves as proof that the burgenses of the city were defining themselves in opposition to their past—they were both a new and formidable group.

While new names identified the peoples of the new urban landscape, old traditions died hard. A practice still existed that had begun with a “tide of donation[s, which] flowed increasing rapidly throughout the tenth century, when kings and princes everywhere showed renewed enthusiasm for the foundation and endowment of monasteries.”36 With, however, the increase of cities, new people and new institutions sought to make similar donations, and the new-found power and wealth of the burgensis class opened up new “avenues of investment […]. There were always the poor to be helped by the foundation [and continued support] of hospitals.”37 Nowhere was this more true than in Brussels at Saint John’s hospital.

The appearance of burgenses in Brussels as associated with the hospital of Saint John began almost immediately in the hospital’s history. The first establishment of the original hospital brotherhood was for the priests, clerics, and burghers of the town.38 Both the religious figures of the town, as well as the burgenses, had a direct role in the newly founded hospital. From that point forward, the burgenses of Brussels were inextricably linked to the hospital, even as it grew into a formidable religious institution. Bonenfant noted that eleven people and their families39 could be included in the group of

38 “…presbyteris, clericis, burgensis Bruxellensis…” Cartulaire de l’Hôpital Saint-Jean, SJ 2, p. 7. The original is lost.
39 It is important to identify the families here since “medieval urban government was a family affair.” See Nicolas, *Urban Europe: 1100-1700*, 95.
burgenses associated with the hospital: Arken (Terarken), Béatrix, Boete, Clabot, Eggloy, Molenbeek, Platea, Roede, Rulin, Scipburg, and Spieghel. While all of these people had important roles in the newly founded hospital, and while all of these families will be discussed, those identified by Bonenfant were not the only burgenses associated with the hospital of Saint John. In fact, several other burgenses were part of the hospital’s history, including the Portre or Portere family and the Meier or Meyer family.

First included among the burgensis class was Godfrey Terarken (Arken). Godfrey initially appeared on 29 April 1216 when Lionnet I gave the hospital of Saint John rents from his dîme in Leeuw-Saint-Pierre. The witness list proved to be quite extensive: “Testes h[ujus] f[acti: G]odefridus, frater meus; Walterus de A; Arnoldus de Larbeke; Gis[e]linus de Hal; Walterus Clutinc; Franco de Uchel[e]; Arnoldus [de Overh]em; Godfridus, vill[icus; Henric]cus, frater ejus; Inge[l]bertus p[resby]ter.”

Walter Clutinc, among those included, was mentioned in a previous document in relation to the 14 August 1204 grant by Duke Henry I. In addition, Franco de Uchele (or Uckla) appeared as a witness in a much later July 1233 document, where as Gautier, lord of Aa, and his son, Arnoul, gave the hospital of Saint John “quince bonaria terre allodii nostri site in parrochia de Anderlecht juxta Racesputte et juxta vivarium ducis et quinque jornaria hereditatis nostre site in predicta parrochia juxt Hillenshout et juxt Epe.”

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42 See chapter five.
43 Cartulaire de l’Hôpital Saint-Jean, SJ 42, p. 67. CPAS, SJ 34.
The ties to other land transfers and key people in Brussels are certainly apparent in these examples. The most relevant fact, however, of the 29 April 1216 document was that the agreement was made in the home of Godfridi apud Archam.\textsuperscript{44} Godfrey was a *burgensis* of Brussels, a position that placed him at the forefront of many legal matters in the city. While he and other *burgenses* would rarely provide direct contributions to the hospital of Saint John, the *burgenses* would play important roles as aldermen, witnesses, and even provisors to the hospital of Saint John. They would serve as witnesses to charters and as arbitrators to disputes, both roles of which were pivotal to the continued success of the hospital. Although limited in the ways in which they supported the hospital, the *burgenses* were setting a precedent: their involvement, albeit limited, as urban officials participating in a local religious charity would serve as a model for others. Other groups in the urban social hierarchy, some new and some old, would continue this tradition. They would provide to the hospital of Saint John in the ways in which their status as urban occupants would allow.

While Godfrey Terarken was certainly identified as among the *burgenses* of Brussels, the documented evidence of his denomination came later.\textsuperscript{45} In May 1237, Lionnet I again gave to the brothers and the sisters of the hospital, as well as to the poor of the hospital of Saint John. This time, however, Lionnet I’s donation consisted of “*ecem bonaria paludis, jacentis inter villam que dicitur Everna et civum qui dicitur*”

\textsuperscript{44} *Cartulaire de l’Hôpital Saint-Jean*, SJ 11, p. 27. CPAS, SJ 40, fol. 4.

\textsuperscript{45} Godfrey Terarken appears again in 1222, 1237, 1238, and 1242. There are, however, no extant documents from 1222 indicating any appearance by him or even a family member. The same is true of 1238—no extant documents remain from this year. See *Cartulaire de l’Hôpital Saint-Jean*, p. 27, fn 2.
The witness list included *Godefridus de Archa*, or Godfrey Terarken. Unlike the earlier land transfer, however, Godfrey Terarken was identified in the charter’s witness list as a *burgenses*. Only one other member of the ten-person plus witness list was given a title: *Johannes Rufus*, or Jean Roede.

Later, in March of 1240 Godfrey again appeared when Lionnet I and his son conferred *in allodium* to Arnoul of Grand-Birard a *dîme* that he [Arnoul] held of theirs in *fief* at Leeuw-Saint-Pierre. Godfrey Terarken was among the witnesses but was not identified as a *burgenses*. Finally, in February 1242, two aldermen of Brussels—*Radulphus, dictus Meyer*, and *Willelms filius Emerkini*—along with others declared that they had observed Lionnet I pay Gregory, the son of Sisaire, a sum of “*viginti quinque libris Bruxellensis*.” Godfrey Terarken served as one of the witnesses.

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46 *Cartulaire de l’Hôpital Saint-Jean*, SJ 52, p. 78. CPAS, SJ 38, fol. 30.
47 *Cartulaire de l’Hôpital Saint-Jean*, SJ 52, p. 79. CPAS, SJ 38, fol. 30.
48 *Cartulaire de l’Hôpital Saint-Jean*, SJ 52, p. 79. CPAS, SJ 38, fol. 30. Jean Roede also appears in another donation that was made by Lionnet I in either April 1253 or April 1254. In this donation Lionnet I, his sons and Mathilde, his daughter, gave in charity to the hospital of Saint John eight *bonniers* of arable land located in Molenbeek-Saint-Jean: “…*Noverit universitas vestra quod nos, pro animarum nostrarum, predecessorum successorumque nostrorum salute, libere conferimus in elemosinam domui hospitales sancti Johannis in Bruxella octo bonaria terre arabilis jacentia in parrochia sive in territorio ville de Molenbeke prope Bruxellam…*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 89, p. 127. The original is lost. Jean appears in the witness list and is identified as a “*opidanus Bruxellensis*.” See *Cartulaire de l’Hôpital Saint-Jean*, SJ 89, p. 128.
49 “…*Ad noticiam omnium hominum volumus devenire quod nos Arnoldo de Bigardis, dicto Halfelle, decimam quamnam, quam a nobis jure feodalis tenuerat sitam in parrochia de Liewis, in allodium contulimus sibi et suis hereditibus perpetuo possidendam…*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 54, p. 81. The original is lost.
50 There were other occasions during which Lionnet I made grants to the hospital and in which Godfrey does not appear. See for example *Cartulaire de l’Hôpital Saint-Jean*, SJ 58, p. 86. CPAS, SJ 32, fol. 27.
51 “…*quales ei promisit de domistadio in quo dictus G. nunc manet, et plegios ipsius quitum clamavit, et ibi predictus L., castellanus, predicto G. promisit quod de dicto domistadio eundem G. garandire tenetur*…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 59, pps. 86-87. The original is lost.
While Godfrey Terarken was the first *burgensis* associated with donations to the hospital of Saint John, other *burgenses* soon followed. Henri Béatrix,\(^{52}\) for example, was also a *burgensis* of Brussels, an alderman of Uccle and Brussels, and one of the provisors to the hospital of Saint John. Henri first appeared among the list of witnesses in the May 1237 charter of Lionnet I,\(^{53}\) but he was also involved in the mistress of the hospital, Ide’s, declaration to claims to the hospital’s land.\(^{54}\) Ide used several witnesses to assert her claim, of which Henri was included. Henri’s successful accounts as a witness secured the hospital’s lands and claims.

After aiding Ide in the dispute, Henri then appeared more consistently in disputes regarding the hospital, including those on 6 July 1249 and 9 August 1249.\(^{55}\) In the first of the two disputes, he was identified as an alderman of Brussels, but in the second he appeared as one of the hospital provisors.\(^{56}\) His role evolved from a simple urban official who had a legal obligation to the city to an individual who had a direct concern for the hospital’s affairs. In addition, on 18 November 1253, Henri served as a witness in a dispute between the hospital of Saint John and the convent of Saint-Sépulcre of Cambrai concerning parishioner rights for people living in the part of the parish enclosed in the

\(^{52}\) *Or Henricus, filius quondam Beatricis.*

\(^{53}\) *Cartulaire de l’Hôpital Saint-Jean*, SJ 52, p. 78. CPAS, SJ 38, fol. 30.

\(^{54}\) *Cartulaire de l’Hôpital Saint-Jean*, SJ 73, p. 105-106. CPAS, SJ 44, fol. 1. In addition, another *burgensis* of Brussels appeared in the witness list: Ingelbertus de Speculo. See below for more on Ingelbertus.

\(^{55}\) For the details of these disputes, see *Cartulaire de l’Hôpital Saint-Jean*, SJ 74, pps. 106-108. CPAS, SJ 4, fol. 15. *Cartulaire de l’Hôpital Saint-Jean* SJ, 75, pps. 109-112. And see especially chapters six and seven, which provide the context and specifics of the disputes.

\(^{56}\) “…scabini Bruxellenses et predicti hospitalis provisores…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 75, p. 112.
hospital grounds. Once again, Henri’s advocating for the hospital assured that the hospital continued to receive rights of offerings of *denariis* and *candelis*, rights related to Christian burial in the hospital’s cemetery and by the hospital’s officials, and rights determined by the hospital’s jurisdiction.

The nature of Henri’s role changed somewhat in January 1250. During that month, Gertrude, the widow of Arnoul Ameke, gave to the hospital of Saint John all the holdings that she would be abandoning upon his [Arnoul’s] death. Here, Henri only appeared as an alderman in the document. The same was true of a March 1262 charter witnessed by Henri, in which Thomas Scewpman of Scipbrug established a rent for the profit of Alix, the daughter of Nicolas. In fact, the charter was probably only included in the hospital collection because Henri was a provisor of the hospital.

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57 *Cartulaire de l’Hôpital Saint-Jean*, SJ 86, p. 123. The original is lost. See also chapter seven for the details of the argument and the details of the document.
58 “…*Noverit universitas vestra quod, cum quedam particula parrochie de Capella infra septa hospitalis sancti Johannis sit sita et super oblationibus oblatis in funeribus quorumdam commorantium infra predictam particularam inter nos in curia Cameracensi controversia verteretur, nos, omne controversie occasionem de nobis volentes amovere et bonum pacis inter nos conservare, de consilio proborum, talem inter nos fecimus ordinacionem, utile ecclesiarum nostrarum considerate diligenter in eadem: quod illi, qui in posterum habitu dicti hospitalis sibi non assumpto infra predictam particularam in habitu seculari manebunt, tenebuntur peccata sua presbytero de Capella confiteri nisi ea alias confiteantur de ipsius licentia speciali; oblationes suas in quatuor majoribus solenpniitatibus videlicet in sollemnitate Omnium Sanctorum, Natalis Domini, Pasche et Pentecostes, unoquoque anno facere ad altare ecclesie de Capella supradicte; jura christianitatis recipere a presbytero memorato et infra cimiterium dicte Capelle, nisi alias, salvo jure parochiali, suam elegerint sepulturam, sepeliri; et oblationes que in funeribus eorum offerentur, tam in denaris quam in candelis, penes nos abbatem sancti Sepulcri, conventum ejus dem loci et presbyterum de Capella, remanebunt tanquam nostre, eo nobis non obstante quod predicti habitatores dicte particule infra septa dicti hospitalis suas habuerint masiones…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 86, pps. 123-125. The original is lost.
59 “…*contulit omnia quae post mortem ipsius de suis bonis manebunt hospitale sancti Johannis in Bruxella in elemosinam sub censu unius denarii* ad Natale Domini solvendi…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 77, p. 113. CPAS, SJ 29, fol. 2
60 “…*promisit dare Aleidi, quondam filie Nicholaii, ad Natale Domini proximo venturum unum modium siliginis pagabilis et rationabilis et ad Mayum proximum quinquaginta quinque solidos Bruxellensium denariorum bonarum et legalum, et ultimo quolibet anno, quamdiu ipsa Aleidis vixerit, semper ad Natale Domini unum modium dictae segetis et ad Maïum quinquaginta quinque solidos dictae monete…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 110, p. 150. The original is lost.
While these incidents proved to be minor occurrences in the history of the hospital, more significant disputes soon surfaced. Sometime before 24 June 1262, a disagreement occurred between the hospital and Ideloïe, the widow of Godfrey Onin, regarding the *fonds of Nieuwmolen* and the holdings situated nearby.\(^{61}\) Henri served as a witness and was also identified in the charter as an alderman. Later, in June 1262 the hospital of Saint John and Gertrude Schalie (Godfrey’s daughter) agreed to divide up the inheritance left by Godfrey Onin.\(^{62}\) Henri was again identified as both a witness and an alderman. Although he served as a witness and alderman to the last two disputes and although his role might have seemed limited, Henri provided an important service to the hospital of Saint John. The agreements decided upon increased the holdings of the hospital and guaranteed its continued success.

Similar service on the part of the *burgenses* of Brussels continued, including that by Henri *Urbani*. On 3 February 1242 Henri de Velst, a knight, gave to Saint John’s hospital and to other institutions, who were all responsible with the celebration of his death and that of his wife’s, Marguerite’s, rents that he assigned on a rural farm situated in Brusseghem. The farm was held by Henri in census to the cathedral chapter of Sainte-Gudule.\(^{63}\) Several witnesses appeared in the charter, including a *Henricus Urbani*, who


\(^{62}\) This is an incredibly long agreement between the two parties, and it lists out exactly what portion went to whom. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 112, pps. 153-154.

\(^{63}\) “…*Noveritis quod* Henricus, miles, de Velst, in presentia nostra constitutus, XVI d. annuatim in festo beati Blasi in perpetuum solvendos hospitali sancti Johannis et duodecim d. in monasterio beate Katerine et sex d. hospitali sancte Gudile et sex den. in domo leprosorum in Bruxella in elmosinam contulit, eosdem assignando ad quondam curtim citam (sic) in parrochia de Brucengem in loco qui dicitur Rajardengata, quam de nobis pro octo den. hereditarie possidet, adjuncta hac conditione quod, ipso et uxore sua
was probably a *burgensis* of Brussels. Henri *Urbani*, whose family denomination was *Portre* or *Portere*, also served as an alderman in Brussels in 1220.64

In addition, two rather late identifications in the documents of *burgenses* came in May 1274 and on 28 May 1298. In May 1274 Jean, the son of Gerelm, Guillaume *de Pille*, and his mother, Alix, conferred to Siger Portere, a *burgensis*, a *fonds* from a house located in Brussels outside of the Port of Coudenberg.65 The second indication from May 1298 concerned Frédéric d’Audenarde, who promised to pay Henri Boete, a *burgensis*, over the course of sixty years, an annual fee of thirteen *sous*, as well as to give in security in consent of the hospital of Saint John, a *fonds* of a house that he held for in Brussels near Ruysbroeck for sixty years.66 While it is not clear if Henri Boete had any familial ties to previous *burgenses* in Brussels, the surname *Portere* links Siger to Henri *Urbani*. The familial connections, although rather tenuous, demonstrate a trend where families were providing for the hospital of Saint John, perhaps even in solidarity.

The Meier family also appeared in the charters as *burgenses*. The first mention came in 1234 when Wiliarde, the widow of Jean Coude d’Obbrussel, gave charitably to

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64 *Cartulaire de l’Hôpital Saint-Jean*, SJ 57, p. 84. CPAS, SJ 22.
65 *Cartulaire de l’Hôpital Saint-Jean*, pps. 84-85, fn 9.
66 *Cartulaire de l’Hôpital Saint-Jean*, SJ 160, p. 205. The original is lost. 67 *Cartulaire de l’Hôpital Saint-Jean*, SJ 251, p. 305. The original is lost. For more on Boete see de Raadt, t. I, 287.
the hospital of Saint John. Half of the grant went to the care of the sick and the other half for lighting of the hospital.\textsuperscript{67} Wiliarde explains later in the charter that her and her husband’s gift to the poor and sick was arranged in the presence of brother Willelmo of the hospital of Saint John and of Rubino Meier, an alderman, good man, and \textit{burgensibus perpetuandam}.\textsuperscript{68} In addition, Rulinus Meier appeared in the May 1237 act where Lionnet I gave to the brothers and the sisters of the hospital and to the poor of the hospital of Saint John.\textsuperscript{69} Rulinus was included as one of the witnesses;\textsuperscript{70} he was not, however, identified in this charter as a \textit{burgensis}. Finally, in 1242 \textit{Radulphus, dictus Meyer}, and \textit{Willelmus filius Emerkini}, both aldermen, and others argued that they had been witnesses when Lionnet I had paid Gregory a sum of \textit{viginti quinque libris Bruxellensibus}.\textsuperscript{71} Similar to Godfrey Terarken, the charter placed \textit{Radulphus} at the forefront of the conflict and placed significant weight in his testimony for Lionnet I.

The Meier family did not appear again until October 1247 when Henrici Talpe (or Henri Mol—a \textit{burgensis} and alderman of Merchtem),\textsuperscript{72} the son of Raoul Meier and a \textit{burgensis}, served in the court of Siger Hobosch of Merchtem. Siger Hobosch was a

\textsuperscript{67} "\ldots notum fieri volo quod ego [contuli] pauperibus hospitalis beati Johannis in Bruxella de consilio virorum proborum undecim solidos [Brux]ellensium annuatim solvendos in Nativitate Domini, medietatem ad refectionem infirmorum, aliam medietatem ad luminaria hospitalis, de domistadio sito in platea que dicitur Smalebeca, inter domum lapideam Meinardi bone memorie et domum Henrici Lieveoghe\ldots\" Cartulaire de l’Hôpital Saint-Jean, SJ 47, p. 73. CPAS, SJ 33, fol. 47.

\textsuperscript{68} "\ldots Ut autem census dicte collationis legitimaretur pro remedio debitorum meorum et mariti mei Johannis, hanc elemosinam ordinavi coram Willelmo, filio Hospitis, et Rubino Meier, scabinis, ceterisque viris bonis et burgensibus perpetuandam\ldots" Cartulaire de l’Hôpital Saint-Jean, SJ 47, p. 73. CPAS, SJ 33, fol. 47.

\textsuperscript{69} "\ldots ecem bonaria paludis, jacentis inter villam que dicitur Everna et civum qui dicitur Elmp\ldots\" Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.

\textsuperscript{70} Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 79. CPAS, SJ 38, fol. 30.

\textsuperscript{71} "\ldots quales ei promisit de domistadio in quo dictus G. nunc manet, et plegios ipsius quitum clamavit, et ibi predictus Le., castellanus, predicto G. promisit quod de dicto domistadio eundem G. garandire tenetur\ldots" Cartulaire de l’Hôpital Saint-Jean, SJ 59, pps. 86-87. The original is lost.

\textsuperscript{72} For more on Henrici Talpe, see Bonenfant, \textit{Cartulaire de l’Hôpital Saint-Jean}, p. 103, fn 1.
knight who had heard the statements of Siger Penant and Godfrey. The men were renouncing their rights to the holdings that Siger Penant, through the consent of Godfrey and his brother Arnoul, had sold to the hospital of Saint John. Henrici’s service meant expanded holdings for the institution. Finally, in 1253 sometime after June 24, Mabilie, the widow of Thierry Balle, ceded to the hospital of Saint John a *bonnier* of land located in Koekelberg. Rolinus, *dictus Villicus*, served as a witness to the charter.

While they were not as prominent as the Meier family, the *Molenbeke* family did play an important role as *burgenses* in the city of Brussels. In August 1263 the abbot of Jette, Godescalc, transported *pro allodio* to a Bernard a house with estates that were formally of *Willelmi de Molenbeke* located near the Scipbrug in Brussels. Although Guillaume was mentioned in the charter, it was *Ewerwinus Cambitor, Willelmus de Platea, and Henricus, dictus Wert*, all aldermen of Brussels, who served as witnesses. Later, Guillaume of Molenbeek appeared again with the Scipbrug family when on 4

73 “...*Presentium testimonio notum faciamus universis quod Sigerus, dictus Penant, et Godefridus, filius fratris sui Arnoldi, coram nobis comparentes, omni juri quod in bonis, que dictus Sigerus Penant, de voluntate dictorum Godefri et Arnoldi, religioso domui hospitalis beati Johannis in Bruxella vendidit, ad judicium et dictum hominum nostrorum, presentibus et astantibus scabinis domini ducis, festucando ad opus dicte domus renuntiauerunt...*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 71, pps. 102-103. The original is lost.

74 “*Notum sit universis presens scriptum inspecturis quod Mabilia, relicta quondam Theoderici, dicti Balle, tradidit cum debita renunciatione subsecutae hospitali beati Johannis Baptiste in Bruxella bonarium terre site juxta Cockelberghe, pro recto allodio possidendum, promittens ei inde tanquam de allodio rectam warandiam...*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 87, p. 126. The original is lost.

75 Scipbrug was a commercial port in Brussels that stretched across the Senne River. Although the port itself had probably been constructed long before 1020, it was fully in use in the twelfth century. As Brussels increased in size and importance and as trade grew, so did the significance of the port. It became so important that by the twelfth century a road linked the port to Cologne via a trade route. See Claire Louis, *Schaalmodel: Brussel omstreeks het midden van de 13de eeuw*, accessed 10 April 2009 at www.brussel.be/artdet.cfm/docJxKozeHRDw4. Furthermore, although the document mentions Scipbrug, it was possible that the charter was also referring to the Scipbrug family since other ties existed between the Scipburg family and Guillaume of Molenbeke.

76 “*Notum sit universis quod vir discretus, dominus Godescalcus, abbas Jetthensis, contulit cum debita renuntiatione Bernoio, filio quondam Amelrici Cecilie, mansionem cum fundo, que quondam fuit Willelmi de Molenbeke, prout sita est versus Pontem Navium juxta Zennam, pro allodio, promittens ei inde rectam warandiam...*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 114, pps. 156-157. The original is lost.
December 1278 Bernard van der Scipbrug transported to the hospital of Saint John four houses with their fonds located near Werf. The lands were held pro allodio, and they were situated near the lands held by Guillaume of Molenbeke. Johannes de Platea and Henricus filius Geldulfi, aldermen of Brussels, served as witnesses to the charter.

In addition to the Meier and Molenbeke families, the family of the name of Spieghel appeared in many forms throughout the charters, including de Spigla, de Speculo and van den Spieghelei. The family served as aldermen in Brussels during the thirteenth, fourteenth and fifteenth centuries. As early as 12 August 1204, however, the family, and specifically Henricus de Spigla who served as a witness, appeared in the charter of Duke Henry I of Brabant, in which Henry gave charitably to the poor of the hospital of Saint John. Later, between 11 and 30 April 1232, Gautier, lord of Aa, and his son, Arnoul, gave to the hospital of Saint John a bonnier and a half of forested area of Eleshout near Aa and located in the parish of Anderlecht. Included in the list of witnesses was Henricus Speculum, whom Bonenfant identifies as of the same family as the previous donation. Just over a year later, the family surfaced again when Gautier, lord of Aa, and his brother, Arnoul granted in charity to Saint John’s five bonniers of

77 “Noverint universi quod Bernardus, dictus Bernoi de Ponte Navium, renuntiando contulit Johanni de Bovenberghe ad opus hospitalis beati Johannis Bruxellensis quatuor domos cum earum domistadiis sitis prope Werf prout hec tenebat Willemus de Molenbeke, pro allodio, promittendo ei inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 185, p. 239. CPAS, SJ 29, fol. 21.
78 Ibid.
79 For more details on this charter, see chapter five.
80 “…Vestra noverit universitas quod nos, pro remedio animarum nostrarum et antecessorum nostrorum et intuitu divine retributionis, quatuor bonaria nemoris et dimidium siti in parrochia de Anderlecht juxta A in Hillenshout domui religioso hospitalis silicet beati Johannis in Bruxella ad sustentationem pauperum ibidem jacentium libere et absolute contulimus in elemosinam, in posterum sicut allodium suum possidenda...” Cartulaire de l’Hôpital Saint-Jean, SJ 40, p. 65. CPAS, SJ 34, fol. 18.
land *allodii* and five *jornaria* of hereditable land located in the parish of Anderlecht.\(^81\)

Ingelbertus de Speculo, an alderman of Brussels, was among the witnesses. Later still in May 1237, Ingelbertus de Speculo appeared again as a witness when Lionnet I gave in charity to the brothers, sisters, and the poor of the hospital of Saint John. Lionnet I had provided ten *bonniers* of marsh land situated between Evere and Helmet.\(^82\) Lionnet I’s son, Godfrey, had provided his consent to the donation,\(^83\) and the charter guaranteed to protect the church and the gift against all laws that appeared.\(^84\) On 19 February 1239 Henri *de Crucebome*, called Zeelmacre, sold to Gautier of Haeren *unum bonarium terre allodii*.\(^85\) Ingelbertus de Speculo, identified as an alderman, served as a witness.

Finally, the family appeared one last time on 16 October 1284. This time, however, the members of the family did not serve as aldermen or witnesses but rather provided tangible goods to the hospital. Élisabeth, daughter of Henri van den Spieghhele, and her husband, Arnoul, ceded to the hospital of Saint John all the rights that they had

\(^{81}\) “...*Inde est quod nos universitati vestre notum fieri volumus quod nos in remissionem peccatorum nostrorum necon et antecessorum nostrorum quinque bonaria terre allodii nostri site in parrochia de Anderlecht juxta Racesputte et juxta vivarium ducis et quinque jornaria hereditatis nostre site in predicta parrochia juxta Hillenshout et juxta Epe in elemosinam contulimus hospitali beati Johannis in Bruxella ad opus pauperum eodem loco jacentium in perpetuum possidenda...*” Cartulaire de l’Hôpital Saint-Jean, SJ 42, p. 67. CPAS, SJ 34.

\(^{82}\) “...*Inde est quod ego, Leonius, castellanus Bruxellensis, presentium offitio, notum fieri volo tam presentibus quam futuris quod ego, pro remedio anime mee et pro animabus patris et matris mee necnon et filii mei, Goderfidi, et omnium amicorum meorum defunctorum et viventium, contuli in elemosinam fratribus et sororibus, necnon et pauperibus hospitalis sancti Johannis in Bruxella decem bonaria paludis, jacentis inter villam que dicitur Everna et vicum qui dicitur Elmpt...*” Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.

\(^{83}\) See above. Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.

\(^{84}\) “...*Repromisimus itaque dicto hospitali garandiam et defensionem de dicta elemosina contra omnes juri parere volentes...*” Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.

on two *fonds* of a house located in Brussels next to Muntersbrug Bridge.\(^8\) It is quite possible that the family’s earlier relations with the hospital encouraged Élisabeth and Arnoul to make the grant to the hospital.\(^8\) It is also quite possible that given the later date, a growing trend on the part of the *burgenses* and their families to provide not just services but also land to the hospital was emerging. While this is not as clear with the *burgenses*, such trends would become apparent with other groups in the urban landscape.

In addition, other trends regarding the *burgenses* were also emerging late in the thirteenth century. The previous indirect role of the *burgenses* continued to evolve into a more direct role. These transformations occurred when the weakening distinction between an upper *burgensis* and a middling fisherman merged in the person of Guillaume Clabot, who was identified in the documents as both a fisherman (*piscatori*) and as a *burgensis* (*oppidano*) of Brussels. His first appearance came sometime between 1 and 30 November 1276 when Henri, the abbot of Afflighem, and his convent sold to Guillaume Clabot and his wife three houses with their *fonds* and a small meadow. All of the items sold were located in Brussels near the modern *Marché-aux-Poulets*.\(^8\) On 30 November of that same year the abbot of Afflighem, Henri, and his convent then ceded *pro allodio* a residence with houses, *fonds*, and dependences in Brussels, also near the modern day

\(^8\) “Noverint universi quod Elizabet, filia quondam Henrici dicti de Speculo, et Arnoldus, maritus ejus, renuntiando contulerunt fratri Waltero de hospitali sancti Johannis Bruxellensis, ad opus ejusdem hospitalis, omne jus suum quod habebant et eis competebat in duobus domistadiis sitis prope pontem Monetarii, unde Godescalcus Cupre tenet unum et Johannes de Carlevelt aliud, pro allodio, promittentes inde rectam warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 202, p. 255. CPAS, SJ 32, fol. 54.

\(^8\) Cartulaire de l’Hôpital Saint-Jean, SJ 73, pps. 105-106. CPAS, SJ 44, fol. 1.

\(^8\) “…Noverit vestra universitas quod nos vendidimus bene et legitime Willelmo dicto Clabot, piscatori, oppidano Bruxellensi, et ipsius uxori tres domos cum earum fundis ac etiam parvo prato prato sito retro dictas domos, apud Bruxellam in vico per quem itur de ecclesia beati Nycholai versus Scepbrugghen sitas, prout Oda, filia quondam Everwigherii, ea tenebat et possidebat et nobis in elemosinam contulit, ab ipso Willelmo, ejus exore et eorum hereditibus imperpetuam vel prout ipsis placuerit possidendas…” Cartulaire de l’Hôpital Saint-Jean, SJ 169, p. 216. CPAS, SJ 32, fol. 19.
Marché-aux-Poulets. The witnesses included two aldermen of Brussels: Johannes de Senna and Henricus dictus Portre. In the document Guillaume was identified as a fisherman. In addition, the charter mentions a river, which would have been important to Guillaume’s trade. The river, simply named Rivum, is only identified by the modern location, pointing to the names of Schoenbeke, Spiegelbeke, and Coperbeke. These transfers and ceding finally made their way to the hospital of Saint John on 4 February 1284 when Guillaume Clabot ceded pro allodio half of his fonds and houses to Saint John’s hospital. He rented out the other half for the duration of his life. The document was witnessed by two aldermen of Brussels: Johannes de Platea, a fellow burgensis, and Godefridus Boiken.

While Guillaume played a central role in the previous transfers, later grants that involved him were of a different sort, namely the grants that followed tended to either encroach on Guillaume’s (former) property or added to the gifts that Guillaume had already made to the hospital of Saint John. On 2 April 1281, Michel de Leeuw ceded to

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89 “Notum sit universis quod vir religiousus, dominus Henricus, abbas Affligeniensis, cum debita renuntiatione contulit ex parte sua et ex parte conventus sui Willelmo dicto Clabot, piscatori, mansionem qua manserat Oda, filia Hedelwigis, prope Rivum et prout eadem Oda mansionem ipsum tenuerat cum domibus et fondis ante et retro et ejus pertinentitis, pro allodio, promittendo ei inde rectam warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 170, p. 217. CPAS, SJ 32.


91 This charter (4 February 1284) and the earlier 2 April 1281 charter both name Brother Waltero of the hospital of Saint John. Bonenfant does not include Waltero in the footnotes, nor does his appear in the index as one of the brothers of Saint John. The fact, however, that brother Waltero was prominent in both charters may suggest that he had a good relationship with Guillaume, that the amicable relationship led to Guillaume’s grants to the hospital, and that there may have been generally good relations between the burgenses and the hospital.

92 “Noverint universi quod Willelmu Clabot renuntiantio contulit fratri Waltero de hospitali sancti Johannis Bruxellensis ad opus ejusdem hospitalis medietatem de mansione, qua manet, cum domibus et fondis prope Arnolcum de Lapide inferiis tam ante quam retro sitis, pro allodio, promittendo ei inde rectam warandiam. Et hoc facto locavit eidem fratri Waltero ad opus dicti hospitalis aliquam inde medietatem tenendum annuatim ad vitam ejusdem Willelmi pro duobus denariis ad Natale Domini solvendis, promittendo inde warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 200, p. 253. The original is lost.
the hospital of Saint John property pro allodio and the money from two fonds located in Brussels near Muntersbrug bridge. The lands in the agreement were located near the garden of the Bogards and identified as being near the lands of Guillaume Clabot. Ingelbertus of Hoffle and Henricus Portre, both aldermen of Brussels, served as witnesses to the charter.

A second more convoluted charter appeared sometime before 24 June 1298. In the document, Laurent of Uccle and his wife Clarisse transferred to the hospital of Saint John half of a fonds of a house located behind their own residence. The hospital then transferred to the couple the other half of the property a titre viager in return for a payment of in census of five sous. Henricus Portre, who served as a witness to the 2 April 1281 charter, and Gerelmus Heinecart, aldermen of Brussels, served as witnesses.

93 “Noverint universi quod Michael dictus Leo renuntiando contulit fratri Waltero de hospitali sancti Johannis, ad opus ejusdem hospitalis, medietatem de dubious domistadiis sitis prope pontem Monetari, supra quorum unum manet Elizabet, filia quondam Anecoi dicti Obdane, et aliud facit ibi iusta vacuum prout extenditur ab ante verso justo ortum Begardorum et iusta ortum Willelmi dicti Clabot, promittendo inde warandiam tanquam de allodio...” Cartulaire de l’Hôpital Saint-Jean, SJ 191, p. 244. CPAS, SJ 32, fol. 53.
94 “…juxta ortum Begardorum …” The gardens were established in the neighborhood of Muntersburg and the ancient port of Noire. For more on ports, see the next chapter. Cartulaire de l’Hôpital Saint-Jean, p. 244, fn 5.
95 “…juxta ortum Willelmi dicti Clabot...” Cartulaire de l’Hôpital Saint-Jean, SJ 191, p. 244. CPAS, SJ 32, fol. 53.
96 Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 245. CPAS, SJ 32, fol. 53.
97 “Notum sit universis quod Laurentius de Uccle et Clarissia, ejus uxor, renunciando contulerunt fratri Godescalco, magistro hospitalis sancti Johannis Bruxellensis, ad opus ejusdem hospitalis, dimidietatem domistadii siti retro dictum Laurentium, prout se extendit usque ad mansionem Helewigis, relite Henrici de Waltermalre, pro alodio, promittendo ei inde [ad] opus dicti hospitalis rectam warandiam, retento sibi usufructu eorum penes dictam dimidietatem dicti domistadii...” Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 308. CPAS, SJ 29, fol. 22.
98 “…Quo facto, dictus frater Godescalco, magister hospitalis predicti, ex parte dicti hospitalis, contulit dictis Laurentio et Clarissie, ejus uxorii, aliam dimidietatem dicti domistadii tenendam et possidendam quandomd dicti conjuges vixerint vel alter eorum, pro quinque solidis Bruxellensium denarioe monete usualis communiter in bursa currentis semper ad Natale Domini solvendis, promittendo eis inde ex parte dicti hospitalis warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 308. CPAS, SJ 29, fol. 22.
Thanks to the transfer, the hospital was able to establish a twelve-foot wide passage or walkway on the holdings of the late Guillaume of Clabot near the *rue des Chevaliers*.

The creation of the structure proved important, since although streets and walkways “may not have been structures, […] they were an essential feature of the urban scene.” In the case of the hospital’s creation of the passage, the walkway may have ensured the easy transfer of sick patients. Any improvement, no matter how small, must have been welcomed. While neither of the documented transfers directly involved Guillaume, both indicated the powerful and significant position Guillaume must have had in the city. His lands, some of which were conveyed into the hospital’s holdings, were identified in the charters as significant landmarks in the city of Brussels, and his property eventually became extremely useful to the hospital itself.

Moreover, beyond Guillaume, it is certainly clear that by the latter half of the thirteenth century significant changes were occurring in the urban atmosphere. Although they are barely discernable within the *burgensis* class, they are nevertheless present. The *burgenses*, a class not traditional to the social and economic structures of the Middle Ages, emerged with the renewal of cities and trade. Their money-making abilities, ties to the land, and sometimes monopoly-like holds on trade positioned them at the top of the urban hierarchy. Thus, one of their supreme benefits and privileges was service as legal advisors and advocates. Many *burgenses* played the role of alderman and witness. For the hospital of Saint John, an institution born into the newly burgeoning city atmosphere,

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99 “…Item condictum fuit et est quod dictum hospitale viam largam duodecim pedum habere poterit de bonis quondam Willelmi dicti Clabot versus vicum Militum usque ad domistadium quod tenet vir discretus Balduinus de Herent, presbyter, officialis foraneus…” Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 308. CPAS, SJ 29, fol. 22.

100 Pounds, *The Medieval City*, 50.
this was certainly the case. Several burgenses served as aldermen and witnesses to the charters that involved the hospital. What proves significant is that more often than not, many of the witnesses and aldermen clearly acted on behalf of the hospital itself. Several of the burgenses went on to become provisors to the hospital, and some even made personal donations to the hospital. In some ways this role as undertaken by the burgenses comes as no surprise. They were, from the inception of the hospital, inextricably linked to the growth and continued support of the institution. The hospital, was after all, formed partly by them and for them, especially in the creation of an association where men who had money were allowed to retire there after surrendering their goods to the institution.

Slowly, though, an evolution began to occur. While it is barely visible in the documents of the hospital of Saint John, namely because of the limited materials that survive, the changes were indeed present. Some of the burgenses began to embody new roles as the thirteenth century came to a close, and some even made direct donations and land transferences to the hospital. In the latter half of the thirteenth century, the distinction between an upper burgenses and a middling fisherman even merged into one identity. This lessening of a social gap may seem insignificant. It is, however, profound. As will be shown, it was the middling peoples of the city social spectrum who began to donate profoundly to the hospital in the second half of the thirteenth century. Guillaume Clabot’s dual role as burgenses and fisherman links the original supporters of the hospital, those who founded and saw to the continued legal development of the hospital, with the new patrons of the hospital: fisherman, bakers, millers, blacksmiths, and even women. Before, however, turning to this new class, it is first important to look at one
other administrative group: the “supporters” of the hospital of Saint John, since this group
too embodies the merge between the classes of the social spectrum.

“Supporters,” Representatives, and *Mambours* of the Hospital

While the *burgenses* were certainly champions of the hospital in terms of the legal
help and sometimes land donations they provided, there were other administrative figures
among whom Paul Bonenfant identified with the title “supporters of the hospital of Saint
John.” Unlike the majority of the *burgenses* who served as either witnesses or aldermen
to the charters, the supporters sometimes made individual and family donations to the
hospital. The men and families, appear, however, mostly as “present and concerned with
the donations.” Ten individuals or families can be numbered in this group: Alberti de
Altogether, the group accounts for six documents, or 2% of the charters. Most of the acts
came rather late in the hospital’s history, namely after 1248—the beginning of the
hospital’s autonomous period. In some ways, the “supporters” provide the bridge
between the *burgenses* and those of new merchants in the town.

Sometime between 1 and 23 June 1263 Henri de Bigard of Capelle-Saint-Ulric,
transported in census to the hospital of Saint John seven *bonniers* of land held by him in
*fief* to Jean de Bigard near Capelle-Saint-Ulric. In return, the hospital of Saint John
remitted a money payment to Henri of an annual rent of eight *livres* and seven *deniers*.101

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101 “*Notum sit universis presens scriptum inspecturis quod, cum Henricus de Bigardis, dictus de Capella,
teneret a Johanne de Bigardis septem bonaria terre in pheodum in parrochia de Capella Sancti Ulrici,
ter ipsum capellam et domum Rasonis, dicti Beire, juncta strata dictam herstrate jacentia, idem
Henricus, de permissione et plenaria voluntate ac consensu dicti Johannis, tamquam domini huic facto
astantis, contulit et concessit eandem terram hospitali beati Johannis Baptiste in Bruxella hereditarie
possidendum et tenendum sub annuo censu septem denariorum Bruxellensium ipsi Henrico et ejus
Present and concerned with the exchange (interfuerunt) were several supporters of the hospital, including: *Geldulphus, dictus Taye, Amelricus, dictus Magister*, and *Henricus, dictus de Brania*. While little is known about these people as a group or as individuals, it should be noted that Henri was also a bootmaker: “*factor caligarum.*”  

Henri de Braine appeared again later that year. Between 2 and 23 December 1263 Henri de Bigard of Capelle-Saint-Ulric made another transfer to the hospital of Saint John. This time the transfer included eleven *journaux* of land located next to Capelle-Saint-Ulric, also held by Henri in *fief* to Jean de Bigard. Similar to the previous agreement, the hospital contracted to remit a payment to Henri of a perpetual rent. The men present and concerned with the exchange included Henri de Braine, as well as *Lambertus, dictus Blaes* and *Henricus, dictus Coman*. Henri was once more identified as a “*factor caligarum.*” In addition, *Johannis de Platea*, a *burgensis* of Brussels, was mentioned, as well as an *Andreas, “carnifex,”* and *Henricus, a “candelarum factor.”* The combination of *burgenses*, supporters, and tradesmen suggests not only a lateral influence among the groups, but also a collective urban force that clearly saw the benefits of providing for the hospital of Saint John.

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103 *Notum sit universis presens scriptum inspecturis quod cum Henricus de Bigardis, dictus de Capella, teneret a Johanne de Bigardis undecim jornalia terre, parum plus vel minus, in feodum, in parrochia de Capella Sancti Ulrici prope stratum dictam herstrate jacentia, idem Henricus, de permissione et plenaria voluntate ac consensu dicti Johannis, tamquam domini huic facto astantis, contulit et concessit eandem terram hospitali beati Johannis Baptiste in Bruxella hereditarie possidendam et tenendum sub annuo censu trium denariorum Bruxellensium, ipsi Henrico et ejus successoribus a dicto hospitali in perpetuum in Nativitate Domini solvendorum...* *Cartulaire de l’Hôpital Saint-Jean*, SJ 116, p. 159. CPAS, SJ 36, fol. 50.
104 *Cartulaire de l’Hôpital Saint-Jean*, SJ 116, p. 159. CPAS, SJ 36, fol. 50.
105 Ibid.
Henri Coman, mentioned earlier, appeared on his own on 20 November 1272 when the dean of the chapter of Sainte-Gudule sold to Henri the fonds of a house that he inhabited and which constituted a census held by the hospital of Saint John. Shortly before this charter, however, two more supporters appeared in the documents. Unlike Henri, the men appeared as present and concerned and not part of the main contract. The event occurred in September 1271 when Gautier, son of Henri de Capelle-Saint-Ulric, after the death of his father obtained from Jean de Bigard ten bonniers minus one journal of land located in Capelle-Saint-Ulric. It was again part of the lands that Henri had held in fief to Jean and part of the lands that had been given in census to Saint John’s. Gautier, renounced in profit to the hospital part of the money. Like the others Gerardi Hondelose and Godefridi dicti Pausebru appeared as present and concerned.

Finally, in February 1284 the hospital of Saint John invested goods exchanged with Francon Suaef and his father, Arnoul Suaef, at Saint-Gilles. The hospital

107 “…Noverit universitas vestra quod Walterus, filius quondam Henrici dicti de Capella, post mortem dicti patris sui comparavit coram domino Johanne de Bigardis, milite, tamquam domino suo, et coram hominibus ipsius domini Johannis hereditarium et requiritab ab eo tale pheodum quale predictus Henricus, pater ejus tenuerat ab eodem, quod ipse Henricus heredaverat illis de hospitali beati Johannis in Bruxella, videlicet decem bonaria terre minus jornali, in territorio de Capella Sancti Ulrici prope stratum dictam herstrate jacentia, sub annuo censu decem denarium Bruxellensium ad Natale Domini solvendorum...” Cartulaire de l’Hôpital Saint-Jean, SJ 146, p. 189. The original is lost.
108 Cartulaire de l’Hôpital Saint-Jean, SJ 146, pps. 189-190.
mistress, Margareta, oversaw the charter. Later, Francon appeared again on 20 December 1299. On this date, Jean Slabbart, the son of Thomas ban den Bossche, renounced in favor of the hospital of Saint John part of a large *dîme* located in Tourneppe that had belonged to him. In return, the hospital granted to him a life annuity. Mentioned in the charter were several supporters of the hospital, including: *Granconis, dicti Suaef, Henrici dicti Cassart*, [*… et Johannis Alberti de Capella*](#).

In addition to the supporters, there were two cases where men serve as representatives of the hospitals in the charters. The men were identified as *mediante mortali censuario*, and included in this group were *Henrico, dicto Gastwerdre* and Gautier de Volsem, or *Walterus de Volcghem*. Henri was identified in 1266 sometime after August in a charter where Hedwige, daughter of Francon van der Maerct, renounced in profit to the hospital of Saint John a *bonnier* of land located at Woluwe and held in

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The Cassarts were aldermen of the city during the fourteenth century. See Cartulaire de l’Hôpital Saint-Jean, p. 321, fn 3.

"*Cartulaire de l’Hôpital Saint-Jean, SJ 266, p. 321. CPAS, SJ 45, fol. 25.*"

"*Cartulaire de l’Hôpital Saint-Jean, SJ 366.*"

"Bonenfant uses the following phrase: “*homme vivant et mourant constitué par l’hôpital Saint-Jean.‖* See Cartulaire de l’Hôpital Saint-Jean, p. 366.

The full phase from the charter is: "*Quo facto, dictum hospitale recept dictam terram, mediante mortali censuario, videlicet Henrico, dicto Gastwerdre, hereditarie possidendam, sub eo censu qui inde exit.‖* Cartulaire de l’Hôpital Saint-Jean, SJ 125, p. 168. CPAS, SJ 46, fol. 23.

The entire phrase reads: “*Postmodum autem Walterus de Volcghem receptit dictum bonarium terre, tamquam mortalis censuarius, ad opus dicti hospitalis, a Ghiselberto, villico ipsius Leonii, hereditarie possidendum.‖* Cartulaire de l’Hôpital Saint-Jean, SJ 166, p. 212. The original is lost.
census of Sainte-Gertrude of Nivelles. Gautier also served as a representative for the hospital in January of 1275 when a Guillaume ceded to the hospital of Saint John a *bonnier* of land located at Petit-Bigard and held in census to Lionnet of Aa. Beyond their identification as representatives, little is known about the men.

The final group to note in this category is the *mambours*. Simply, “the chief lay officials of the parish were the churchwardens (*mambours*) elected by the heads of households in the parish. They were responsible for the finances of the parish, and with the vicar they appointed the chaplains.” In addition, “the word *mambour* means “guardian”; while in parish usage it generally means “churchwarden,” it could also be used in one of its more general senses to mean a retained attorney at law (in full *mambour en justice*).”

There was only one example of a *mambour* in the documents of the hospital of Saint John. Marie, the daughter of Francon Rolibuc, transported to the hospital of Saint John *sex jornali terre* located between Bovenberg and Auderghem on 4 April 1288. Francon, sometimes called Francon de Coudenberg, the son of the late

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117 “Notum sit universi quod Heilewidis, filia quondam Franconis de Foro, resignavit cum debita renuntiatione Johanni de Ossenhem, villico sancte Gertrudis Nivellensis, ad opus hospitalis beati Johannis in Bruxella bonarium unum terre site apud Woluwe, in loco dicto Putdale...” Cartulaire de l’Hôpital Saint-Jean, SJ 125, p. 168. CPAS, SJ 46, fol. 23.

118 “Universis presens scriptum inspecturis, scabini Leonii de Aa in Lewis, salutem. Noveritis quod Willelmus, dictus quondam de Prendael, reportavit cum debita renuntiatione in manus villici dicti Leonii, ad opus hospitalis beati Johannis in Bruxella, bonarium unum terre, parum plus vel minus, prout situm est apud Obbidgardum ante portam domini Willemi Lose, militis.” Cartulaire de l’Hôpital Saint-Jean, SJ 166, p. 212.


120 Ibid.

121 “Noverint universi quod Maria, filia quondam Franconis dicti Rolibuchs, cum debita renuntiatione contulit fratri Waltero de hospitali sancit Johannis in Bruxella ad opus dicti hospitalis sex jornalia terre ad mensaram, jacentia in duobus peciis inter Bovenberga et Ouderghem, pro allodio, promittens ei ad opus ejusdem hospitalis inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 207, p. 260. CPAS, SJ 46, fol. 27.
Jean de Coudenberg,\textsuperscript{122} was an alderman of Brussels and was a \textit{mambour} of the hospital of Saint John.\textsuperscript{123} While nothing more is known of this instance or of Francon, it might be inferred that the lateness of the transfer suggests that the position of the \textit{mambour} was related to the hospital’s autonomous phase.

Although the “supporters,” representatives, and \textit{mambours} of the hospital make up a small proportion of the extant documents, their importance to the hospital of Saint John was still substantial. These laymen clearly championed the hospital of Saint John. With the exception of the \textit{mambour} Francon, they did not typically serve as witnesses or as aldermen, and they were certainly not identified as \textit{burgenses}. The supporters were, however, more than simple bystanders. Their clear identification in the charters points to their overall importance. M. T. Clancy has identified the significance behind seeing and hearing documents, as well as the noteworthy role of the people involved in the legal procedures of document creation. He claims that “documents changed the significance of bearing witness by hearing and seeing legal procedures, because written evidence could be heard by reading aloud or seen by inspecting the documents.”\textsuperscript{124} The writer clarified who saw and heard the document.\textsuperscript{125} In this case specifically, the supporters saw and heard the document, namely for the benefit of the institution.

The identification of the supporters and representatives thus proves important for the changes that were occurring in the ways in which documents were used. More importantly for this study, the recognition of the supporters proves pivotal in

\textsuperscript{122} \textit{Cartulaire de l’Hôpital Saint-Jean}, XXXII.
\textsuperscript{123} Ibid., 260, fn1.
\textsuperscript{124} Ibid., 204.
\textsuperscript{125} Ibid.
understanding the new and substantial role of the townspeople. As already indicated, these men were not always *burgenses*. Many were tradesmen—tradesmen whose presence was obviously valued. And while they were emerging in the cityscape in the thirteenth century as noteworthy participants in the social, legal, and political matters of their town, these tradesmen were part of the same groups of people who would go on to become some of the most staunch patrons of the hospital of Saint John.

The Provisors of the Hospital and their Families

The final group related to the lay administration of the hospital of Saint John was the provisors. Although the provisors of the hospital often acted on behalf of the hospital itself, the group must be discussed in conjunction with the laity. After all, the provisors were formed from the laity despite their “religious” and administrative roles within the hospital. In most cases, the hospital provisors did actually have lay positions in the community, and most appeared in the documents in the mid- and later-thirteenth century, after the bishops quit governing so strictly and after the hospital entered into its autonomous phase. In fact, Paul Evrard argued that after 1274 the hospital found the protection of the papacy less necessary because of heightened communal involvement, namely thanks to the hospital provisors.\(^\text{126}\)

Although the provisors were involved with and oversaw the hospital’s affairs, they were still inextricably linked to the society from which they came. Many of the provisors were identified throughout the charters as *burgenses*, and most of the provisors

came from the urban patrician class. The provisors were also tied to the aldermen of Brussels and surrounding areas. Bonenfant explains that during the thirteenth century especially, the provisors of the hospital were the aldermen. Yet, unlike the majority of the burgenses who were examined earlier, most of the provisors had a direct concern for the hospital of Saint John. As provisors to the hospital, they not only provided the legal and administrative needs of the hospital, they also provided spiritual and charitable support. The provisors included: Henri Béatrix, Guillaume Blomart, Jean Clivere, Guillaume De Platea and the De Platea family, Jean Gastwerdre, Brother Frédéric, Brother Gautier, Gerelm or Gerelin Heincart, Jean van der Sennen, Érerwin Vos, Henri Wert, and Éverwin II de Wisselere, also called Campsore or Campsor.

Already mentioned as a burgensis of Brussels was Henri Béatrix. Henri Béatrix also served as an alderman of Uccle and Brussels and was one of the provisors to the hospital. He appeared first among the list of witnesses in the May 1237 charter of Lionnet I, and was also involved in Ide’s, the mistress of the hospital, declaration to claims to the hospital’s land. Moreover, Henri appeared in two disputes regarding the hospital on 6 July 1249 and 9 August 1249. As explained previously, the nature of Henri’s role changed somewhat in January 1250. During that month, Gertrude, the widow of Arnoul Ameke, gave to the hospital of Saint John all the holdings that she

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127 See Cartulaire de l’Hôpital Saint-Jean, XXII.
128 Ibid. While I am not conducting an analysis of the aldermen of Brussels, I am concerned with those who were associated with the hospital, their status in society, and their families.
129 Here, for sake of clarity, the provisors are presented in alphabetical order. Thus, some of the dates jump back and forth.
130 Or Henricus, filius quondam Beatricis.
131 Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 78. CPAS, SJ 38, fol. 30.
132 Cartulaire de l’Hôpital Saint-Jean, SJ 73, pps. 105-106. CPAS, SJ 44, fol. 1. See also chapter seven.
133 For the details of these disputes, see Cartulaire de l’Hôpital Saint-Jean, SJ 74, pps. 106-108. CPAS, SJ 4, fol. 15. Cartulaire de l’Hôpital Saint-Jean, SJ 75, pps. 109-112.
would be abandoning upon his death. Here, Henri only appeared as an alderman. The same is true of a March 1262 charter witnessed by Henri. Sometime before 24 June 1262, another disagreement arose between the hospital and Ideloïe, for which Henri served as a witness and was identified as an alderman. Later, in June 1262 the hospital of Saint John and Gertrude Schalie divided up in common accord the succession of Godfrey Onin, the father of Gertrude. Henri appeared as both a witness and an alderman. His role in hospital affairs, although he was a provisor, was rather limited to the legal and administrative well-being of the hospital. While some of the provisors would embody a similar legal and administrative role, others would take on a more active spiritual role.

A clear example of an active provisor came in the form of Guillaume Blomart. On 5 April 1277 the mistress, brothers, and sisters of the hospital of Saint John, as well as the provisors of the hospital, including Guillaume Blomart, demanded that Enguerrand II, the bishop of Cambrai, give power to Jean Hont, the dean of Malines and another provisor of the hospital, so that he could consent to the sale of some holdings. As

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134 “...contulit omnia que post mortem ipsius de suis bonis manebunt hospitali sancti Johannis in Bruxella in elemosinam sub censu unius denarii ad Natale Domini solvendi...” Cartulaire de l’Hôpital Saint-Jean, SJ 77, p. 113. CPAS, SJ 29, fol. 2.
135 “...promisit dare Aleidi, quondam filie Nicholaii, ad Natale Domini proximo ven turum unum modium siliginis pagabilis et rationabilis et ad Mayum proximum quinquaginta quinque solidos Bruxellensium denariorum bonarum et legalium, et ultimo quolibet anno, quamdiu ipsa Aleydis vixeret, semper ad Natale Domini unum modium dicte segetis et ad Maium quinquaginta quinque solidos dicte monete...” Cartulaire de l’Hôpital Saint-Jean, SJ 110, p. 150. The original is lost.
138 “Reverendo in Christo patri ac domino, I., Dei gratia venerabili Cameracensi episco po, magistra, fratres et sorores hospitalis sancti Johannis in Bruxella, Willelmus ductus Rex, miles, Willelmus B lo mart, Johannes Losa, et Johannes de Senna, dicti hospitalis in temporalibus provisores, salutem et tam paratam quam debitam in omnibus et per om nia reverentiam cum orationibus suis in Christo devoti...” Cartulaire de l’Hôpital Saint-Jean, SJ 175, p. 223. CPAS, SJ 36, fol. 16. For more on the details of the charter, see chapter seven. In addition, Jean Hont is identified in the charter as a provisor of the hospital. Hont also
shown in an earlier chapter, the brothers, sisters and provisors of the hospital were upset with the neglect of the bishops of Cambrai and thus petitioned for more direct intervention. One of their main concerns was with the local cathedral chapter of Sainte-Gudule, which had been causing some problems for the hospital. This was one of the few instances when the provisor took such a direct role in hospital affairs.

Guillaume Blomart appeared again on 18 September 1285 when Gertrude Schalie transported *pro allodio* and for the profit of the sick at the hospital of Saint John one-third of lands located at Marché-au-Bétail in Brussels, as well as rights on a piece of land located at Ruysbroeck. She received from the hospital a life annuity from these holdings and a payment of an annual census amounting to *uno denario*. Instead of playing a direct role as he did before, Guillaume Blomart, as well as *Willelmus de Lapide*, both of whom aldermen of Brussels, served as witnesses to the charter.

Jean Clivere was not as directly involved with the hospital as Guillaume had been, but he did appear several times in the course of the history of the hospital between 1249 and July 1262. During those thirteen years, Jean provided his support as a provisor to the hospital, he provided official legal testimony to the documents, and he strengthened the weight of the agreements by affixing the seal of the provisors to the
charters. Most of the time Henri Béatrix was present with him. For example, on 6 July 1249 Jean was identified along with Henri Béatrix as an alderman of Brussels and a provisor to the hospital. Later, on 9 August 1249, Jean appeared again with Henri Béatrix as an alderman of Brussels and as a provisor to the hospital. The two men provided consent to the document and their seal was affixed.

In regards to the seal of the provisors it is important to note that “seals, signa in Latin, attached to charters were seen by many contemporaries in a similar way to ‘signs’. […] To medieval people they [seals] may have appeared rather as visible and tangible objects symbolizing the wishers of the donor. The seal was significant even without the document.” In addition, “the ‘signs’ attached to documents, whether they took the form of inscribed knives or impressed wax or even ink crosses made by the witnesses, all helped to bridge the gulf between the traditional and the literate way of recording transactions.” This proves significant since writing had not always been trusted: “before documents were used, the truth of an event or transaction had been established by personal statement, often made on oath, by the principals or witnesses.” This may have been the case in Brussels, and the affixing of the seal onto the documents may have been merely a symbol of the authenticity of the document. Furthermore, the use of the seal by the provisors speaks to the power and trust that was placed in these lay officials.

140 Cartulaire de l’Hôpital Saint-Jean, SJ 74, pps. 107-108. CPAS, SJ 4, fol. 15.
141 “…scabini Bruxellenses et predicti hospitalis provisores, ex altera, unanimiter consentimus et eam sigillorum nostrorum munimine cum appensione sigillorum arbitrorum predictorum, qui dictam ordinationem in testimonium dicte ordinationis ab ipsis facte ordinatis sigillarunt, roboramus...”
Cartulaire de l’Hôpital Saint-Jean, SJ 75, pps. 110-112. The original is lost.
142 Clancy, From Memory to Written Record, 207.
143 Ibid., 208.
144 Ibid., 232.
who had some jurisdiction over the hospital. This fact is only augmented by the notion that at times, both the seal and the naming of the witnesses appeared in the document, as it does above. In these cases, “in combing a device or signum with the signatory’s name, a seal was no different from a notarial form of authentication.”

In August 1249 Jean was again identified among the witnesses along with Henri Béatrix as an alderman of Brussels. The men gave their consent and power by affixing their seal. Four years passed before Jean surfaced again. This time Jean was found on 7 July 1253. He was identified as a provisor to the hospital along with Daniel de Obhem. That same year on 18 November 1253 Jean appeared as a provisor to the hospital along with Henri Béatrix and the knight, Éverwin Vos. The document was marked by the seal of the provisors: “sigillis provisorum nostrorum.”

Finally in June 1262 two documents were written, one before 24 June and one after. The one before 24 June included Jean as a witness along with Henri Béatrix, both of whom were identified as aldermen. In addition, the charter indicated that the seal of the men was affixed: “quorum sigilla presentibus sunt appensa.” The later charter that came after 24 June 1262 showed Jean as a witness along with Henri Béatrix and

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145 Ibid., 245.
146 “…scabini Bruxellenses et predicti hospitalis provisores, ex altera, unanimous consentimus et eam sigillorum nostrorum munimine cum appensione sigillorum arbitrorum predictorum, qui dictam ordinacionem in testimonium dicte ordinationis ab ipsis facte ordinatis sigillarunt, roboramus…” Cartulaire de l’Hôpital Saint-Jean, SJ 75, pps. 110-112. The original is lost.
147 Cartulaire de l’Hôpital Saint-Jean, SJ 85, p. 123. CPAS, 34, fol. 20.
148 See below for more on Everwin Vos.
149 Cartulaire de l’Hôpital Saint-Jean, SJ 86, p. 125. The original is lost.
150 Cartulaire de l’Hôpital Saint-Jean, SJ 111, p. 152. CPAS, SJ 44, fol. 3.
Johannes de Senna, all of whom were aldermen of Brussels. Again, the charter indicated that their seal was affixed: “quorum sigilla in testimonium presentibus sunt appensa.”

The importance behind the appending of one’s seals was profound and linked directly to the rise of literacy and the transformation from an oral to a written society. As will be noted later, literacy in the high Middle Ages does not parallel literacy today. In fact, literacy could have been as simple as the “possession of a seal bearing the owner’s name[, which] comes closest to the modern criterion of making the ability to sign one’s own name the touchstone of literacy.” If this was the case, then all of the hospital provisors, who were armed with their own seals, were literate. Furthermore, “although the possessor of a seal might not be able to write, he or she was a person familiar with documents and entitled to participate in their use.” This was certainly the case of the provisors; they were both familiar with the documents and entitled to participate in their use. What follows is clear proof that the provisors were the legal and administrative minds behind the hospital of Saint John. They were clearly “literate” and they clearly demonstrated expressed concern with the hospital, its holdings, and its continued success.

Guillaume De Platea, son of Arnoul, appeared throughout the documents as de Via Lapidea, Rex, or Coninc. He served as an alderman in Brussels until 1285, and he was cited as a knight from 1267 to 1284. Only in 1277 was he found acting as a provisor to the hospital. He also, however, probably served in the lay court of Brussels, which

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152 Clancy, From Memory to Written Record: England, 1066-1307, 184.
153 Ibid.
154 For all information on Guillaume, see Cartulaire de l’Hôpital Saint-Jean, p. 192, fn 2.
was indicated in the documents on 3 September 1281. In addition, Guillaume had three sons, Guillaume, Jean, and Arnoul, all of whom appeared in the documents.

Guillaume’s (the elder) earliest appearance came in August 1263 when he served as a witness to a charter.155 He was identified along with Everwinus Cambitor and Henricus, dictus Wert as aldermen of Brussels. In October 1265, Guillaume appeared again in an act where Arnoul, son of Heineman Aubert, renounced all rights on the holdings that were in the possession of and held by the hospital of Saint John and Arnoul’s relative, Gertrude.156 This time, however, Guillaume was the author of the charter, along with Arnoldus, dictus Tuninc. Both men were listed as aldermen of Brussels. In addition to their authorship and testimony, the seal of the aldermen was affixed to the document: “In cujus rei testimonium, nos, scabini predicti, sigilla nostra presentibus duximus apponenda.”157 Guillaume acted in a similar manner on 10 June 1266. He was the author, along with Johannes, filius Gerelmi, of an agreement where Gertrude Schalie made it known that the hospital of Saint John had sold to her certain

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155 Cartulaire de l’Hôpital Saint-Jean, SJ, 114, p. 157. The original is lost.
156 “...Noverint universi quod Arnoldus, filius quondam Heinemanni, dicti Aubert, coram nobis constitutus, dimisit et clamavit, spontanea voluntate sua, omne jus quod dicebat, jactabat et affirmabat se et patrem suam habere et sibi competere vel posse competere in bonis que hospitale beati Johannis in Bruxella et Gertrudis, consanguinea ipsius Arnoldi, possident et tenent sive in alodio seu hereditariis vel feodalibus aut aliis quibuscunque bonis, quatum liberum et penitus absolutum comprehendens et in se recipiens materteram suam Elyzabeth...” Cartulaire de l’Hôpital Saint-Jean, SJ 123, p. 166. The original is lost.
157 Cartulaire de l’Hôpital Saint-Jean, SJ 123, p. 166. The original is lost.
holdings from part of her inheritance.\(^{158}\) The men served as witnesses and attached their seal.\(^{159}\)

On 3 December 1271, however, Guillaume’s role changed significantly. He went from being an alderman to a donor to the hospital. Jean Pipenpoy, the dean of Sainte-Gudule, Guillaume, identified as a knight, and Gilles Lose ceded to the hospital of Saint John octo bonaria terre, which was located between Melsdal and Veeweide.\(^{160}\) The land was probably wooded and on the territory of Woluwe-Saint-Pierre.\(^{161}\) Serving as witnesses to the charter were two aldermen of Brussels: Godefridus de Paihuse and Johannes de Platea, the son of Guillaume.

Guillaume’s growing interest in the hospital again morphed on 5 April 1277. Guillaume was identified in the charter among the provisors of the hospital who petitioned the Bishop of Cambrai, Enguerrand II, for intervention in hospital affairs.\(^{162}\)

In addition, his seal was attached to the document.\(^{163}\) Yet, Guillaume returned to his normal role on 3 September 1281. Here, Guillaume, identified as Guillame de Platea,
was cited as a witness, knight, and alderman of Brussels.\textsuperscript{164} While he was not identified as a provisor to the hospital, his seal did adorn the document.\textsuperscript{165} The charter for which Guillaume provided his services included an agreement between the monastery of Ninove and the hospital of Saint John. The monastery transported to the hospital of Saint John \textit{duodecim bonaria} of arable land located at Neerpede and held \textit{pro allodio}, as well as \textit{undecim jornalia} of marshland held in census of the duke of Brabant. Later, on 19 April 1282, the abbot and the convent of Ninove sold to Saint John’s their holdings at Pede.\textsuperscript{166} The lay court of Brussels oversaw the agreement; thus, Guillaume was probably present as part of the court.\textsuperscript{167}

A few years later Guillaume resurfaced again on 16 October 1284, but this time he appeared as \textit{Willelmus dictus Rex}. He was identified as a knight and an alderman and served as a witness to the charter.\textsuperscript{168} The last two appearances of Guillaume came first in September 1294, when Guillaume was noted as \textit{Willelmus de Platea, dictus Rex}.\textsuperscript{169} He served as an alderman and witness to the charter, but there was no indication of a seal. Finally, on 6 August 1297 Guillaume appeared as \textit{Willemuse Rex}, alderman. He served as a witness and his seal was attached.\textsuperscript{170}

\textsuperscript{164} Cartulaire de l’Hôpital Saint-Jean, SJ 194, pps. 247-248. CPAS, SJ 34, fol. 22.
\textsuperscript{165} \textit{“...quorum sigilla in predictorum tetimonium presentibus litteris succ appensa...”} Cartulaire de l’Hôpital Saint-Jean, SJ 194, pps. 247-248. CPAS, SJ 34, fol. 22.
\textsuperscript{166} Cartulaire de l’Hôpital Saint-Jean, SJ 196, pps. 249-250. CPAS, SJ 34, fol. 23.
\textsuperscript{167} See Cartulaire de l’Hôpital Saint-Jean, p. 250, fn 1, which refers the reader back to the 3 September 1281 charter in which Guillaume took part.
\textsuperscript{168} Cartulaire de l’Hôpital Saint-Jean, SJ 202, p. 255. CPAS, SJ 32, fol. 54. While the charter did not state that his seal was affixed, Bonenfant indicates that it was. See Cartulaire de l’Hôpital Saint-Jean, p. 255.
\textsuperscript{169} Cartulaire de l’Hôpital Saint-Jean, SJ 234, p. 287. CPAS, SJ 19.
\textsuperscript{170} \textit{“...quorum sigilla his litteris sunt appensa...”} Cartulaire de l’Hôpital Saint-Jean, SJ 246, pps. 298-299. CPAS, SJ 42, fol. 23.
While Guillaume was obviously a prominent member of the Brussels community and served an important judicial role to the hospital, he was not the only member of his family to appear in the documents. His son, Jean de Platea appeared throughout the later thirteenth-century history of the hospital. Between 2 and 23 December 1263 Henri de Bigard of Capelle-Saint-Ulric made a transfer to the hospital of Saint John of eleven journaux of land located next to Capelle-Saint-Ulric, which was held by Henri in fief to Jean de Bigard.¹⁷¹ The hospital contracted to remit payment to Henri of a perpetual rent.¹⁷² The men present and concerned with the exchange included Johannis de Platea, who was identified as a burgensis Bruxellensis, which probably signifies that he was serving as a “supporter” to the hospital.

In most cases, however, Jean de Platea appeared among the witnesses. He was identified as an alderman of Brussels in August 1264,¹⁷³ in January 1270,¹⁷⁴ between 13 and 30 of April 1270,¹⁷⁵ in January 1272,¹⁷⁶ in February 1272,¹⁷⁷ on 4 December 1278,¹⁷⁸

¹⁷¹ Cartulaire de l’Hôpital Saint-Jean, SJ 116, p. 159. CPAS, SJ 36, fol. 50.
¹⁷² “Notum sit universis presens scriptum inspecturis quod cum Henricus de Bigardis, dictus de Capella, teneret a Johanne de Bigardis undecim jornalia terre, parum plus vel minus, in feodum, in parrochia de Capella Sancti Ulrici prope stratam dictam herstrate jacentia, idem Henricus, de permissione et plenaria voluntate ac consensu dicti Johannis, tamquam domini huic facto astantis, contulit et concessit eandem terram hospitali beati Johannis Baptiste in Bruxella hereditarie possidendum et tenendum sub annuo censu trium denario rum Bruxellensium, ipsi Henrico et ejus successoribus a dicto hospitali in perpetuum in Nativitate Domini solvendorum...” Cartulaire de l’Hôpital Saint-Jean, SJ 116, p. 159. CPAS, SJ 36, fol. 50.
¹⁷³ Cartulaire de l’Hôpital Saint-Jean, SJ 119, p. 162. The original is lost.
¹⁷⁴ Cartulaire de l’Hôpital Saint-Jean, SJ 140, p. 184. CPAS, SJ 42, fol. 2
¹⁷⁵ Cartulaire de l’Hôpital Saint-Jean, SJ 142, p. 185. The original is lost.
¹⁷⁶ Cartulaire de l’Hôpital Saint-Jean, SJ 149, p. 193. The original is lost.
¹⁷⁷ Cartulaire de l’Hôpital Saint-Jean, SJ 151, p. 195. CPAS, SJ 39, fol. 19. The seal of Jean was attached even though it was not noted in the document. See Cartulaire de l’Hôpital Saint-Jean, 195.
¹⁷⁸ Cartulaire de l’Hôpital Saint-Jean, SJ 185, p. 239. CPAS, SJ 29, fol. 21. The seal of Jean was attached even though it was not noted in the document. See Cartulaire de l’Hôpital Saint-Jean, p. 238.
on 18 October 1279, in January 1280, on 4 February 1284, on 4 April 1288, on 11 July 1289, twice on 4 January 1290, on 16 June 1290, and finally on 23 March 1291. The only divergence came on 20 June 1287. Henri Meyer of Assche renounced all the rights that he had on arable lands belonging to the hospital of Saint John. Jean de Platea and Godefridus Boyken, identified as alderman, authored the document. Both men also served as witnesses and provided their seal.

In addition to Jean, other members of the family de Platea family appeared in the hospital’s charters. Around 11 November 1289 Jean of Pede, who was called Cobbeghem, assigned to the hospital of Saint John in charity septraginta et quinque libras Bruxellensium, which came from tria bonuaria terre located at Pede-Sainte-Anne. The authors of the document included Jean van der Hellen, the dean of Sainte-Gudule, and Arnoul, the son of Guillaume Coninc or Guillaume de Platea. Arnoul was

179 Cartulaire de l’Hôpital Saint-Jean, SJ 186, p. 240. CPAS, SJ 32, fol. 99. In addition his and Henri Portre’s seals were affixed: “quorum sigilla in testimonium presentibus sunt appensa.”
180 Cartulaire de l’Hôpital Saint-Jean, SJ 188, p. 241. The original is lost.
181 Cartulaire de l’Hôpital Saint-Jean, SJ 200, p. 253. The original is lost. In addition, his seal was affixed: “…quorum sigilla in testimonium presentibus sunt appensa…”
182 Cartulaire de l’Hôpital Saint-Jean, SJ 207, p. 260. CPAS, SJ 46, fol. 27. His seal was attached: “…quorum sigilla in testimonium presentibus sunt appensa…”
183 Cartulaire de l’Hôpital Saint-Jean, SJ 210, p. 263. CPAS, SJ 33, fol. 69. His seal was affixed: “…quorum sigilla presentibus in testimonium sunt appensa…”
184 Cartulaire de l’Hôpital Saint-Jean, SJ 211, p. 264. CPAS, SJ 38, fol. 36. His seal was affixed: “…quorum sigilla presentibus in testimonium sunt appensa…”
185 The first instance was Cartulaire de l’Hôpital Saint-Jean, SJ 215, p. 268. CPAS, SJ 46, fol. 29. The second instance was Cartulaire de l’Hôpital Saint-Jean, SJ 216, p. 269. CPAS, SJ 46, fol. 30. In both cases his seal was affixed and the charter read the same way: “…quorum sigilla presentibus in testimonium sunt appensa…”
186 Cartulaire de l’Hôpital Saint-Jean, SJ 219, p. 271. The original is lost. His seal was affixed: “…quorum sigilla presentibus in testimonium sunt appensa…”
187 Cartulaire de l’Hôpital Saint-Jean, SJ 224, p. 276. CPAS, SJ 38, fol. 39. His seal was affixed: “…quorum sigilla in testimonium his litteris sunt appensa…”
188 Cartulaire de l’Hôpital Saint-Jean, SJ 205, p. 258. The original is lost.
189 “…presentium testimonio litterarum sigillis nostris sigillatarum…” Cartulaire de l’Hôpital Saint-Jean, SJ 205, p. 258. The original is lost.
190 Cartulaire de l’Hôpital Saint-Jean, SJ 213, p. 266. CPAS, SJ 43, fol. 59.
also mentioned as a treasurer of Sainte-Gudule. Both men served as witnesses and their seals were attached.\footnote{\textit{\ldots In cujus rei testimonium, sigilla nostra presentibus sunt appensa\ldots} Cartulaire de l’Hôpital Saint-Jean, SJ 213, p. 266. CPAS, SJ 43, fol. 59.}

By 29 March 1294 the introduction of yet another new member of the family occurred: Guillaume Coninc, Jr. Guillaume, Jr. was cited as \textit{Willelmus, dictus Rex, junior}, alderman of Brussels and witness to the charter.\footnote{\textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 233, pps. 285-6. CPAS, SJ 29, fol. 5.} His seal was affixed.\footnote{\textit{\ldots quorum sigilla hiis litteris in testimonium sunt appensa\ldots} Cartulaire de l’Hôpital Saint-Jean, SJ 233, pps. 285-286. CPAS, SJ 29, fol. 5. For detailed information on the seal, see \textit{Cartulaire de l’Hôpital Saint-Jean}, p. 285, fn 2.}

Finally, one of the last charters in the thirteenth century involved a member of the \textit{de Platea} family: Basilie \textit{de Platea}. On 23 November 1296 Jean Koukaert, a priest, authorized beguine Basilie \textit{de Platea} to charge the house that she lived in up to \textit{decem librarum usualis monete} at the end of her will.\footnote{\textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 243, p. 295. The original is lost.} Henricus Portere and Willelmus Pipenpoy, both aldermen of Brussels served as witnesses, and the men’s seal adorned the document.

Thus, over the course of thirty-three years, Guillaume \textit{De Platea} and the \textit{De Platea} family, acting in solidarity, provided many services to the hospital of Saint John. The family members served as aldermen, provisors, and even supporters, and they offered their assistance to the hospital in many different ways. Indeed, both Guillaume and his son Arnoul authored several of the documents related to the hospital, suggesting that not only did they support the hospital based on their status in urban society, but that they provided that support as “literate” members of the community.
In addition to *De Platea* family and those who served as aldermen to the city of Brussels, many of the hospital’s provisors played dual roles. This was certainly true of Jean Gastwerdre, a hospital representative, and Frédéric, a brother and master of the hospital of Saint John. Sometime between 8 and 20 April 1268 Gilles, the son-in-law of Jean of Nosseghem, transported *pro allodio a dimidium bonarium terre* located between Nosseghem and Lindeghem. Jean Gastwerdre was named in the document. This was the only appearance of Jean in the collection of known twelfth- and thirteenth-century documents. In addition, a man named Frédéric served not only as a lay provisor but also as a master in the hospital. His dual role led to several appearances in the documents throughout the thirteenth century. Frédéric first appeared on 20 June 1287 when Henri Meyer of Assche renounced all the rights that he had on arable lands held by the hospital of Saint John. The agreement was conducted in Brother Frédéric’s presence, and all rights held by Henri were renounced to Frédéric as the representative of the hospital.

Shortly later Frédéric appeared again on 3 January 1289 and 18 February 1289. In the January charter, Gautier De Leeuw and Marguerite, the widow of Gauteri Labus, transported *pro allodio* to the hospital of Saint John *duo bona[ria terre] cum dimidio* of

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196 “Nos, Johannes de Platea et Godefridus Boyken, scabini Bruxellenses manifestamus universis presentes litteras visuris quod coram nobis Henricus, dictus Meyer, de Ascha, renunciavit fratri Vrederic de hospitali Sancti Johannis in Bruxella omni juri, quod habebat in terris arabilibus pertinentibus ad idem hospitale, presentium testimonio litterarum sigillis nostris sigillatarum...” Cartulaire de l’Hôpital Saint-Jean, SJ 205, p. 258. The original is lost.
land located at Wolputte. The agreement was conducted in the presence of Frédéric, who acted as the representative of the hospital. In addition, Frédéric was also identified as a “brother” and as a provisor of the hospital. Later, in February, Marguerite de Witbroech made it known that she had received from the hospital of Saint John *septem libras* that she held on a *fonds* of a house located at Pede. Brother Frédéric, who oversaw the agreement on behalf of the hospital, was named in the charter as the *magister ac provisor hospitalis sancti Johannis in Bruxella*.

A similar occurrence took place on 16 June 1290 when Élisabeth, widow of Henri Malremans, and her daughter Catherine, transported *pro allodio* to Saint John’s *decem jornalia terre* located at Ransfort. In the agreement Élisabeth renounced all uses and rights that her daughter had on land. The agreement was made in the presence of brother Frédéric, and the rights were renounced by him as well. Finally, in September 1294 the convent and the chaplaincy of Saint John gave in lease for sixty years to Gérard Pistor

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198 “Nos, Johannes de Platea et Henricus, dictus Heinkaert, scabini Bruxellenses, notum facimus universis presentes litteras visuris et audituris quod, coram nobis propter hoc personaliter constituta, Margareta, dicta de Witbroech, quitas clamavit et dimisit septem libras, quas habuit ad domistadium situm apud Peda prope pontem de Bist, et recognovit quod frater Fredericus, magister ac provisor hospitalis sancti Johannis in Bruxella, ex parte dicti hospitalis bene et legitime solvisset ei septem libras antedictas…” Cartulaire de l’Hôpital Saint-Jean, SJ 209, p. 262. The original is lost.

199 “Noverint universi quod Elizabet, relicta Henriici, dicti Malremans, resignavit Katherine, filie sue, usumfructum suum, quem tenebat ad ea, in decem jornalibus terre jacentis apud Ransfort, in duabus petiis, promittens per fidem suam se de cetero dictum usumfructum nunquam calumpniaturam. Et, hoc facto, Elizabet et Katherine predicte cum debita renunciatione contulerunt fratri Frederico ad opus hospitalis sancti Johannis in Bruxella dicta decem jornalia terre, pro allodio, promittentes ei inde rectam warandiam ad opus dicti hospitalis…” Cartulaire de l’Hôpital Saint-Jean, SJ 219, p. 271. The original is lost.
“Notum sit universis quod frater Wedricus et frater Walterus, ex parte conventus sancti Johannis, et Amelricus, dictus de Quercu, presbyter, ex parte cappellanie sue, contulerunt Gerardo Pistori quinque jornalia terre site supra Veemarch retro mansionem Willelmi, dicti Loze, parum plus vel minus, prout jacent, tenenda et excolenda a fest Nativitatis Domini proximo futuro ad terminum sexaginta annorum continue subsequentium, annuatim interim pro sex libris Bruxellensium monete usualis communitur in bursa currentis semper ad Natale Domini solvendis, promittentes ei inde ex parte dicti conventus et ex pare dicte cappellanie interim warmandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 234, pps. 286-287. The original is lost.

For more on Brother Gautier, see below.

“...Noverint universi tam presentes quam future quod nos venditioni a Willelmo, concanico nostro et plebano, de dimidio bonario prati vel circiter, jacente juxta Forestum et ad beneficium suum spectante, fratri Waltero, provisoir sancti ospitalis (sic) sancti Johannis in Bruxella, facte, et eidem sive quibuscumque aliis de terre sua de Peda faciende juxta licentiam venerabilis patris nostri Cameracensis episcopi ab eodem W. optentam, plenarie consentimus...” Cartulaire de l’Hôpital Saint-Jean, SJ 100, p. 139. CPAS, SJ 38, fol. 42.

Cartulaire de l’Hôpital Saint-Jean, SJ 101, p. 140. CPAS, SJ 29, fol. 4.
Cartulaire de l’Hôpital Saint-Jean, SJ 119, p. 162. The original is lost.
Cartulaire de l’Hôpital Saint-Jean, SJ 122, p. 165. CPAS, SJ 40, fol. 9.
Cartulaire de l’Hôpital Saint-Jean, SJ 191, p. 244. CPAS, SJ 32, fol. 53.
Cartulaire de l’Hôpital Saint-Jean, SJ 200, p. 253. The original is lost.
Cartulaire de l’Hôpital Saint-Jean, SJ 203, p. 256. The original is lost.
Cartulaire de l’Hôpital Saint-Jean, SJ 204, p. 257. The original is lost.
Cartulaire de l’Hôpital Saint-Jean, SJ 207, p. 260. CPAS, SJ 46, fol. 27.

quinque jornalia terre located in Brussels on the Marché au Bétail. Representatives of the hospital included Brother Frédéric and Brother Walter (frater Walterus).

Gautier, another brother profès et convers, also served as a provisor and master of the hospital of Saint John. On 5 September 1257 the canons of Meerbeek approved a sale made by their Brother, Guillaume, of a demidio bonario of meadow land situated at Forest and dependent on the prebend, Gautier. The people involved equally agreed that it would be made to Brother Gautier or to whomever of the land of Pede. In December of that same year Jean Gortesac ceded to the hospital of Saint John viginti septem solidorum censualium sitorum in opido Bruxellensi. The agreement was made known to Brother Gautier. Similar situations occurred in August 1264, October 1265, on 2 April 1281, 4 February 1284, 18 September 1285, in May 1286, on 4 April 1288, 11 July 1289, 4 January 1290, 12 May 1290, 4 March 1290.
1291, 8 March 1291, 23 March 1291, between 1-21 April 1291, on 21 June 1291, and 12 April, 1293.

Brother Gautier’s role evolved in some of the other documents. In February 1277 Gosuin de Moortebeek promised to guarantee to Brother Gautier of Saint John’s a *bonario terre* located at Moortebeek. On 25 March 1277 Gautier de Bodeghem, a knight, sold to Brother Gautier of the hospital of Saint John a *dîme* for *noningenta libris* that Gautier de Bodeghem held at Bodeghem. Similarly, on 15 March 1282 Jean Dumeken, Arnoul of Coutenbert and Gautier, the son of Hugues, promised to give to Brother Gautier of the hospital of Saint John for the duration of thirty years *decem solidos Bruxellensium* for each *jornali* of a piece of land located near Nieuwen Bosch.

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211 *Cartulaire de l’Hôpital Saint-Jean*, SJ 210, p. 262. CPAS, SJ 33, fol. 69.
215 *Cartulaire de l’Hôpital Saint-Jean*, SJ 222, p. 275. CPAS, SJ 46, fol. 32.
216 *Cartulaire de l’Hôpital Saint-Jean*, SJ 223, p. 275. The original is lost.
220 *Cartulaire de l’Hôpital Saint-Jean*, SJ 229, p. 281. CPAS, SJ 41, fol. 2.
221 In most of these cases, the introduction to the documents by Bonenfant specifies that the payment on behalf of the donor was to go to the hospital of Saint John. Most of the Latin documents, however, specify that the payment was to be paid to Brother Gautier. Although Gautier was serving as a representative to the hospital, this is a significant difference in who was involved with the agreements.
223 “Noverint universi ad quos presentes littere pervenerint quod dominus Walterus de Bodenghem, miles, vendidit fratri Waltero de hospitale beati Johannis Bruxellensi ad opus ejusdem hospitialis decimam suam de Bodenghem, quam tenebat a domina de Donghelbergh, pro noningenta libris Bruxellensium in bono et legali pagamento solvendis...” *Cartulaire de l’Hôpital Saint-Jean*, SJ 172, p. 219. CPAS, SJ 36, fol. 15. The conditions of this agreement appeared again on 11 June 1277. Brother Gautier of the hospital was present. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 180, pps. 231-235. CPAS, SJ 36, fol. 19.
224 “Noverint universi quod Johannes Dumeken, Arnoldus de Cortenberghen et Walterus, filius Hugonis, promiserunt dare fratri Waltero de hospitali sancti Johannis, ad opus ejusdem hospitialis, singulis annis de triginta annis a nunc sequentibus, de quolibet jornali cujusdam petit terre site prope Silvam Novam, decem solidos Bruxellensium, partim in Nativitatem beati Johannis Baptiste et partim in Nativitatem Domini solvendos...” *Cartulaire de l’Hôpital Saint-Jean*, SJ 195, p. 248. The original is lost.
And in January 1283 Ivain de Molenbeek and his brothers David and Nicolas promised to pay *XL libras Bruxella* to Brother Gautier of the hospital of Saint John.\(^\text{225}\)

Later, Ivain of Molenbeeked entered into another agreement with the hospital of Saint John and Brother Gautier. This time, on 2 February 1283, the agreement allowed the hospital of Saint John to benefit from the revenues on *tria jornalia terre* that were held in census of the chapter of Anderlecht at Anderlecht.\(^\text{226}\) In a different setting, the hospital of Saint John, under the representation of Brother Gautier, gave in location for forty years to Oston de Klapscheut a *dimidium bonarium terre* located between Wambeek and Goudveerdegem.\(^\text{227}\) The agreement occurred on 4 May 1291.

In addition, on 18 July 1296 two sisters, Catherine and Ide, promised to pay successively Brother Gautier of Saint John’s *ocytoginta octo libras*.\(^\text{228}\) The agreement

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\(^\text{225}\) “Noverint universi quod Yvanus de Molenbeke, David et Nicholaus, fratres ejus, promiserunt dare fratri Waltero de hospitali sancti Johannis in Bruxella ad opus ejusdem hospitalis a nunc infra duos annos proximos XL libras Bruxellensium...” Cartulaire de l’Hôpital Saint-Jean, SJ 197, p. 250. The original is lost.

\(^\text{226}\) “...Noveritis quod, in nostra et in nostrorum mansionariorum constitutus presentia, Yvanus de Molenbeka tria jornalia terre, que a nobis censualiter tenetur, jacentis in parrochia de Anderlecht prope arborem que dicitur Ten Nepe, in via qua tenditur versus Gaeshka, fratri Waltero, converso domus hospitalis beati Johannis in Bruxella, ad opus ipsius domus obligavit seu constituit per nostrum monitionem et judicium mansionariorum nostrorum, ut dicta domus de ipsa terra fructus et proventus per duodecim annos continue sequentes perciperet...” Cartulaire de l’Hôpital Saint-Jean, SJ 198, p. 251. The original is lost.

\(^\text{227}\) “Noverint universi quod frater Walterus, provisor et magister hospitalis sancti Johannis in Bruxella, ex parte ejusdem hospitalis contulit Ostoni, dicto de Clampscoetce, dimidium bonarium terre parum plus vel minus, jacentis inter Wambeka et Goutverdinghem, tenendum et excolendum a data litterarum presentium ad terminum sive spatium quadraginta annorum subsequentium, annuatim interim pro quatuor sextariis siliginis melioris, in quolibet inde sextario juxta duos denarios, deliberandis infra Bruxellam, et cum mensura Bruxellensi, et semper ad festum sancti Andreae solvendis, promittens ei unam cum Everwino Campsore, provisore dicti hospitalis, inde interim warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 226, p. 278. The original is lost. In addition, *Evervino Campsore* appears in the document. *Evervino* was an alderman of Brussels and thus appeared throughout the history of the twelfth- and thirteenth-century hospital. Here, though, he is cited as a provisor.

\(^\text{228}\) “Notum sit universis quod Katherine et Yda, sorores Godscalci de Breethout, promiserunt dare fratri Waltero de hospitali sancti Johannis vel latori presentium, ad opus magistri, magistre, fratrum et sororum dicti hospitalis, ad festum beati Bavonis proximo futurum viginti quinque libras Bruxellensium denariorum
was made with the brothers, sisters, the mistress, and the master of the hospital. While all the parties were named in general, only Brother Gautier appeared specifically. Later, on 4 April 1297 Godfrey Monart and his brother Henri remitted to Gautier Kint, mayor of Sainte-Gertrude of Nivelles, one quarter of a piece of land located at Ransfort. Brother Gautier then conferred the same land to Saint John’s hospital under the same conditions. When he did, his lands were transferred to fratri Waltero, professo hospitalis sancti Johannis. The charter specified that the lands were to go to the hospital, but in the earliest edition Brother Gautier served as the representative for the hospital.

Similarly, on 16 February 1299 Marguerite, the widow of Jean Grawe, renounced to Brother Gautier specifically and the hospital in general, the use that he had on fonds and a house that she owned located at Neer-Beersel near water. Finally, on 20 December 1299 Brother Gautier appeared for the last time in a charter where Jean Slabbart, son of Thomas van den Bossche, renounced in favor of Saint John’s the part that he held on a dîme of Tournepe. Brother Gautier’s role as both a master of the hospital and a provisor guaranteed not only legal representation but also physical

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229 Cartulaire de l’Hôpital Saint-Jean, SJ 241, p. 293. The original is lost.
230 Ibid.
231 “Notum sit universi quod Margareta, relicta quondam Johannis, dicti Grawe, resignavit fratri Waltero, ad opus hospitalis sancti Johannis in Bruxella, omnem usufructum, quem habebat penes domum et domistadium, quo stat dict domus apud Nederbersele, et penes quondam petiam aque jacentis ante curiam Johannis de Lapide, promittens, fide et juramento prestitis, se nunquam calumpniaturam ulla interveniente causa seu occasione dictum usufructum…” Cartulaire de l’Hôpital Saint-Jean, SJ 256, p. 311. The original is lost.
augmentation for the hospital. The brother was able to see to the spiritual and executive
needs of the institution, which secured its growth throughout the thirteenth century.

The next provisor was Gerelm or Gerelin Heincart,\textsuperscript{233} an alderman of Brussels
and a provisor to the hospital of Saint John.\textsuperscript{234} He also appeared in conjunction with
some of the previously discussed provisors. In fact, between Heincart and the \textit{de
Platea}'s, the provisors appear in almost all the final document pertaining to the hospital,
which were generally land transfers to the institution. The first notation of Heincart came
in 1290, and after 1290 he appeared in the documents consistently until the end of the
thirteenth century. In the fifty extant documents that were issued between 1290 and
1300, Heincart played a direct role in twenty-six of the documents.\textsuperscript{235}

In most cases, Heincart served as a witness to the charters. His role as an
alderman of Brussels facilitated the occurrences. These instances included issuances: on
18 August 1290,\textsuperscript{236} 4 March 1291,\textsuperscript{237} 8 March 1291,\textsuperscript{238} 21 June 1291,\textsuperscript{239} 1 January
1292,\textsuperscript{240} 7 March 1294,\textsuperscript{241} in September 1294,\textsuperscript{242} on 5 September 1295,\textsuperscript{243} in June

\textsuperscript{233} He appears the following ways: Heynecart, Heinkaert, Heincart, Heincaert, Heinecart, and Heyncart.
\textsuperscript{234} \textit{Cartulaire de l’Hôpital Saint-Jean}, p. 272, fn 3.
\textsuperscript{235} In addition, \textit{Everwinus Campsor} appears several times along with Heincart.
\textsuperscript{236} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 220, p. 272. CPAS, SJ 38, fol. 38. His seal adorned the
document: “…\textit{quorum sigilla in testimonium presentibus sunt appensa}…”
\textsuperscript{237} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 222, p. 274. CPAS, SJ 46, fol. 32. His seal adorned the
document: “…\textit{quorum sigilla presentibus litteris in testimonium sunt appensa}…”
\textsuperscript{238} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 223, p. 275. The original is lost. His seal was affixed to the
document: “…\textit{quorum sigilla in testimonium his litteris sunt appensa}…”
\textsuperscript{239} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 227, p. 279. CPAS, SJ 42, fol. 21. His seal adorned the
document: “…\textit{quorum sigilla in testimonium his litteris sunt appensa}…”
\textsuperscript{240} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 228, p. 280. The original is lost. His seal was attached to the
document: “…\textit{quorum sigilla in testimonium his litteris sunt appensa}…”
\textsuperscript{241} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 232, p. 284. The original is lost.
\textsuperscript{242} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 235, p. 288. The original is lost. His seal adorned the document:
“…\textit{quorum sigilla his litteris in testimonium sunt appensa}…”
\textsuperscript{243} \textit{Cartulaire de l’Hôpital Saint-Jean}, SJ 238, p. 291. The original is lost. His seal adorned the document:
“…\textit{quorum sigilla presentibus in testimonium sunt appensa}…”
1296, on 18 July 1296, in December 1296, on 28 May 1298, sometime before 24 June 1298, sometime after 24 June 1298, sometime after 24 June 1298, on 16 February 1299, 28 March 1299, 21 July 1299, sometime in 1299, on 24 January 1300, and finally in May 1300.

While Heincart served his post as alderman and witness well in the decade between 1290 and 1300, there was a change to his status as early as 27 January 1299. On that day Henri of Strata promised to give *quindecim modios frumenti* (crops) to the hospital of Saint John. The document, however, had Heincart acting on behalf of the hospital and receiving Henri’s donation. In this case, Heincart provided his services not

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244 *Cartulaire de l’Hôpital Saint-Jean*, SJ 240, p. 293. CPAS, SJ 34, fol. 29. There is no indication in the actual charter that the seal was affixed, but it was noted by Bonenfant. See *Cartulaire de l’Hôpital Saint-Jean*, 292.

245 *Cartulaire de l’Hôpital Saint-Jean*, SJ 241, p. 294. The original is lost. His seal was affixed:

“…*quorum sigilla hiis presentibus litteris in testimonium sunt appensa*…”

246 *Cartulaire de l’Hôpital Saint-Jean*, SJ 244, p. 296. The original is lost.

247 *Cartulaire de l’Hôpital Saint-Jean*, SJ 251, p. 305. The original is lost. His seal adorned the document:

“…*quorum sigilla hiis litteris sunt appensa*…”

248 *Cartulaire de l’Hôpital Saint-Jean*, SJ 252, p. 307. The original is lost. A seal was attached:

“…*quorum sigilla hiis litteris in testimonium sunt appensa*…”

249 *Cartulaire de l’Hôpital Saint-Jean*, SJ 253, p. 308. CPAS, SJ 29, fol. 22.

250 *Cartulaire de l’Hôpital Saint-Jean*, SJ 254, p. 309. CPAS, SJ 42, fol. 4. While there is no indication of a seal in the charter, it was identified by Bonenfant. See Bonenfant, *Cartulaire*, p. 309.

251 *Cartulaire de l’Hôpital Saint-Jean*, SJ 256, p. 311. The original is lost. His seal was affixed to the document: “…*quorum sigilla hiis litteris in testimonium sunt appensa*…”

252 *Cartulaire de l’Hôpital Saint-Jean*, SJ 258, p. 313. CPAS, SJ 33, fol. 5. His seal adorned the document:

“…*quorum sigilla hiis litteris in testimonium sunt appensa*…”

253 *Cartulaire de l’Hôpital Saint-Jean*, SJ 263, p. 319. The original is lost. His seal adorned the document:

“…*quorum sigilla presentibus in testimonium sunt appensa*…”

254 *Cartulaire de l’Hôpital Saint-Jean*, SJ 267, p. 322. The original is lost. A seal adorned the document:

“…*quorum sigilla hiis litteris sunt appensa*…”

255 *Cartulaire de l’Hôpital Saint-Jean*, SJ 268, p. 324. CPAS, SJ 32. His seal was affixed to the document:

“…*quorum sigilla presentibus litteris sunt appensa*…”

256 *Cartulaire de l’Hôpital Saint-Jean*, SJ 272, pps. 327-328. The original is lost. His seal was attached:

“…*quorum sigilla presentibus litteris sunt appensa*…”

257 “*Notum sit universis quod Henricus de Strata promisit dare et solvere Gerelmo dicto Heincart, ad opus hospitalis sancti Johannis in Bruxella, quindecim modios frumenti ad monitionem suam, quodlibet inde sextarium penes duo denarios melioris*…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 255, p. 310. The original is lost.

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as an alderman or a witness but rather as a provisor to the hospital. Shortly later, in February 1299, Heincart gave his consent to the hospital of Saint John, which allowed Gertrude of Uccle to rent out a property belonging to the hospital for a period of fifty years, which was located in Brussels in the Putterie.

In addition, as mentioned earlier, Heincart appeared on 22 April 1299 as Gerelmus, dictus Heinecart as a witness. In the document, he was named as an alderman and his seal adorned the document. In May 1299 he appeared again. Gertrude de Bonne renounced in the favor of the hospital of Saint John the use that she had on her holdings that were held by Régnier Eggloy and that the hospital had acquired by exchange. In addition, Gertrude also renounced the rights of her daughters and her relatives on the holdings. In return, the hospital accorded in census to Gerturde and her children two small houses with their fonds located on their holdings next to the porte of Coudenberg in Brussels. Bonenfant comments in the introduction to the May document that the charter was the same as the document from 22 April 1299. While it is lost.

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258 Cartulaire de l’Hôpital Saint-Jean, p. 310, fn 2.
259 "Universis presentes litteras inspecturis, magistra, fratres et sorores hospitalis sancti Johannis in Bruxella, salutem et noscere veritatem. Noveritis quod nos per consensum Gerelmi dicti Heinkaert, provisoris nostri in temporalibus, contulimus Gertrudi de Uccle, latori presentim, domistadium situm in Pottera ex opposto domine Helewigis de Nova Domo, tenedum a nuc temporis (sic.) ad terminum quinquaginta annorum continue sequentim, annuatim pro duodecim solidos monete communiter in bursa currentis, semper ad Natale Domini persolvendis, et duobus caponibus simili modo solvendis..." Cartulaire de l’Hôpital Saint-Jean, SJ 257, p. 311. The original is lost.
260 "...quorum sigilla hiis litteris sunt appensa..." Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 315. The original is lost.
261 Cartulaire de l’Hôpital Saint-Jean, SJ 261, p. 316. The original is lost.
262 "Notum sit universis quod Gertrudis, dicta de Bonne, resignavit fratri Godescalco, ad opus hospitalis sancti Johannis in Bruxella omnem usumfructum quem habebat in bonis que dicta Gertrudis tenere solebat quondam a Reynero Ecgly, que bona per recompensationem et per cambium pro aliis bonis incorporata sunt hospitali sancti Johannis in Bruxella, promittens, fide cum juramento prestita corporali, se nunquam calumpniaturam usumfructum antedictum..." Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 314. The original is lost.
263 "...et ejus liberis duas cameras sitas supra dicta bona, illas videlicet cameras, consistentes versus portam Frigidif Montis..." Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 314. The original is lost.
very similar, there is one major difference. While in the first document Brother Godescalcus served as a representative to the hospital and Heincart was only named as a witness, in the second document in May Heincart was named as both a representative of the hospital and as well as the procurer.\footnote{264}  

By 20 December 1299 Heincart was again serving as a provisor. Jean Slabbart, the son of Thomas van den Bossche, renounced in favor of the hospital of Saint John a part of a dîme that he (Jean) held at Tournepe.\footnote{265} Heincart, as the provisor of the hospital and thus serving on behalf of the hospital, in return granted Jean perpetual rights.\footnote{266} Heincart also appeared as a witness to the charter. He was noted as an alderman and his seal (along with the other witnesses’) was affixed.\footnote{267} Similarly, in January 1300 Jean II, the Duke of Brabant, authorized Arnoul de Beernem of Erps, Jean II’s vassal, to cede to the hospital of Saint John tribus bonariis terre feodalis located at Erps. The hospital of Saint John agreed to hold the land in census to the duke.\footnote{268} The agreement was made with Heincart as the representative and provisor.\footnote{269}
Jean van der Sennen was also among the aldermen of Brussels. While he only appeared as a provisor to the hospital one time, his services to the hospital between August 1265 and January 1280 were remarkable. During that period he appeared as an alderman and served as a witness. Often too, his seal was affixed to the documents. These occurrences took place in August 1265, November 1274, December 1274, 30 November 1276, 11 June 1277, and in January 1280.

There were some cases in which Jean Sennen diverged from this role. Between 8 and 30 April 1268 he was indicated at the beginning of a document along with Henricus, dictus Wert, as authors of the document. The charter was for Simon vander Ingherstraten, who made it known that he had sold to the hospital of Saint John quatuor jornalia et dimidium terre hereditarie located at Erps and held in census of Gilles de Erpsa, feodali nostro, quod idem Arnoldus separavit et divisit a feodo suo sito apud Erpsa, quod ipse a nobis tenet, tria bonaria terre de predicto feodo jacentia apud Erpsa supra Dietbrugger Bosch, parum plus vel minus, in una petia que ipse a nobis tenuit, ad opus hospitalis nostril sancti Johannis in Bruxella et non alicuius alerisus…” Cartulaire de l’Hôpital Saint-Jean, SJ 269, pps. 324-325. CPAS, SJ 37, fol. 28. “Quo facto, investivimus et adheredavimus Gerelmum dictum Heinecart, provisorem predicti hospitalis, in presentia hominum nostrorum, in predictis tribus bonariis terre feodalis ad opus hospitalis memorati, videlicet quodlibet bonarium sub annuo censu duros denarios nobis annuatim ad Natale Domini solvendorum, promittentes predictum hospitale in predictis tribus bonariis inviolabiliter conservare quiete et pacifice…” Cartulaire de l’Hôpital Saint-Jean, SJ 269, pps. 325. CPAS, SJ 37, fol. 28. This is, I do believe, the only document that makes special note of keeping the lands safe and in peace. It may have been a reflection of outside events at this time.

269 Cartulaire de l’Hôpital Saint-Jean, SJ 121, p. 164. The original is lost.
270 Cartulaire de l’Hôpital Saint-Jean, SJ 164, p. 210. The original is lost. His seal was affixed: “…quorum sigilla in testimonium presentibus sunt appensa...”
271 Cartulaire de l’Hôpital Saint-Jean, SJ 165, p. 211. CPAS, SJ 42 fol. 19. His seal was affixed: “…quorum sigilla in testimonium presentibus sunt appensa...”
272 Cartulaire de l’Hôpital Saint-Jean, SJ 170, p. 217. CPAS, SJ 32. His seal was affixed: “…quorum sigilla in testimonium presentibus sunt appensa...”
273 Cartulaire de l’Hôpital Saint-Jean, SJ 180, p. 234. CPAS, SJ 36, fol. 19. His seal was affixed: “…ende heren Janne van der Sennen, scepener van Brusele, dat si hare seghele ane dese lettrern hanghen, omme gherecht orconscep te draghe ne van allen desen vorwaerdereen, die hierboven bescreven sijn...”
274 Jean van der Sennen is listed as a witness and alderman of Brussels. Cartulaire de l’Hôpital Saint-Jean, SJ 188, p. 241. The original is lost.
Nat. Both men also served as witnesses and their seal was affixed. In addition, as mentioned before in the case of Guilluame Blomart, on 5 April 1277 the mistress, brothers, and sisters of the hospital of Saint John, as well as the provisors of the hospital, including Jean Sennen, demanded that Enguerrand II, the bishop of Cambrai, give power to Jean Hont, the dean of Malines and another provisor of the hospital, so that he could consent to the sale of some holdings.

Finally, on 5 September 1295 a document was issued that may have concerned Jean or perhaps another member of the Sennen family. Alix, the widow of Gilles Brassator, renounced in profit to Jean Kemmere all her rights on a _fonds_ of a house that she held in census outside of the port of Coudenberg in Brussels. The lands were _resignavit_ into the hands of the following peoples: “Ghiselberti, _dicti_ Taye, _et_ Amelrici, _dicti_ de Zenna, ac Elisabeth, _relictæ_ Johannis de Fridgio Monte, _ad_ opus Johannis, _dicti_ Kemmere.” Without a doubt, _Amelrici_ was related to Jean, but it is not clear how.

While most of provisors of the hospital appeared after the beginning of the hospital’s autonomous’ period, one provisor, Érérwin Vos, was present in some of the earliest charters relating to the hospital of Saint John. Érerwin, also a knight, first

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276 Cartulaire de l’Hôpital Saint-Jean, SJ 133, p. 177. CPAS, SJ 37, fol. 24.
277 “…In cujus rei testimonium, nos, _predicti_ scabini, _sigilla_ nostra presentibus _apposuimus_…” Cartulaire de l’Hôpital Saint-Jean, SJ 133, p. 177. CPAS, SJ 37, fol. 24.
278 “Reverendo in Christo patri ac domino, I., _Dei_ gratia venerabili Cameracensi episcopo, _magistra_, _fratres_ et _sorores_ _hospitalis_ sancti Johannis in Bruxella, Willelmus _dictus_ Rex, _miles_, Willelmus Blomart, Johannes Losa, _et_ Johannes de Senna, _dicti_ _hospitalis_ _in_ _temporalibus_ _provisores_, _salutem_ _et_ _tam_ _paratam_ _quam_ _debitam_ _in_ _omnibus_ _et_ _per_ _omnia_ _reverentiam_ _cum_ _orationibus_ _suis_ _in_ _Christo_ _devotis_…” Cartulaire de l’Hôpital Saint-Jean, SJ 175, p. 223. CPAS, SJ 36, fol. 16. For more on the details of the charter, see chapter four.
279 “Notum sit universis quod Aleydis, _relictæ_ Egidii _Brassatori_ _s__, _resignavit omnem_ _hereditatem_ _et_ _jus_, _quam_ _et_ _quod_ _habebat_ _in_ _quodam_ _domistadio_ _sito_ _foris_ _portam Frigidii Montis prope Willebni Harseel…” Cartulaire de l’Hôpital Saint-Jean, SJ 238, p. 291. The original is lost.
280 Cartulaire de l’Hôpital Saint-Jean, SJ 238, p. 291. The original is lost.
281 Bonenfant connects _Amelrici_ to Jean Sennen in Cartulaire de l’Hôpital Saint-Jean, p. 291, fn 2.
appeared in 1237 and served as an alderman and witness through a few charters. In fact, he served as an alderman of both Brussels and Uccle, sometimes simultaneously, between the years of 1236 and 1271.282 Between 1237 and 1250, Érerwin provided his service as a provisor to the hospital for its charters, but after that point he merely served as an alderman and witness. In some cases, his seal was attached. Those cases were as follows: in May 1237,283 on 6 July 1249,284 in January 1250,285 on 19 August 1250,286 four times in January 1267,287 in February 1267,288 and in March 1267.289

Overall, though, there were some deviations from this pattern. In May 1248 in an agreement between Henri de Groelst and the hospital, Henri renounced the use and rights

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282 Cartulaire de l’Hôpital Saint-Jean, p. 79, fn 2.
283 Cartulaire de l’Hôpital Saint-Jean, SJ 52, pps. 78-79. CPAS, SJ 38, fol. 30. He appeared among the witnesses and was identified as an alderman of Brussels.
284 Cartulaire de l’Hôpital Saint-Jean, SJ 74, pps. 108-109. CPAS, SJ 4, fol. 15. Vos appeared among the witness as both an alderman and provisor to the hospital. His seal was affixed: “…in horum omnium testimonium et robur, presentes litteras sigillorum nostrorum munimine, cum sigillis Everkoy, militis, Henrici Beatricis et Johannis Clivere, scabinorum Bruxellensium et provisorum dicti hospitalis, qui huic ordinationi seu compromissioni consensum quantum in ipsis est, adhíbuerunt, fecimus roborari…”
285 Cartulaire de l’Hôpital Saint-Jean, SJ 77, pps. 113-114. CPAS, SJ 29, fol. 2. He was listed among the witnesses and was identified as a knight and an alderman of Brussels. His seal was affixed: “…quorum sigilla presentibus in testimonium virtutis sunt appensa…”
286 Cartulaire de l’Hôpital Saint-Jean, SJ 82, p. 120. CPAS, SJ 29, fol. 3. He was listed at the end: “…predictis omnibus interfuerunt Everwinus dictus Vos, miles, et Godefridus, filius quondam Amelrici Wert, scabini Bruxellenses, quorum sigilla in testimonium veritatis presentibus sunt appensa…”
287 In all four documents Vos appears as a witness and alderman. His seal was affixed, and the Latin read exactly the same in all the documents: “…quorum sigilla in testimonium presentibus sunt appensa…” Because of the similarities, it is probably safe to assume that the documents may have been composed at or near the same time, at the same place, and/or by the same hand. See Cartulaire de l’Hôpital Saint-Jean, SJ 127, p. 170. CPAS, SJ 37, fol. 21. Cartulaire de l’Hôpital Saint-Jean, SJ 128, p. 172. CPAS, SJ 37, fol. 21. Cartulaire de l’Hôpital Saint-Jean, SJ 129, p. 173. CPAS, SJ 37, fol. 20. Cartulaire de l’Hôpital Saint-Jean, SJ 130, p. 174. The original is lost.
288 Cartulaire de l’Hôpital Saint-Jean, SJ 131, pps. 174-175. CPAS, SJ 37, fol. 22. Changes some because served as the author along with Guillaume Grove: “…Universis presens scriptum inspecturis, Everwinus, dictus Vulpes, miles, et Willelmus, dictus Grove, scabini Bruxellenses, salutem…” Later it was noted that he served too as witness with seal affixed: “…in cjus rei testimonium, sigilla nostra presentibus duximus apponenda…”
289 Cartulaire de l’Hôpital Saint-Jean, SJ 132, p. 176. CPAS, SJ 37, fol. 23. Here, he appeared as the author along with Jean Wert: “…Universis presens scriptum inspecturis, Everwinus, dictus Vos, et Johannes Wert, scabini Bruxellenses, salutem…” He was later noted as witness with seal attached: “…in cjus rei testimonium, nos, scabini supradicti, sigilla nostra presentibus duximus apponenda…”
on a courtyard located in Uccle. The agreement also made the courtyard a possession of the hospital.  

Érerwin was not listed among the witnesses but rather as one of the two alderman who made the charter official and permanent.  

Érerwin may have been the provisor to which the charter was referring. In addition, on 9 August 1249, the hospital of Saint John settled with a sentence of arbitrations the issues that they had regarding oblations.  

Although the agreement, quite lengthy, focused on the settlement, the last paragraph of the charter indicated the provisors to the hospital.  

On 11 June 1253, Érerwin appeared in a manner similar to the sentence arbitration. In the charter Mathilde, the granddaughter of Lionnet I, transported to the hospital of Saint John decem bonaria terre located at Petit-Bigard and held in fief to her grandfather. Among the men concerned with the transfer and thus named in the charter was Érerwin. As one of Lionnet I’s vassals, he was involved with the transfer.

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290 “Universis presentes litteras inspecturis, ego, Henricus de Groelst, notum fiere volo quod, cum de quodam curtili, sito in parrochia de Uccle, in loco qui dicitur Calevoert, usumfructum ad vitam meam percipere debebam, quod ab hospitali beati Johannis in Bruxella tenebam, quod dicti hospitalis fuit et est hereditas, eadem domai quittermaclavai et quicquid juris in dicto curtili habebam in manus procuratoris dicti hospitalis coram scabinis de Uccle libere et absolute resignavi…‖ Cartulaire de l’Hôpital Saint-Jean, SJ 72, p. 104. The original is lost.  

291 “…Et ut hoc ratum et firmum permaneat et invulsum, dictorum scabinorum, videlicet Érerwine, dicti Vulpis, et Juvenalis de Aa, presens scriptum sigillus feci roborari…” Cartulaire de l’Hôpital Saint-Jean, SJ 72, p. 104. The original is lost.  

292 “…in manus procuratoris dicti hospitalis coram scabinis de Uccle…” Cartulaire de l’Hôpital Saint-Jean, SJ 72, p. 104. The original is lost.  

293 Cartulaire de l’Hôpital Saint-Jean, SJ 75, Cartulaire, pps.110-112. The original is lost.  

294 “Huic autem ordinationi, nos, decanus et capitulum supradicti, ex una parte, et nos, magistra et sorores hospitalis sancti Johannis, et nos, Everkoius, miles, Henricus, filius Beatricis, et Johannes dictus Clivere, scabini Bruxellenses et predicti hospitalis provisores, ex altera, unanimiter consentimus et eam sigillorum nostrorum munimine cum appensione sigillorum arbitrorum predictorum, qui dictam ordinationem in testimonium dicte ordinationis ab ipsis facte ordinatis sigillarunt, roboramus…” Cartulaire de l’Hôpital Saint-Jean, SJ 75, p. 112. The original is lost.  

295 Cartulaire de l’Hôpital Saint-Jean, SJ 84, pps. 121-122. CPAS, SJ 36, fol. 13.  

Similarly, on 18 November 1253 in one of the accords between the abbot of the convent of Saint-Sépulcre of Cambrai, the patron of the church of Notre-Dame de la Chapelle on one part and the mistress, brothers, and sisters of the hospital of Saint John on other part, Érerwin again appeared. The charter served to decide the rights of parishioners living in the part of the parish of la Chapelle that was enclosed in the hospital’s holdings. The decision was made and all parties agreed to uphold the agreement. The parties named included Érerwin.

The bigger changes to the ways in which Érerwin appeared came in September 1271. After the death of his father, Henri de Capelle-Saint-Ulric, Gautier obtained from Jean de Bigard the investiture of ten bonniers minus one journal of land located in Capelle-Saint-Ulric. It was part of the lands that Henri had held in fief to Jean de Bigard, a knight, and part of the lands that had been given in census to the hospital of Saint John. Yet, Gautier, renounced in profit to the hospital part of the money. In this charter Érerwin appeared not as a provisor, witness or alderman, but rather among the

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298 Cartulaire de l’Hôpital Saint-Jean, SJ 86, p. 125. The original is lost.
299 “Ut autem que prescripta sunt robor perpetue firmitatis valeant optinere, nos, abbas, conventus sancti Sepulchri Cameracensis et R., presbyter de Capella, ex una parte, sigillis nostris, et nos magistra, fratres et sorores hospitalis sancti Johannis, ex altera, sigillo nostro necnon et sigillis provisorum nostrorum, videlicet Everwini militis, Henrici Beatricis et Johannis dicti Clievere, presentes litteras fecimus...” Cartulaire de l’Hôpital Saint-Jean, SJ 86, p. 125. The original is lost.
300 Cartulaire de l’Hôpital Saint-Jean, SJ 146, pp. 189-190. The original is lost.
301 “Noverit universitas vestra quod Walterus, filius quondam Henrici dicti de Capella, post mortem dicti patris sui comparuit coram domino Johanne de Bigardis, milite, tamquam domino suo, et coram hominibus ipsius domini Johannis jam nominandis et requisitivit ab eo tale pheodum quale predictus Henricus, pater ejus tenuerat ab eodem, quod ipse Henricus heredaverat illis de hospitali beati Johannis in Bruxella, videlicet decem bonaria terre minus jordali, in territorio de Capella Sancti Ulrici prope stratum dictam herstrate jacentia, sub annuo censu decem denariorum Bruxellensium ad Natale Domini solvendorum...” Cartulaire de l’Hôpital Saint-Jean, SJ 146, p. 189. The original is lost.
tenants of the duke of Brabant. Finally, on 4 April 1297, similar to some of the other instances in which Érerwin appeared as an author of a charter, another mention surfaced. Given, however, the 1297 date, twenty six years after the last mention of the knight and alderman, it was probably likely that this Érerwin was a son of the first.

Like Érerwin, Henri Wert, son of Guillaume Wert, served as both a provisor to the hospital of Saint John and as an alderman of Brussels. In most cases, he appeared as a witness and alderman: in August 1263, between 2-23 December 1263, between 8-30 April 1268, between 8-20 April 1268, in January 1273, in November 1274, and in December 1274. There were few deviations for Henri from the normal role of alderman and witness. When, however, the diversions occurred, they were significant, at

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302 “...Censuarii vero domini ducis sunt hii: Henricus de Linkenbeke, presbyter, Everwinus, dictus Vos, miles, et Thomas de Hembekte...” Cartulaire de l’Hôpital Saint-Jean, SJ 146, p. 190. The original is lost.
305 Cartulaire de l’Hôpital Saint-Jean, SJ 114, p. 157. The original is lost. Henri served as a witness and was named as an alderman of Brussels. His seal was also affixed: “...Hiis omnibus interfuerunt Johannes, filius quondam Gerelmi, et Henricus, filius quondam Willelmi Wert, tamquam scabini, quorum sigilla in testimonium presentibus sunt appensa...”
306 Cartulaire de l’Hôpital Saint-Jean, SJ 116, p. 159. CPAS, SJ 36, fol. 50. Henri served as a witness and was named as an alderman of Brussels. Henri authored the document along with Jean of Sennen: “Universis presens scriptum inspecturis, Henricus, dictus Wert, et Johannes de Senna, scabini Bruxellenses, salutem...” In addition to being identified as the authors and as aldermen, the two also served as witness, and their seal was affixed: “In cujus rei testimonium, nos, predicti scabini, sigilla nostra presentibus apposuimus...”
307 Cartulaire de l’Hôpital Saint-Jean, SJ 133, p. 177. CPAS, SJ 37, fol. 24. Henri served as a witness and was named as an alderman of Brussels. His seal was affixed: “...quorum sigilla in testimonium presentibus sunt appensa...”
308 Cartulaire de l’Hôpital Saint-Jean, SJ 134, p. 178. CPAS, SJ 43, fol. 6. Henri served as a witness and was named as an alderman of Brussels.
309 Cartulaire de l’Hôpital Saint-Jean, SJ 156, p. 200. The original is lost. Henri served as a witness and was named as an alderman of Brussels. His seal was affixed: “...quorum sigilla in testimonium presentibus sunt appensa...”
310 Cartulaire de l’Hôpital Saint-Jean, SJ 164, p. 210. The original is lost. Henri served as a witness and was named as an alderman of Brussels. His seal was affixed: “...quorum sigilla in testimonium presentibus sunt appensa...”
311 Cartulaire de l’Hôpital Saint-Jean, SJ 165, p. 211. The original is lost. Henri served as a witness and was named as an alderman of Brussels. His seal was affixed: “...quorum sigilla in testimonium presentibus sunt appensa...”
least for the hospital. For example, in August 1264, Henri became directly involved in a transfer of a parcel of land held pro allodio to the hospital of Saint John. In addition, Henri’s family was also involved with the institution. In January 1272, Basilie, the daughter of the late Gérard Wert, transported pro allodio for the profit of the sick of Saint John’s one bonarium unum terre located at Anderlecht. What proves unique about the transfer, beyond the fact that the family of Henri was involved, was that Henri also appeared in the document as a provisor to the hospital. In addition, Jean Wert, perhaps a son or another relation, also served as a witness to the charter. It was truly a family affair.

Although Henri acted as a provisor in January 1272, he certainly bore the title in March of the same year: “Notum sit universis quod Basillia, filia quondam Ger. Dicti Wert, contulit et assignavit Henrico dicto Wert, provisori hospitalis beati Johannis in Bruxella...” In March, Basilie again gave to the hospital of Saint John and the poor in puram elemosinam. This time, the property included tria jornalia et dimidium terre located in Anderlecht and held pro allodio. The lands were located above Veeweide.

312 “Notum sit universis quod Henricus, dictus Weert, contulit cum debita renuntiatione fratri Waltero hospitalis beati Johannis, ad opus ejusdem hospitalis, partem quandom terre sita in fine horrei ipsius Henrici, prout ibidem dicta pars terre puteis et palis limitata est, pro allodio, promittens ei inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 119, pps. 161-162. The original is lost.
313 Cartulaire de l’Hôpital Saint-Jean, SJ 150, p. 194. The original is lost.
314 “Notum sit universis quod Basilia, filia quondam Gerardi dicti Wert, renuntiando contulit Henrico dicto Wert, ad opus debilium infirmorum hospitalis beati Johannis Bruxellensis, bonarium unum terre, prout jacens inter Anderlecht et Veweiden, versus Boenstomle, pro allodio, promittendo inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 150, p. 194. The original is lost.
315 Cartulaire de l’Hôpital Saint-Jean, SJ 150, p. 194. The original is lost.
316 Cartulaire de l’Hôpital Saint-Jean, SJ 152, pps. 196-197. CPAS, SJ 34, fol. 21.
317 “…ad opus et usum debilium pauperum dicti hospitalis, tria jornalia et dimidium terre parum plus vel minus, sita in parochia de Anderlecht supra vivarium de Veweiden, pro alldoio, in puram elemosinam, cum debita renuntiatione subsecuta, promittens eis inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 152, pps. 196-197. CPAS, SJ 34, fol. 21.
pond. Again, Jean Wert served as one of the witnesses to the charter. Finally, on 27 January 1298, André de Lennick-Saint-Quentin, the son of Henri Wert, set up in favor of the hospital of Saint John an annual rent of *triginta solidos, communis monete in Brabantia tempore solutionis.* The agreement was made in “pie memorie” of Henri Wert.

The final provisor and alderman related to the hospital was Éverwin II de Wisselere. Also called Campsore or Campsor, Éverwin appeared quite frequently in the documents late in the thirteenth century. Of the eighty-five documents issued between 1282 and 1300, Éverwin appeared in twenty of the charters (23.5%). He was first noted in February 1281, and similar to most of the aldermen who also served as provisors, the majority of the appearances proved to be those where Éverwin was a witness and alderman. Those instances include the following: 15 March 1282, 19 February 1283, 3 January 1289, 7 March 1294, 29 March 1294, September 1294.

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318 The reference here probably means on higher ground and not literally above the pond: “*supra vivarium de Veweidem.*” *Cartulaire de l’Hôpital Saint-Jean*, SJ 152, p. 196. CPAS, SJ 34, fol. 21.
321 *Cartulaire de l’Hôpital Saint-Jean*, SJ 195, p. 248. The original is lost. Éverwin was listed as an alderman and a witness.
322 *Cartulaire de l’Hôpital Saint-Jean*, SJ 199, p. 253. CPAS, SJ 16. He was listed as an alderman and witness with his seal affixed: “…*Inde sunt testes: Everwinus Campsor et Heincart Portre, scabini Bruxellenses, quorum sigilla in testimonium presentibus sunt appensa…”
323 *Cartulaire de l’Hôpital Saint-Jean*, SJ 208, p. 261. CPAS, SJ 46, fol. 28. Éverwin was noted as an alderman and witness with his seal affixed: “…*Inde sunt testes: Everwinus Campsor et Heincart, scabini Bruxellenses, quorum sigilla presentibus in testimonium sunt appensa…”
324 *Cartulaire de l’Hôpital Saint-Jean*, SJ 232, pps. 284-285. The original is lost. He was listed as a witness and alderman of Brussels.
325 *Cartulaire de l’Hôpital Saint-Jean*, SJ 233, p. 286. CPAS, SJ 29, fol. 5. He appeared as a witness and alderman with seal affixed: “…*quorum sigilla hiis litteris in testimonium sunt appensa…”
February 1295, 327 5 September 1295, 328 June 1296, 329 18 July 1296, 330 5 October 1296, 331 December 1296, 332 15 February 1298, 333 28 May 1298, 334 twice before 24 June 1298, 335 and 25 July 1300. 336

It was only on 4 May 1291 that Éverwin first played the role of provisor to the
hospital of Saint John. In May of 1291 the hospital of Saint John gave in location for
forty years to Oston of Klapscheut a dimidium bonarium terre situated between
Wambeek and Goudveerdegem. 337 Éverwin was named as the acting provisor in the
charter. The only other deviations came first on February 128 when Éverwin served as

326 Cartulaire de l’Hôpital Saint-Jean, SJ 234, p. 287. The original is lost. He was listed as an alderman and witness.
327 Cartulaire de l’Hôpital Saint-Jean, SJ 237, p. 290. The original is lost. He appeared as an alderman and witness with seal attached: “…quorum sigilla in testimonium presentibus sunt appensa…”
328 Cartulaire de l’Hôpital Saint-Jean, SJ 238, p. 291. The original is lost. He was listed as an alderman and witness with seal attached: “…quorum sigilla presentibus in testimonium sunt appensa…”
329 Cartulaire de l’Hôpital Saint-Jean, SJ 240, p. 293. CPAS, SJ 34, fol. 29. He appeared as an alderman and witness.
330 Cartulaire de l’Hôpital Saint-Jean, SJ 241, p. 294. The original is lost. He was listed as an alderman and witness with seal attached: “…quorum sigilla hiis presentibus litteris in testimonium sunt appensa…”
331 Cartulaire de l’Hôpital Saint-Jean, SJ 242, p. 294. CPAS, SJ 27. He appears as an alderman and witness.
332 Cartulaire de l’Hôpital Saint-Jean, SJ 244, p. 296. The original is lost. He was listed as an alderman and witness. There is no indication of an attached seal in the document, but it is noted by Bonenfant: Bonenfant, Cartulaire, p. 295.
333 Cartulaire de l’Hôpital Saint-Jean, SJ 249, p. 304. The original is lost. He was listed as an alderman and witness with seal attached: “…quorum sigilla hiis litteris sunt appensa…”
334 Cartulaire de l’Hôpital Saint-Jean, SJ 251, p. 305. The original is lost. Éverwin appeared as an alderman and witness with seal attached: “…quorum sigilla hiis litteris sunt appensa…”
335 In the first issuance he was listed as an alderman and witness with seal attached: “quorum sigilla hiis litteris in testimonium presentibus sunt appensa…” Cartulaire de l’Hôpital Saint-Jean, SJ 252, p. 307. The original is lost. In the second issuance he appeared as an alderman and witness. There is no indication of an attached seal in the document, but it is noted by Bonenfant: Bonenfant, Cartulaire, p. 309. For the charter, see Cartulaire de l’Hôpital Saint-Jean, SJ 254, p. 309. CPAS, SJ 42, fol. 4.
336 Cartulaire de l’Hôpital Saint-Jean, SJ 275, p. 331. The original is lost. He was listed as an alderman and witness with seal attached: “…quorum sigilla presentibus litteris in testimonium sunt appensa…”
337 “Noverint universi quod frater Walterus, provisor et magister hospitalis sancti Johannis in Bruxella, ex parte ejusdem hospitalis contulit Ostoni, dicto de Clapscoete, dimidium bonarium terre parum plus vel minus, jacentis inter Wambeka et Goutverdinghem, tenendum et excolendum a data litterarum presentium ad terminum sive spatium quadraginta annorum subsequenter, annuatim interim pro quatuor sextariis siliginis melioris, in quolibet inde sextario juxta duos denarios, deliberandis infra Bruxellam, et cum mensura Bruxellensi, et semper ad festum sancti Andreae solvendis, promittens ei una cum Everwino Campsoere, provisore dicti hospitalis, inde interim warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 226, p. 278. The original is lost.
the author of a charter along with Henri Portre. In addition, he was listed as an alderman and witness with his seal attached. Finally, on 8 July 1300, Éverwin served as the author of the document along with Henri Portre, and later he was noted as a witness with his seal affixed. With Éverwin, our study of the administrative machinery of the hospital of Saint John comes to an end.

Conclusion

Throughout the thirteenth century, the hospital provisors, many of whom were *burgenses*, provided legal, administrative, and tangible support to the hospital of Saint John. All the men served as witnesses and many were aldermen. In addition, several of the provisors diverted from their legal and administrative roles to provide support in the form of land and donations to the hospital of Saint John. Since these men already served the hospital, it naturally follows that they would want to see to its continued success. The stake that many of these individuals had in the hospital is proven by their donations, as well as the donations of family members who followed in their footsteps. While it would seem that the trends would end here, they continued, especially when other classes were added to the mix: urban women and tradesmen. As will be demonstrated, urban women and tradesmen became some of the greatest supporters of the hospital of Saint John. The women especially were aided by the influence of the hospital provisors, many of whom

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340 “Universis presentes litteras inspecturis Everwinus Campsor et Henricus Portre, scabini de Bruxella, salutem et notitiam vertitatis…” Cartulaire de l’Hôpital Saint-Jean, SJ 274, p. 329. CPAS, SJ 44, fol. 44.
341 “…In cujus rei testimonium, nostra sigilla hiis litteris sunt appensa…” Cartulaire de l’Hôpital Saint-Jean, SJ 274, p. 329. CPAS, SJ 44, fol. 44.
were brothers, fathers, and relatives of the women who later choose to give to the hospital of Saint John. It is to the women that and town craftsmen that we now turn.
COMPLETING THE HIERARCHY—URBAN WOMEN AND TOWN CRAFTSMEN

Introduction

Throughout the history of Saint John’s hospital, many people from the town of Brussels, as well as from neighboring regions, appeared in the institution’s documents. From the duke of Brabant and the pope of Christendom, to the local bishops, the châtelain, town burgenses, local clergy and even provisors and supporters of the hospital, almost all members of the social hierarchy contributed to the newly-founded institution. Even the poor and the sick appeared throughout the twelfth and thirteenth centuries. While the above-mentioned groups of people have provided us with a better understanding of donations to the hospital, and while the many categories of the social hierarchy help us to understand the social composition of Brussels and the changes occurring to it during the periods in question, two groups are left to explore to complete the analysis—urban women and the town craftsmen.

Urban Women

Urban women have been previously explored in this work. Earlier chapters discussed the beguines, as well as the hospital sisters and mistresses. There were, however, lay women who were strictly tied to the urban setting and who also participated in donations to the hospital of Saint John. Many of these women were able to contribute thanks to the rise of cities, the advent of newly freed cash, and the creation of various statuses and social mobilities that followed. In exploring urban women I have broadly applied the analysis to all women present in the charters. The only women who are not mentioned in this chapter are the sisters, the head and lesser mistresses of the hospital,
and the beguines, all of whom were treated in an earlier chapter of this work. The reason for this broad exploration is that lay women were some of the most ardent supporters of the hospital of Saint John.

Donations by laywomen fall into several categories. The first division distinguishes between gifts that came before and after the hospital’s autonomous period. In all, donations by laywomen account for 21.58% of the extant charters by the end of the thirteenth century. Yet, of the 278 documents in the collection, only seven donations came from women before the autonomous period, and of those seven, only two of the women acted on their own. The other five donations were joint donations by a wife and husband or by other family members. After 1248, however, donations by women picked up considerably. Fifty-three donations occurred after 1248, and of those donations, twenty-nine of the donations accounted for women acting on their own (those from the autonomous period account for 25.9% of all documents occurring after 1248). The substantial increase in gifts by women, especially from those women acting on their own, speaks to the creation of a new urban atmosphere, as well as the rise of new opportunities for several classes. These numbers, of course, do not include the many documents in which women religious, the hospital mistress, and even beguines who participated in hospital affairs. The percentages, with these women included, increase considerably.

Needless to say, lay women composed one of the greatest donor groups for the hospital of Saint John. Especially when it comes to women acting on their own, the amount of women who participated charitably with the hospital is astonishing. Their role, however, in hospital charity, is not surprising. David Nicholas has explained that “a
woman was the ward of her husband unless he emancipated her legally, making her an independent *femme sole*, able to handle her business without his intervention or liability. Although this degree of autonomy was unusual, women exercised considerable independence and discretion in practice."¹ Nicholas also argues that “women disposed of considerable capital, most of it through inheritance, which they invested in business ventures.”² While this may have been true of several of the women of Brussels, the more common investment in the new urban center, as seen through the charters of Saint John’s hospital, came via charitable donation. Many women used their inheritance, dowries, and other accumulated wealth for the benefit of the poor and sick.

Most women were not, however, acting entirely independently. It must be noted that the majority of the women who appear in the charters had some tie to someone previously mentioned in other donations. Some of the women were daughters and granddaughters of those who had given to the hospital of Saint John in the past, some were now-widowed wives of husbands who had donated to the hospital of Saint John or who had served as provisors to the hospital or aldermen to the city, and some women acted along with their husbands, brothers, sisters, and guardians, many of whom had earlier ties to the hospital. This being said, especially after 1248, the nature and composition of the documents in which women appeared took on a new character. Most of the documents after 1248 are short and formulaic, and most were either written by or witnessed by some of the same hospital provisors identified earlier. All the documents,

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² Ibid.
however, regardless of their composition, speak to the support by women to the hospital and to the new status women gained after the urban revolution.

Joint donations

The charters in which women appear take on many forms. Some of the women appear alone, while many appear along with other members of their families. Thus, this section will look at the donations given by urban women, their husbands, sisters, brothers, children, grandchildren and guardians. Most donations to the hospital that involved women were those that came from both a wife and her husband. The first known issuance of this type came in January 1209 in a donation by Godfrey, châtelain of Brussels and his wife Heylewige. The couple gave jointly to the hospital of Saint John. Their donation included the exemption of rents and charges owed on eight bonniers of land that the hospital held in census to Godfrey at Petit-Bigard. While Heylewige was certainly not acting independently, her inclusion signifies her part in the donation.

Similarly, in October 1227, Guillaume of Grimbergh, lord of Assche, and his wife, Isabeau, gave to the hospital of Saint John an annual rent of XX solidos Flandrensium. The funds were to come from the revenues from their census at Woluwe-Saint-Rombaut. Also acting partly on her own in April of either 1234 or 1235, was

3 “...Godefridus, dictus Bruxellensis castellanus, una cum uxore mea Heylewige, de consensu et voluntate liberorum nostrorum Leonii et Godefridi et ceterorum, octo bonaria terre, que apud Bigardis fratres et sorores hospitalis beati Johannis in Bruxella a nobis jure tenent hereditario, ab omni exactione et inquietudine qua nobis tenebantur, tam ipsa quam mansionarios in ipsis commorantes vel ipsa colentes, preter servos nostros et ancillas nostras, intuitu divine retributionis in perpetuum libera esse concessimus et exempta...” Cartulaire de l’Hôpital Saint-Jean, SJ 7, p. 14. The original is lost.

4 “In nomine sancte et individue Trinitatis. Ego, Willelmus de Grintbergis, dominus de Ascha, et Elyzabet, uxor mea, universis presens scriptum visurus, salutem in Domino. Notum fieri volumus tam presentibus quam futuris quod nos in elemosinam contulimus religiose domui hospitalis beati Johannis in Bruxella XX solidos Flandrensium, annuatim de censu nostro in Wolue Sancti Rumoldi capiendos a procuratoribus
Gérard Hacca’s wife. Gérard Hacca, a knight of Axpoel under Sempst, his wife, and their son Gérard all gave to Saint John’s an annual and perpetual rent of a *dimidium modium* of wheat to be taken from the mill of Molhem. While not acting alone, the women mentioned were still participating in the gifts to the institution.

At other times, women were mentioned as contributors in sales and contracts with the hospital. In 1244, Bernard of Ledebergh, a knight, sold to the hospital of Saint John six *bonniers* of land located in Pamele. The hospital had received the lands from Guillaume of Ledebergh, Bernard’s father, as a guarantee of the sale. In return for the lands, Bernard and his wife, Margareta, were to collect ten *libris Bruxellensibus*. Similary, in June 1247, Godfrey, lord of Perwez and of Grimberghe, and his wife Alix, approved a sale made by the hospital of Saint John of forty *bonniers* of land and of a...
dîme at Ledebergh.\(^8\) The charter concluded by noting “super quo eisdem nostras patentes litteras ipsis in testimonium duximus conferendas.”\(^9\) In both instances, the couples acted together, in solidarity, in the transactions.

While most of the donations came from what could be considered *burgenses* couples, other donations came from the landed nobility, who also gave jointly to the hospital of Saint John. Sometime between 1 and 26 March 1250 Godfrey of Louvain, the lord of Leeuw-Saint-Pierre, and his wife Marie gave to the hospital of Saint John an annual rent of ten *solidos Bruxellensium*, which was to come from their census of Leeuw.\(^10\) Godfrey of Louvian was the son of Duke Henry I and of Mathilde of Boulogne. He became lord of Leeuw-Saint-Pierre after the death of his father. While Godfrey’s marriage to Marie was typical of the upper classes—Marie was the daughter of Arnoul IV, lord of Audenarde, who died 21 January 1254\(^11\)—it may have been that Godfrey and Marie were emulating the charitable donations of Duke Henry I.\(^12\) In addition to the donation by Godfrey and Marie, there was also the previously-mentioned case of the

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\(^8\) “G., dominus de Peruez et de Grinbergis, necnon Aleidis, uxor sua, omnibus paginam presentem intuentibus noscere veritatem. Ad universorum noticiam volumus pervenire quod emptionem, quam domus hospitalis beati Johannis in Bruxella in dominio nostro de Ledebergha contra illos de Ledebergha circiter XL bonariorum terre parum plus vel minus et de quadam decima ibidem jacenti fecerunt, consentimus, ratam habemus et laudamus emptionem memoratum…” Cartulaire de l’Hôpital Saint-Jean, SJ 69, pps. 100-101. The original is lost.

\(^9\) Cartulaire de l’Hôpital Saint-Jean, SJ 69, pps. 100-101. The original is lost.


\(^11\) For more information on Godfrey and Marie, see Cartulaire de l’Hôpital Saint-Jean, p. 39, fn 1. Also Wauters, Histoire de l’église en Belgique, t. I, pps. 127-129.

\(^12\) This was not the last appearance of Marie in the documents of the hospital. On 12 May 1256, Marie, now the widow of Godfrey of Louvain, and her son, Henri of Louvain, appeared in an agreement between her, her son, Ghislain of Elinghen, and Henri, the deceased *prévôt* of Saint-Jacques sur Coudenberg. See Cartulaire de l’Hôpital Saint-Jean, SJ 98, p. 137. The original is lost.
Lionnet I’s granddaughter, Mathilde. Between 20-30 April 1253 or between 1-11 April 1254, Lionnet I, his son Lionnet II, and Mathilde, all gave to the hospital of Saint John eight *bonniers* of arable land located at Molenbeek-Saint-Jean. Like the gifts of Duke Henry I himself, donations by landed nobility were not many. There were, however, some, and even women participated in the gifts. Yet, one did not have to be of noble or even *burgensis* distinction to give jointly to the hospital of Saint John. Such was the case on 19 August 1250 when Gautier Couhaar, a blacksmith, and his wife, Ode, assigned to the hospital of Saint John a rent of forty *libras Bruxellensium* on their home and holdings. They agreement was made with several conditions. Upon their deaths, however, all their holdings would be given over to the hospital. Similarly, between 13 and 30 April 1270 Jean of Wyckhuyzen, Nicolas of Haecht, and his sisters Tusienne, Marguerite, Catherine, and Ide, all ceded *pro allodio* three *jornalia* of land located between Steenockerzeel and Melsbroeck to the brother Gerard of the hospital and to Saint John’s.

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13 “...Noverit universitas vestra quod nos, pro animarum nostrarum, predecessorum successorumque nostrorum salute, libere conferimus in elemosinam domui hospitalis sancti Johannis in Bruxella octo bonaria terre arabilis jacentia in parrochia sive in territorio ville de Molenbeke prope Bruxellam, firmiter et fideliter promittentes eidem domui bonam et legitimam de predicta terra contra omnes juri parere volentes prestare grandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 89, p. 127. The original is lost.

14 “Notum sit universis presens scriptum inspecturis quod Walterus faber, dictus Couhaar, et uxor ejus Oda contulerunt et assignaverunt magistre et conventui hospitalis beati Johannis in Bruxella super domum suam et domistadium cui eadem domus superedificata est quadraginta libras Bruxellensium in elemosinam. [...] Insuper contulerunt prenominati Walterus et ejus uxor omnia bona sua post mortem suam dicto hospitali possidenda libere et habenda...” The document was completed in the presence of and with the consent of Hugo Moor and Lionnet I. Cartulaire de l’Hôpital Saint-Jean, SJ 82, pps. 119-120. CPAS, SJ 29, fol. 3.

15 “Notum sit universis quod Johannes de Wighusen, Nycholaus de Hagt et ejus sorores Tusiana, Margareta, Katherina et Ida contulerunt cum debita renuntiatione fratri Gerardo hospitalis beati Johannis in Bruxella, dicto de Frigido Monte, ad opus dicti hospitalis, tria jornalia terre ad mensuram, sita inter Stenhockensele et Meldebroech, justa stratam euntem versus Meldebroech, pro allodio, promittens ei inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 142, p. 185. The original is lost. Rather, the
Likewise, in March 1274, Jean, son of Gerelm, Guillaume de Pille and his mother, Alix, conferred to Siger Portere a *fonds* of a house located in Brussels next to the port of Coudenberg. Siger Portere was linked to other members of the *Portre* or *Urbani* family, who served as aldermen in Brussels and who were identified as *burgenses* in the hospital’s charters. Shortly later on 30 August 1276, Henri Prochiaen and his wife, Ide, gave *pro allodio* to the hospital of Saint John lands in census sold by them at Erps. The couple guaranteed the hospital the use of the lands during their lives. After their deaths, however, the revenues from the land would be sanctioned for distribution among the inhabitants of the hospital of Saint John in the celebration of Henri’s and Ide’s anniversaries, clearly indicating the two-sided role of charity.

As donations from married couples increased throughout the thirteenth century, so did elements of women’s autonomy. In all the cases up to 1284, the husband was listed...
first. In addition, the wife was named as “the wife of…”. On 16 October 1284, however, this changed with a donation from Élisabeth, the daughter of Henri van den Spieghele, and her husband, Arnoul. The couple ceded to the hospital of Saint John *pro allodio* all the rights that they had on two *fonds* of a house located in Brussels next to Muttersburg.\(^{19}\) Élisabeth was mentioned first in the document, and she may have been influenced by her family, including her father,\(^{20}\) many of whom had been supporters of Lionnet I and who had previously appeared in donations to the hospital of Saint John. The family had served as aldermen in the thirteenth, fourteenth and fifteenth centuries and were certainly among the *burgensis* of Brussels.

Five years passed before another couple donated to the hospital of Saint John. On 3 January 1289, Gautier De Leeuw\(^{21}\) and Marguerite, the widow of Gautier Labus, transported *pro allodio* two *bonniers* and one half of land located at Wolputte\(^{22}\) to the hospital of Saint John.\(^{23}\) One of the most interesting joint donations followed a short time later on 4 January 1290. Élisabeth, the daughter of the late Jean of Louvain, and Godfrey of Mont-Saint-Pont, Élisabeth’s guardian, transported *pro allodio* one-sixth of a piece of

\(^{19}\) “*Noverint universi quod Elizabet, filia quondam Henrici dicti de Speculo, et Arnouldus, maritus ejus, renuntiando contulerunt fratri Waltero de Hospitali sancti Johannis bruxellensis, ad opus ejusdem hospitalis, omne jus suum quod habebant et eis competebat in duobus domistadiis sitis prope pontem Monetarii, unde Godescalcus Cupre tenet unum et Johannes de Carlevlt aliu, pro allodio, promittentes inde rectam warandiam…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 202, p. 255. CPAS, SJ 32, fol. 54.

\(^{20}\) See, for example, *Cartulaire de l’Hôpital Saint-Jean*, SJ 5, pps. 10-13 and SJ 40, pps. 64-65.

\(^{21}\) Gautier De Leeuw appeared in an earlier charter in which he alone gave a gift to the hospital of Saint John on 22 November 1280. See *Cartulaire de l’Hôpital Saint-Jean*, SJ 189, p. 242. The original is lost.

\(^{22}\) This was probably located in Woluwe-Saint-Pierre and more precisely at Bovenberg. See Bonenfant, *Cartulaire de l’Hôpital Saint-Jean*, p. 261, fn 2.

land worth seven *bonniers*. The land was located in Woluwe and it went to the hospital of Saint John. While this was not the only mention of a guardian in a charter, it was the only issuance where a guardian and a husband were both present.

Soon after, the donations returned to more traditional joint grants. Élisabeth, the widow of Henri Malremans, and her daughter, Catherine, transported *pro allodio* ten *jornalia* of land located at Ransfort to the hospital of Saint John on 16 June 1290. In addition, Élisabeth renounced her and her daughter’s use on the land. A comparable occurrence to the 4 January 1290 donation came on 23 March 1291. Catherine, identified as a widow (*vidua*), Élisabeth and her guardian *Gossuinus Brune*, and Alix and her guardian *Paridanus de Martenbeka* transported to the hospital of Saint John, *pro allodio*, eleven *jornalia* of forest and land located at Eysinghem. All three of the women were from Alsemberg. Similarly, on 21 June 1291 another Catherine, daughter of the late

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24 “Noverint universi quod Elisabet, filia quondam Johannis de Lovanio, et Godefridus, dictus de Mancipont, ejus tutor, cum debita renuntiatione contulerunt fratri Waltero, ad opus hospitalis sancti Johannis in Bruxella, sextam partem de septem bonariis terre, paru plus vel minus, jacentis aput Wolue, pro allodio, promittentes ei ad opus dicti hospitalis inde rectam warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 216, p. 269. CPAS, SJ 46, fol. 30.

25 “Noverint universi quod Elizabet, relicta Henrici, dicti Malremans, resignavit Katherine, filie sue, usumfructum suam, quem tenebat ad ea, in decem jornalibus terre jacentis apud Ransfort, in duabus petiis, promittens per fidem suam se de cetero dictum usumfructum nunquam calumpniaturam. Et, hoc facto, Elizabet et Katharina predicte cum debita renuntiatione contulerunt fratri Frederico ad opus hospitalis sancti Johannis in Bruxella dicta decem jornalia terre, pro allodio, promittentes ei inde rectam warandiam ad opus dicti hospitalis…” Cartulaire de l’Hôpital Saint-Jean, SJ 219, p. 271. The original is lost.

26 “Noverint universi quod Katherina de Alsenberga, vidua, Elizabet de Alsenberga et Gossuinus Brune, ejus tutor, Aleidis de Alsenberga et Paridanus de Mortenbeka, ejus tutor, cum debita renuntiatione contulerunt fratri Waltero, provisori hospitalis sancti Johannis in Bruxella, ad opus ejusdem hospitalis, undecim jornalia in busco et terris jacentia apud Heysenghem, pro allodio, promittentes ei inde ad opus dicti hospitalis rectam warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 224, p. 276. CPAS, SJ 38, fol. 39.
Gautier Mennens, and her guardian Nicolas transported *pro allodio* to the hospital of Saint John four *bonaria* of land and six plots located at Ransfort and Osseghem.27

On 7 March 1294 the children of Henri Monterkens transported *pro allodio* to Saint John’s rights on a *fonds* of a house located in Brussels outside the city wall above a canal and the port of *Herbes-Potagères*. The children involved in the agreement included Jean, Hedwige and Élisabeth.28 On 18 July 1296 Catherine and Ide, both sisters of Godescalc of Breedhout, promised to pay the hospital of Saint John successively twenty-five and eighty-eight *libras Bruxellensium*. They also both conferred to the hospital all of their movable property. In addition, in exchange for life usage of the property, the women agreed to make a money payment of one *denario Bruxellensi*.29

In addition to joint donations by women, children, and guardians, there were also occurrences, as mentioned earlier, of gifts by both husbands and wives. The difference in the later gifts was that the wife was listed first. On 15 February 1298 Marguerite, the wife of Régnier Eggloy, was listed first in a transference to the hospital of Saint John of a

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28 “Notum sit universis quod Johannes, Heylewigis et Elyzabet, liberi quondam Henrici, dicti Monterkens, contulerunt cum debita renuntiatione Johanni dicto Vroembout omne jus quod habebant et eis competebat in quodam domistadio sit extra murum, supra fossam, inter Warmoesporte et domum quondam Godefridi, dicti Ettel, pro allodio, promittentes ei inde rectame warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 232, p. 284. The original is lost.

29 “Notum sit universis quod Katherine et Yda, sorores Godscalci de Breethout, promiserunt dare fratri Waltero de hospitali sancti Johannis vel latori presentium, ad opus magistri, magistre, fratrum et sororum dicti hospitalis, ad festum beati Bavonis proximo futurum viginti quinque libras Bruxellensium denariorum et ad festum Nativitatis beati Johannis Baptiste inde proximo subsequens octoginta octo libras ejusdem monete. Item contulerunt dicte Katherina et Yda, sorores, predicto fratri Waltero, ad opus predictorum magistri, magistre, fratrum et sororum, omnia bona sua mobilia, acquisita et acquirenda, promittentes ei inde warandiam, recipiendo iterum hec bona mobilia, quoad vixerint dicte sorores vel altera eorum, annuatim interim pro uno denario Bruxellensi simper ad Natale Domini solvendo...” Cartulaire de l’Hôpital Saint-Jean, SJ 241, p. 293. The original is lost.
house and its fonds, as well as the vineyards associated with the property. She was “assisted” by her husband in the agreement. The property, which was next to the port of Coudenberg, must have been worth a considerable sum, and it certainly added to the domain of the hospital. Later these holdings would appear again when on 22 April 1299, Gertrude de Bonne renounced in favor to the hospital of Saint John the use that she had on the holdings and that the hospital had acquired in 1298. The holdings again included in the original-named vineyard located near Coudenberg Port.

Some other unusual grants also came from joint donations. On 24 June 1298 Laurent of Uccle and his wife, Clarisse, transferred to the hospital of Saint John half of a fonds of a house located behind their own residence. The hospital then transferred to them for the other half of the property a titre viager in return for a payment in census of

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30 “Notum sit universis quod Margareta, uxor Reineri Eggloi, et Reinerus Eggloi, ejus maritus, tamquam ejus tutor, contulerunt cum debita resignacione Marie de Ledeberghe, magistre, fratri Godescalco, magistro hospitalis sancti Johannis in Bruxella, ad opus dicti hospitalis, domum cum domistadiis, prout jacent extra portam Frigidi Montis et eis sunt assignata, cum vinea appendente, pro allodio, promittentes eis inde rectam warandiam ad opus dicti hospitalis, salvo jure ac hereditate Gertrudis de Bonne et suorum heredum…” Cartulaire de l’Hôpital Saint-Jean, SJ 249, pps. 303-304. The original is lost.

31 “Notum sit universis quod Gertrudis, dicta de Bonne, resignavit fratri Godescalco, ad opus hospitalis sancti Johannis in Bruxella omnem usumfructum quem habebat in bonis que dicta Gertrudis tenere solebat quondam a Reynero Eggloy, que bona per recompensationem et per cambium pro alis bonis incorporata sunt hospitali sancti Johannis in Bruxella, promittens, fide cum juramento prestita corporali, se nunquam calumpniaturam usumfructum antedictum…” Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 314. The original is lost.

32 “…consistentes versus protam Frigidi Montis…” and “…Et est conditum quod dicta Gertrudis nec sui liberi nullum habelbunt exitum retro versus vineam nec versus ortum, et dicte camere habelbunt viam versus vicum, et eandem viam habelbunt camere hospitalis predicti, ubicumque nunc jacet vel in posterum jacere contigerit…” Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 315. The original is lost. The charter is also in Flemish. See Cartulaire de l’Hôpital Saint-Jean, SJ 262, p. 316. The original is lost.

33 “Notum sit universis quod Laurentius de Uccle et Clarissia, ejus uxor, renunciando contulerunt fratri Godescalco, magistro hospitalis sancti Johannis Bruxellensis, ad opus ejusdem hospitalis, dimidietatem domistadii siti retro dictum Laurentium, prout se extendit usque ad mansionem Helewisis, relicte Henririci de Waltermale, pro alidio, promittendo ei inde [ad] opus dicti hospitalis rectam warandiam, retento sibi usufructu eorum penes dictam dimidietatem dicti domistadii…” Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 308. CPAS, SJ 29, fol. 22.
five sous. As a result, the hospital created a twelve-foot wide passage or walkway, which was located on the holdings of the late Guillaume of Clabot near the rue des Chevaliers. In addition, Gysellin of Audengem, noted as living near Termonde, and his wife, Marguerite, the sister of the late Jean Poluwe, agreed to pay to the profit of Saint John’s hospital at Christmas time some thirteen modis of rye, Bruxellam cum mensura. The couple recognized that the mansus, called mansus sancti Johannis, which was located at Merchtem, was in charge of their payment of rye, which was to be of the same amount listed above and to go to the hospital of Saint John.

In addition, in May 1300 Jean, the son of Gerelm, conferred to the hospital of Saint John an annual and perpetual rent of two sextaria of rye to come from the part that he held in a mill called Labusmolen at Ophem. Jean, however, only acted with the consent of his wife.

Finally, on 19 December 1300 Marie of Saint-Trond and her husband Jean, son of Amauri de Muro transported to Henri Bobel a fonds of a house,

34 “...Quo facto, dictus frater Godescalcus, magister hospitalis predicti, ex parte dicti hospitalis, contulit dictis Laurentio et Clarissie, ejus uxori, alien dimidietatem dicti domistadii tenendam et possidendam quandiu dicti conjuges vixerint vel alter eorum, pro quinque solidis Bruxellensium denariorum monete usualis communiter in bursa currentis semper ad Natale Domini solvendis, promittendo eis inde ex parte dicti hospitalis warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 308. CPAS, SJ 29, fol. 22.

35 “...Item condictum fuit et est quod dictum hospitale viam largam duodecim pedum habere poterit de bonis quondam Willelmi dicti Clabot versus vicum Militum usque ad domistadium quod tenet vir discretus Balduinus de Herent, presbyter, officialis foraneus...” Cartulaire de l’Hôpital Saint-Jean, SJ 253, p. 308. CPAS, SJ 29, fol. 22.

36 “Notum sit universis quod Gysellinus de Oudeghem, manens prope Tenremonda, et Margareta, ejus uxor, soror quondam Johannis dicti Poluwe, promiserunt dare fratri Godescalco, magistro hospitalis sancti Johannis Bruxellensis, vel latori presentium ad opus ejusdem hospitalis ad festum Nativitatis Domini proximo futurum tredecim modios siliginis pagabilis infra Bruxellam cum mensura ejusdem loci solvendos. Et recognoverunt competenter dicti Gysellinus et Margareta ejus uxor quod mansus dictus mansus sancti Johannis prout situs est propter Merthines esset obligates debito modo dicto hospitali pro uno modo siliginis pagabilis hereditarie annuatim solvendo infra Bruxellam cum mensura ejus loci...” Cartulaire de l’Hôpital Saint-Jean, SJ 254, p. 309. CPAS, SJ 42, fol. 4.

37 “Notum sit universis quod Johannes, filius Gherelmi, contulit, de consenso domicelle Elizabet, uxoris sue, hospitali sancti Johannis duo sextaria siliginis, hereditarie et perpetuo annuatim recipienda ad Nativitatem beati Johannis Baptiste ad partem suam, quam ipse habet in molendino dicto Labusmolen, sito apud Ophem, promittendo eidem hospitali inde warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 272, pps. 327-328. The original is lost.
which was held in census to the duke of Brabant and located in Brussels on Coudenberg. The house was also located across from Ammanshosftad, which is located toward the bottom of Coudenberg Street.\textsuperscript{38}

While the above survey demonstrates a consistant influx of joint donations throughout the thirteenth century, not all the charters in the hospital’s collection demonstrated women donating to the hospital in conjunction with their husbands and with other family members. In some cases, the influence or role of a women was slightly obscured within the documentation, and in some cases, donations were made in the honor of a woman. Like the above-explored instances, these appearances of women started in the foundational period of the hospital and ended in its autonomous period at the end of the thirteenth century.

Beginning between 23 and 30 April 1234, Adam of Hal left on crusade against the Stadingues, a group of heretics. Adam, in a charter, specified the distribution of his holdings to the hospital of Saint John.\textsuperscript{39} There were, however, certain conditions that dictated the allocation of the donation, including whether or not his wife was living. Adam’s wife was not named, but donation to the hospital depended on her.

\textsuperscript{38} “Notum sit universis quod Maria, dicta de Sancto Trudone, et Johannes, filius Amelrici de Muro, ejus maritus, tamquam suas tutor, optulerant cum debita resignation in manus Johannis, dictus Bisscop, astantis ex parte ducis ad opus Henrici, dicti Bobel, domistadium situm ad opposito domistadii Amanni supra Frigidum Montem, quo manet magister Willelmus Carpentarius promittendo warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 278, pps. 333-334. The original is lost.

\textsuperscript{39} For example, “…Post obitum vero ipsius A., uxore sua, si tunc vixerit, in uno horum duorum usufructum sibi retinente, ambobus autem defunctis, predicta duo ad domum prefatam tanquam ad verum heredem devolventur. […] Si pergendo contra Stedingos moreretur, medietas horum bonarum ad domum dictam devolveretur, reliquam medietatem uxor ipsius A. nomine dotis ad vitam suam possidente. […] Si autem alter puororum moreretur, domus unum et uxor reliquiam puero superstiti persolverent annuatin. Insuper, si uxor predicte in Bruxella postmodum manere placuerit, sepedicta domus eidem in manisconibus tenetur providere. Cum vero uxor obierit, quatuor modios pueros predictis domus persolvere tenetur annuatin…” Cartulaire de l’Hôpital Saint-Jean, SJ 46, p. 72. CPAS, SJ 39, fol. 7.
While it was more typical for women to participate in donations to the hospital of Saint John, there were some cases in which donations were made in honor of women. An example of such an event occurred on 3 February 1242 when the knight, Henri of Velst, gave to the hospital of Saint John and to other institutions the responsibility of celebrating the anniversaries of him and his wife, Margarata. The funds designated to pay for the celebrations were drawn from rents from a rural exploitation located at Brusseghem and held in census by Henri to the cathedral chapter of Sainte-Gudule.  

A similar situation occurred in June 1245. This time, however, the role of the woman in the affair was even more understated. Henri, the legitimate heir of Alix, the widow of Henri Prochiaen and son of Jean Helde, gave his consent, since he had been a minor, to complete a sale made by Alix to the profit of the hospital of Saint John. The sale included a house where the chaplain of the hospital lived with its associated fonds. In return, the hospital accorded Henri an exemption for the duration of two years of an annual rent of 44 solidos Bruxellensis owed for the house where the chaplain lived, which was located in Brussels on Steenweg Street.

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40 “Noveritis quod Henricus, miles, de Velst, in presentia nostra constitutus, XVI d. annuatim in festo beati Blasii in perpetuum solvendos hospitali sancti Johannis et duodecim d. in monasterio beate Katerine et sex d. hospitali sancte Gudile et sex den. in domo leprosorum in Bruxella in elemosinam contulit, eosdem assignando ad quondam curtim citam (sic) in parrochia de Brucengem in loco qui dicitur Rajardengata, quam de nobis pro octo den. hereditarie possidet, adjecta hac conditione quod, ipso et uxor sae Margarata defunctis, in predicto festo beati Blasii anniversarium ipsorum dicta hospitalia et dictum monasterium in perpetuum observabunt…” Cartulaire de l’Hôpital Saint-Jean, SJ 57, p. 84. CPAS, SJ 22.

41 Henri Prochiaen also appeared in an earlier document. See Cartulaire de l’Hôpital Saint-Jean, SJ 121, p. 163. The original is lost.

42 “...Presentium igitur testimonio notum facinus universis quod, cum L., magister, et I., priorissa, totusque conventus hospitalis sancti Johannis in Bruxella erga Aleydem, relictam Henrici, filii Johannis, dicti Helde, domum, in qua cappellanus dicti hospitalis commoratur, cum domistadiis dictae domui adherentibus, Henrico, legitimo herede dicte Aleydis, infra annos discretionis existente, emisset, dictus Henricus, postmodum ad annos discretionis pervenuts, in presentia nostra propter hoc constitutus, dictum emptionem acceptavit et juri, quod in dictis bonis ratione successionis habet, festucando spontanea voluntate renunciavit. Unde predictum hospitale quandraginta quatuor solidos Bruxellensis monete, in quibus dicto
Several years would pass before another appearance of a woman. On 4 February 1261, Elisabeth, the daughter of Godfrey Onin, appeared indirectly in the documents of the hospital of Saint John. The document concerned the *fief* of Elizabeth. On that day, Gérard, the house instructor (*preceptor domorum*) of the Knights Templar of Brabant and of Hesbaye, declared that the hospital of Saint John and the lesser mistress, brothers, and sisters give him satisfaction in regards to the subject of the *fief* of Elisabeth, daughter of Godfrey Onin of Saint-Gilles, held by the duke and who was to receive the *alloidium* of the brothers and sisters of the hospital. Later in 1262 sometime before 24 June the matter was again revisited by Godfrey’s widow, Ideloïe. This time, the sentence arbitration concerned the subject of the *fonds* of Nieuwmolen and of the lands situated in proximity of Obbrussel. The disagreement continued in June 1262 when the hospital of Saint John and Gertrude Schalie divided up in agreement the hereditary property of Godfrey Onin. Gertrude was the daughter of Godfrey Onin and the sister of Elizabeth.

hospitali ratione annui census et domus tenebatur, occasione domus in qua manet, idem H., eidem remisit et eadem domum, que sita est in orto, qui quondam fuit Esselini, in lapidea via, sine censu vel aliquo jure dicto hospitali occasione dicte domus persolvendo a festo beati Petri ad Vincula proximo instanti usque ad duos annos libere tenebit...” Cartulaire de l’Hôpital Saint-Jean, SJ 63, p. 90. The original is lost. Also, for more on “I., priorissa,” or Iđe, see chapter seven.

43 Godfrey was the father of Gertrude Schalie. See above for more on Gertrude. Cartulaire de l’Hôpital Saint-Jean, SJ 109, p. 149, fn 2.

44 “...Noverint universi presentes litteras inspecturi quod magistra, fratres et sorores hospitalis beati Johannis in Bruxella de feodo et homagio, que tenuit Elizabeth filia quondam Godefridi de Obbruxella a domino duce, predictis magistre, fratribus et sororibus in allodium transmutata, nobis satisfecerunt et nos eisdem magistre, fratribus et sororibus omnes jus et omnem actionem, que in dictis feodo et homagio habeamus per conventiones inter nos habitas, acquitavimus et acquitamus...” Cartulaire de l’Hôpital Saint-Jean, SJ 109, p. 149. CPAS, SJ 44, fol. 2.

45 Although this is an example of a woman acting on her own, which is discussed in a later section, I have included the disagreement here since it is related to the previous argument between the hospital, Elisabeth, and her father, Godfrey Onin.

The accord between the two specified exactly to whom what items went. Gertrude, acting on her own would go one to become one of the most ardent supporters of the hospital, which will be explored later.

The final two donations pertaining to indirect female donations came in the 1290s. Sometime between 1 and 21 April 1291 Jean Loschart, called Apelmenghere, transported a house with its fonds located in Eysinghen pro alloidio to the hospital of Saint John. The agreement stipulated, however, that his niece, Marguerite, reserved rights of usage on the land. Much later, in February 1299, the hospital of Saint John rented out a fonds of a home located in Brussels in the Putterie to Gertrude of Uccle for fifty years. The house was located across from the home of Hedwige of Nova Domo, the daughter of Gautier Clutinc. Although the document had nothing to do with a donation to the hospital, the rental demonstrates the means through which Gertrude could acquire funds to pay rent to the hospital.

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47 Notum sit universis presens scriptum inspecturis quod Gertrudis, filia quondam Godefridi, ex una parte, et hospitale beati Johannis in Bruxella, ex altera, super bonis que fuerunt ipsius Godefridi de communi voluntate sua rectam et legitimam fecerunt partificationem...” The list of divisions is long. For more, see Cartulaire de l’Hôpital Saint-Jean, SJ 112, pps. 153-154. CPAS, SJ 44, fol. 4.

48 “Noverint universi quod Johannes dictus Loscart, Appelmanghere, cum debita renunciatione contulit fratri Waltero ad opus hospitalis sanctis Johannis in Bruxella domum et domistadium, prout hec bona sita sunt apud Heisenghem inter ecclesiam et pontem ibidem, pro alloidio, promittendo ei inde ad opus ejusdem hospitalis rectam warandiam, salvo Margarete, filie Johannis, fratris dicti Johannis Appelmanghere, usufructu suo in bonis antedictis...” Cartulaire de l’Hôpital Saint-Jean, SJ 225, p. 277. CPAS, SJ 38, fol. 40. This was not the first appearance of Jean Loschart. In fact, the property that he transported to the hospital probably came from earlier agreements between him and Godfrey of Eysinghen (see Cartulaire de l’Hôpital Saint-Jean, SJ 220, p. 272. CPAS, SJ 38, fol. 38), and him and Pierre Keiser (see Cartulaire de l’Hôpital Saint-Jean, SJ 211, p. 264. CPAS, SJ 38, fol. 36).

49 “Universis presentes litteras inspecturis, magistra, fratres et sorores hospitalis sancti Johannis in Bruxella, salutem et noscere veritatem. Noveritis quod nos per consensum Gerelmi dicti Heinkaert, provisors nostri in termorabilibus, contulimus Gertrudi de Uccle, latori presentim, domistadium situm in Pottera ex opposito domine Helewigis de Nova Domo, tenendum a nuc temporis (sic.) ad terminum quinquaginta annorum continue sequentim, annuatim pro duodecim solidos monete communiter in bursa currentis, semper ad Natale Domini persolvendis, et duobus caponibus similis modo solvendis...” Cartulaire de l’Hôpital Saint-Jean, SJ 257, p. 311. The original is lost.

50 The two were probably related to Walter Clutinc, who appeared in the 1204 donation to the hospital by Duke Henry I.
Throughout the thirteenth century, women appeared in the documents related to Saint John’s hospital. Like their male counterparts, they gave, in Christian charity, to the hospital of Saint John. They may have been influenced by the lay spiritual movement in their donations, and they may have simply have been more affluent and able to participate than in years previous. Either way, women were certainly visible in the hospital’s documents. While in these cases they did not act alone—fathers, husbands, brothers, sisters, children, grandchildren, and guardians were all present—women’s donations accounted for a substantial portion of the donations Saint John’s received. To fully understand their capabilities, though, we must turn to the women who acted alone.

Women Acting on Their Own

The most substantial group of women were those who acted on their own. Several women used funds from their dowries, from having been widowed, and from their own income to support the hospital of Saint John. Most, though, were tied somehow to the city’s aldermen and/or the hospital’s provisors, whereas the majority of donations from this group came after 1248. There was, however, one grant from the foundational period, which came from Wiliarde, the widow of Jean Coude of Obbrussel, who acted completely on her own in a donation to the institution. In 1234 Wiliarde granted a charitable donation to the hospital of Saint John, half of which was designated for the treatment of the sick and half of which went to the purchase of lights. The money
for the donation included eleven *solidos [Brux]ellensium* that was collected on a *fonds* of a house located on Smaelbeek Street.\(^5^1\)

Several years passed before another incident of a woman acting independently was documented in the hospital’s charters. Already in the autonomous period in January 1250, Gertrude, identified as the widow of Arnoul Ameke, gave to the hospital of Saint John all the holdings that she would abandon upon her death. The agreement was made in exchange for a payment of an annual census of one *denarii*.\(^5^2\) After Gertrude’s donation, the grants made to the hospital by women acting on their own increased in number and frequency. For example, only three years later sometime after 24 June 1253, Mabilie, the widow of Thierry Balle ceded to the hospital of Saint John a *bonnier* of land located at Koekelberg. The hospital in return accorded Mabilie and her daughter, Alix, rights of usage on the land.\(^5^3\) And, as mentioned previously, On 11 June 1253, Mathilde, the granddaughter of Lionnet I, transported to the hospital of Saint John ten *bonniers* of land located at Petit-Bigard and held in fief to her grandfather, Lionnet I.\(^5^4\)


\(^{52}\) “*Noverint universi presens scriptum visuri quod Gertrudis, relicta quondam Arnoldi dicti Ameke, contulit omnia que post mortem ipsius de suis bonis manebunt hospitali sancti Johannis in Bruxella in elemosinam sub censu unius denarii ad Natale Domini solvendi...*” Cartulaire de l’Hôtel Saint-Jean, SJ 77, p. 113. CPAS, SJ 29, fol. 2.

\(^{53}\) “*Notum sit universi presens scriptum inspecturis quod Mabilia, relicta quondam Theoderici, dicti Balle, tradidit cum debita renunciatione subsecuta hospitali beati Johannis Baptiste in Bruxella bonarium terre site juxta Cockelberghe, pro recto al odio possidendum, promittens ei inde tanquam de alloydio rectam warandiam. Et receperunt predicta Mabilia et ejus filia Aleydis ab eodem hospitali dictam terram ad vitam suam annuatim super duos denarios possidendam...*” Cartulaire de l’Hôtel Saint-Jean, SJ 87, p. 126. The original is lost.

\(^{54}\) “…Deinde autem Magthildis, filia dicti Leonii, militis, et nep[tis ipsi]us domini]castellani, receptip per l[egiti]num tutorem [a prenomi]nato domino castellano pre[notate de]cem bo[naria terre in phedum,
A strange case occurred on 21 February 1260 when a Marguerite and a Gertrude ceded lands to their parish priest, Gautier Vos. Marguerite gave property that was located near Hespout, while Gertrude gave lands located at Alsinghen. While it is not entirely clear why the document was included in the hospital collection, there may be some connection to Gautier Vos. The Vos family, or vulpes, Wulpes, were tied to the city of Brussels and the hospital of Saint John. Included in the family was Éverwin I, a knight, who was especially involved as an alderman of Uccle, a provisor to the hospital of Saint John, a feudatory knight of Brussels, and a supporter or Duke Henry I.

Gautier Vos was probably also related to the family and thus had ties to the city and the hospital. And while there is no further identification of either Marguerite or Gertrude, the charter still shows that women were not only participating in legal agreements on their own, but that they also had the lands and means to allow them to participate in the first place. The Vos, or Vulpes family appeared again in October 1277. Élisabeth, the daughter of Englebert, who was the brother of Éverwin Vos, ceded pro allodio three bonniers of land at Dieghem to the Infirmary of the Beguinage of the
Virgin. The agreement, however, stipulated that upon her death, the Infirmary was to pay a perpetual and annual rent of ten *solidos* to the hospital of Saint John.\(^5^6\)

Similar occurrences continued on 10 June 1266, when Gertrude Schalie recognized that the hospital of Saint John had sold to her certain holdings that were part of her inheritance.\(^5^7\) Later still, in July 1268, Gertrude renounced in favor of the hospital of Saint John its use of her various holdings.\(^5^8\) In January 1273, Gertrude Schalie again reappeared. This time, however, several others were mentioned in the act. Gertrude renounced to the mistress of the hospital of Saint John, Elisabeth, to the profit of the hospital of Saint John the use and all the rights associated with a house and its *fonds*, which were enclosed in the property of the hospital. Guillaume *de Huffle* and his wife Catherine, Jean Wert\(^5^9\) and his wife Élisabeth, Michel Schalie and her sister Marguerite, all equally renounced their rights on the same holdings.\(^6^0\)

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\(^{5^6}\) “Noverint universi quod Elyzabet, filia Ingelberti, fratris domini Everwini, dicti Vulpis, militis, renuntiendo contulit magistre infirmarie beghinarum de Vinea, ad opus ejusdem infirmarie tria bonaria terre, prout jacent apud Diedenghem, pro alodio, promittendo ei inde rectam warandiam. Recipients haec interim tenenda annuatim ad vitam ejusdem Elyzabet pro uno denario. Ita tamen quod predicta infirmaria dabit annuatim hereditarie ac perpetuo, postquam ipsa Elyzabet obierit, hospitali sancti Johannis in Bruxella decem solidos et albis domicellabus juxta portam beate Katherine manentibus similiter quinque solidos de terra antedicta...” Cartulaire de l’Hôpital Saint-Jean, SJ 183, p. 237. The original is lost.

\(^{5^7}\) “…Noveritis quod Gertrudis, quondam Godefridi, coram nobis constituta, recognovit hospitale beati Johannis in Bruxella erga ipsam emisse de bonis, que cesserunt eidem Gertrudis in portionem sua...” Cartulaire de l’Hôpital Saint-Jean, SJ 124, p. 167. CPAS, SJ 44, fol. 5.


\(^{5^9}\) Henri Wert also served as a witness to this charter.

\(^{6^0}\) “Notum sit universis presens scriptum inspecturis quod domicella Gertrudis, dicta Scaellinne, resignavit cum debita renuntiatione sorori Elyzabeth magistre hospitalis beati Johannis in Bruxella, ad opus ipsius hospitalis usumfructum suum et omne jus suum quod habuit in domo et domistadio in quibus mansit, sitis
Gertrude continued to be one of the most dedicated donors of Saint John’s hospital. On 18 September 1285 she transported pro allodio and in the profit of the sick at the hospital of Saint John one-third of medietate terre located on Marché-au-Bétail in Brussels, as well as her rights on a parcel of land located in Ruysbroeck in Brussels. In return for the transfer, Gertrude received the perpetual use of the holdings and a payment of a census of one denario.61 The last mention of Gertrude came on 6 April 1299 when she transported, pro allodio, to the hospital of Saint John her rights and usage on a jornali of land located in Brussels near the Marché-au-Bétail.62

The donations continued into the latter half of the century, when on 24 October 1270 Ode, widow of Arnoul of Bruke, bequeathed to the hospital of Saint John a rent of five solidos Bruxellenses. The rent was to be paid by the table of Saint-Esprit of Tervueren from the funds collected from a house located next to a cemetery of

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61 “Noverint universi quod Gertrudis, dicta Scalinne, renuntiando contuli t fratri Waltero de hospitali sancti Johannis ad opus dicti hospitalis omni juri quod habuerunt et sibi competitit in predictis domo et domistadiis, promittentes inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 156, p. 200. The original is lost.

62 “Notum sit universis quod Gertrudis dicta Scailinne contulit cum debita resignacione fratri Godescalco, magistro hospitalis sancti Johannis in Bruxella, ad opus dicti hospitalis omne jus suum quod habuit in jornali terre jacents prope Forum Pecorum, adretro Willelmum dictum Lose, pro allodio, promittendo ei ad opus dicti hospitalis rectam warandiam. Item dicta Gertrudis resignavit dicto fratri Godescalco, ad opus dicti hospitalis, omnem usumfructum quem habuit in dicto jornali terre, promitens se nunquam, ulla interveniente occasione, fide et juramento prestitis, calumpniaturam usumfructum antedictum...” Cartulaire de l’Hôpital Saint-Jean, SJ 259, pps. 313-314. The original is lost.
Similarly, on 29 December 1270, Catherine, the widow of Gautier Vorloep and daughter of Gérard Rufus of Biest, renounced to the profit of Saint John’s hospital a bonnier and half of arable land located at Erps, which she held in census to Henri Lopere. This donation had previous ties to other gifts. Catherine was related to the Rufus family, who had appeared in grants to the hospital by Lionnet I. In the donations, Jean Rufus was a witness and was identified as a opidanus Bruxellensis, a townsman of Brussels. The Rufus family thus became supporters of the hospital of Saint John, perhaps because of their ties to Lionnet I.

Other connections to previous hospital representatives included that of Basilie, daughter of the late Gérard Wert, who appeared twice in the hospital documents. Basilie’s father, Gérard Wert, was both an alderman of Brussels, a position which he had assumed since 1263, and a provisor to the hospital of Saint John. He may have influenced her to donate to the institution. The first of her grants came in January 1272 when she transported, pro allodio, for the profit of the sick at Saint John’s hospital, a

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63 “Notum sit universis ad quos presentes littere pervenerint quod Oda, relicta Arnoldi de Burke, in presentia scabinorum de Fura, ob remedium anime mariti sui ac sue, contulit hospitali beati Johannis quinque solidos Bruxellenses, post obitum ipsius O. de manisone quondam Stephani dicti Brukins sita juxta atrium de Fura annuatim in Nativitate Domini persolvendos a procuratoribus mense Sancti Spiritus de Fura...” Cartulaire de l’Hôpital Saint-Jean, SJ 143, p. 186. The original is lost.

64 “Notum sit universis presentes litteras inspecturis quod Katherina, vidua longe relicta Walteri Vorloep, filia etiam Gerardi, dicti Rufi, de Bist, constituta in presentia domini fundi ac mansionarium, scabinis etiam de Lovanio astantibus et videntibus, superportavit et effestucando resignavit bonnarium et dimidium terre arabis, paulo plus vel minus, que ipsa tenebat de Henrico, dicto Lopere, de Bist, sub uno denario census annui, prout ipse Henricus personaliter fatebatur. [...] De hac quoque terra, sicut hic est predestincta, eadem vidua promisit eadem fratri Gerardo ad opus predicti hospitalis veram ac debitam prestare varandiam, constituentes inde fidejussores superdictum Gerardum Rufum, patrem suum, ac Everardum, dictum Blancard, avunculum suum, absque divisione...” Cartulaire de l’Hôpital Saint-Jean, SJ 144, p. 187. CPAS, SJ 37, fol. 26.

65 For more on these donations, see Cartulaire de l’Hôpital Saint-Jean, SJ 52, p. 79. CPAS, SJ 38, fol. 30. And Cartulaire de l’Hôpital Saint-Jean, SJ 89, p. 127. The original is lost.
bonnier of land located between Anderlecht and Veweiden and toward Boenstomle. In March 1272 Basilie also gave to the hospital of Saint John property of three jornalia et dimidium of land located at Anderlecht above a pond, Veeweide. The agreement, however, stipulated that upon her death, her heir would have the power to repurchase the land for twenty libris Bruxellensium. Mentioned in the agreement was Henri Wert, also a provisor of the hospital of Saint John and probably a relation of Basilie’s, as well as Jean Wert, who served as a witness. In their combined efforts, the family certainly acted in solidarity.

Ide, the dame of Dongelberg, also participated in donations to the hospital of Saint John. Her grants, however, were directly linked to Brother Gautier, who also served as a provisor to the hospital and to Gautier of Bodeghem, a mid-level knight who made significant contributions to the hospital of Saint John. On 25 March 1277 Gautier of Bodeghem, a knight, sold to Brother Gautier of the hospital of Saint John a dîme for noningenta libris that Gautier de Bodeghem held at Bodeghem of Ide, the dame of Dongelberg. Later, on 10 June 1277, Ide gave consent to Gautier of Bodeghem to give...
in census to the hospital of Saint John the dîme that he held by her in fief at Bodeghem and at Grand-Bigard. In return, the hospital was to pay Gautier of Bodeghem an annual census of three saus de louvignoise petite mounoie de cens, which Gautier and his heirs would hold in fief to Ide.\textsuperscript{69} The charter was written in old French, probably an indication that Ide herself wrote the charter and that she was personally involved in the transaction.

After Ide’s gift, it was, however, sometime before another donation appeared from a woman acting on her own. The trend in female donations reemerged in May 1286, when Catherine, the daughter of Siger of Saint-Géry,\textsuperscript{70} transported pro allodio her rights on three fonds of house located in Brussels near Saint-Nicolas church. She also transported four jornalibus and half of a meadow located in Pedebroek. Both donations went to the hospital of Saint John.\textsuperscript{71} In addition, Marie, the daughter of Francon Rolibus,
transported *pro allodio* six *jornalia* of land located between Bovenberg and Auderghem.73

Several donations by a single woman followed soon after. All of the donations, however, varied from the standard gift. On 18 February 1289, Marguerite *de Witbroech* made it known in a quitclaim deed that she had received from the hospital of Saint John seven *libras* from a *fonds* of a house located in Pede that she held.74 Although the charter did not indicate that Marguerite provided a donation to the hospital, the nature of the document suggests that at one time she did. Otherwise, the need to show that she provided the money would be unnecessary. Furthermore, on 11 July 1289, Alix *de Helbeke* transported to the hospital of Saint John her allodial rights on a home on a *fonds* to the hospital, which was located in Brussels in the quarter of Terarken. In the agreement, Alix also revoked her previous testimony made on the subject.75 The contents of that testimony, however, are not known. Finally, the donations continued when on 24

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73 “Noverint universi quod Maria, filia quondam Franconis dicti Rolibuchs, cum debita renuntiatione contulit fratri Waltero de hospitali sancti Johannis in Bruxella ad opus dicti hospitalis sex *jornalia* terre ad mensuram, jacentia in duobus peciis inter Bovenberga et Ouderghem, pro *allodio*, promittendo ei inde rectam *warandiam*...” *Cartulaire de l’Hôpital Saint-Jean*, SJ 204, p. 257. The original is lost.

74 “Nos, Johannes de Platea et Henricus, dictus Heinkaert, scabini Bruxellenses, notum facimus universis presentes litteras visuris et audituris quod, coram nobis propter hoc personaliter constituta, Margareta, dicta de Witbroech, quitas clamavit et dimisit septem *libras*, quas habuit ad domistadium situm apud Peda prope pontem de Bist, et recognovit quod frater Fredericus, magister ac provisor hospitalis sancti Johannis in Bruxella, ex parte dicti hospitalis bene et legitime solvisset ei septem *libras* antedictas...” *Cartulaire de l’Hôpital Saint-Jean*, SJ 209, p. 262. The original is lost.

75 “Noverint universi quod Aleidis, dicta de Helbeke, cum debita renunciation contulit fratri Waltero ad opus hospitalis sancti Johannis in Bruxella domum situm versus Archam retro domum Johannis de Paris super domistadium dicti hospitalis cum suis pertinenciis, pro *allodio*, promittendo ei inde ad opus dicti hospitalis rectam *warandiam*, dicta Aleidis revocans testamentum quod constituit et condidit super domo antedicta...” *Cartulaire de l’Hôpital Saint-Jean*, SJ 210, p. 263. CPAS, SJ 33, fol. 69.
July 1289 Marie Dribodinne ceded to Arnoul van den Steen all her alodial rights on a house and its fonds located in Brussel on Coudenberg. While Marie was certainly acting on her own, other elements pertaining to women appear in the document. Specifically, in locating the property of Marie, the author describes the place as near the house of Elisabeth, the widow of Willelmi de Wilre (mansionem Elisabeth, relicte Willelmi de Wilre).

In 1293 there was a return to donations by middling or even upper-class nobles, and during the last years of the thirteenth century, donations by women acting alone increased considerably. On 12 April 1293 the maiden, Anskine, daughter of Sir Étienne of Helbeke, gave Sir Lionnet of Aa a money payment of an annual census for holdings that she held in fief. Anskine gave the money to Lionnet to invest in the hospital of Saint John. Later, on 29 March 1294 Hedwige, the daughter of Arnoul van den Steen, transported to the hospital of Saint John half of a house and its fonds. In return, she maintained the usage of the home and the lands for the duration of her life in exchange

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76 Arnoul does appear in an earlier document of the hospital’s collection, but it is only to locate property that was being transferred to the hospital. Arnoul’s home was nearby: “cum domibus et fondis prope Arnoldum de Lapide,” or Arnoul van den Steen. See Cartulaire de l’Hôpital Saint-Jean, SJ 200, p. 253. The original is lost.

77 “Noverint universi quod Maria, dicta Dribodinne, cum debita renuntiatione contulit Arnoldo de Lapide omne jus suum quod habebat in domo et domistadio sitis supra Frigidum Montem prope mansionem Elisabeth, relicte Willelmi de Wilre, pro allodio, promittens ei inde rectam guarandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 212, p. 265. The original is lost.

78 “Dat si cont allen den ghenen die dese lettren selen sien ochte horen lessen dat joncvoewe Anskina, ser Stevens dochter was van Helbeke, quam tote vore min her Lonijse van Aa ende vore sine manner ende sine scepene ende droegh op in mins ser Lonijis hande vif bonare lans ende en half bonre hofstade, lettel goet meer ochte min, alsoe als ghelegen sin tuschen Linkenbeke ende Rode, ende een bonre beemps, lettel meer ochte min, alsoe als ‘t ghelegen es achter Jans clerces wonninghe van Anderlecht. Ende dit goet his se te leene van min here van Aa ende sie warpt ende vertheegh al dijs recht dat se hadde in die vif bonre lands ende in die hofstat ende in dat bonre bemp s bi maninghen mins ser Lonijis van Aa ende wijsdoem sire manne’s goedhus boef van Sente Jans gasthuse in Brussele. Ende alsje dit ghescijt was, soe droegh op min her Lonijis van Aa, di hir voreghenoemt es, div if bonre lans metter hofstat ended at bonre bemp, die hir voreghenoemt sien, ende erfde darinne bruder Woutren van Sente Jans gasthuse in Brussele, emmer bonre op vire penninghe chens…” Cartulaire de l’Hôpital Saint-Jean, SJ 229, p. 281. CPAS, SJ 41, fol. 2.
for a money payment of an annual census of one *denario Bruxellense*. Upon her death, however, the properties were to be given over to the hospital of Saint John.  

Less than one year later on 1 February 1295, Marguerite Proefinne renounced in favor of the children of Guillaume of Braine (*Margreta, Amelricus, Jacobus, Nicholaus, et Beatrix*) the usage of a body of water that she held on two *bonaria* of land located at Neerpede. Soon after, though, Marguerite and the children of Guillaume ceded the lands *pro allodio* to Henri of Braine.  

Similarly, Alix, the widow of Gilles *Brassator*, renounced to the profit of Jean Kemmere all of her rights on a *fonds* of a house located outside of the port of Coudenberg in Brussels that she held in census, and on 6 August 1297 Clémence, widow of Jean of Coudenbergh, who was called Oudegot, ceded to the hospital of Saint John one *jornale* of arable land located between Ransfort and Anderlecht in exchange for a money payment of a census of one *denario*. She promised to pay either the hospital or the hospital porter ten *libras*. If, however, her children

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80 “*Notum sit universis quod Margreta, dicta Proefinne, resignavit libera Willemi de Braniga, scilicet Amelrico, Jacobo, Nicholaau, et Beatrici, ommem usufructum quem ab eis penes duo bonaria terre parum plus vel minus tenebat, prout hec sita sunt prope Nepe, promittens fide media dictum usufructum nonquam se calumpniaturum. Que facta, dicta Margretha, Amelricus, Jacobus, Nicholaus, et Beatrice predicti contulerunt cum debita renunciation decta duo bonaria parum plus vel minus, prout sita sunt prope Nepe, Henrico dicto de Braniga, pro allodio, promittentes ei inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 237, p. 290. The original is lost.  

81 “*Notum sit universis quod Aleydis, relicta Egidii Brassatoris, resignavit omnem hereditatem et jus, quam et quod habebat in quodam domistadio sito foris portam Frigidi Montis prope Willemi Harseel...”* Cartulaire de l’Hôpital Saint-Jean, SJ 238, p. 291. The original is lost.
invested the hospital of the *jornale* previously mentioned, then she would be exempted from the payment of ten *libras*.  

Two years passed before another donation was made by a woman acting on her own. On 16 February 1299 Marguerite, the widow of Jean Grawe, renounced in favor of the hospital of Saint John the usage that she had on a house and its *fonds*. The land was located at Neer-Beersel near a pond or lake (*aque*) and a *curiam* of Jean van den Steen. The last issuance by a woman came on 24 January 1300. Marguerite, daughter of Guillaume Munters, transported to Jean of Linthout a *fonds* of a house located in Brussels next outside of *Herbes-Potagères*. The payment for the transfer was four *libris*, twelve *solidis*, and five *denariis* of *monete usualis et communiter in bursa currentis*. Several conditions surrounded the agreement.

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82 “*Noverint universi quod Clemencia, relicta Johannis de Frigido Monte, dicti Oudegot, contulit fratri Waltero, nomine hospitalis sancti Johannis in Bruxella et ad opus ejusdem hospitalis, quamdiu ipsa Clemencia vixerit, jornale terre arabilis, jacentis inter Rantsvort et Anderlech, parum plus vel minus, pro denario annui census, annuatim ad Natale Domini ipsi Clemencie persolvendo, promittendo ei warandiam. Hunc autem censum repromisit frater Walerus ex parte predicti hospitalis dare annuatim eidem Clemencie, quamdiu vixerit, simper ad Natale Domini. Item promisit dare predicta Clemencia predicto fratri Waltero ad opus dicti hospitalis vel latori presentium ad suam monitionem decem libras monete communiter in bursa currentis et proinde obligavit ei ad opus dicti hospitalis vel latori presentium quinque jornalia terre arabilis, parum plus vel minus, jacentis prope Elsele. In modum videlicet qui sequitur: quod quandocumque liberi predicte Clemencie fratrem Walterum ad opus dicti hospitalis in jornali terre predicto per juris ordinem investierint et imposuerint, ita quod ei ad opus dicti hospitalis fuerit satis firmum, tunc predicta quinque jornalia terre ad ipsam Clemenciam libere revertentur et erit a solution predictarum decem librarum penitus absoluta…”” Cartulaire de l’Hôpital Saint-Jean, SJ 246, p. 298.

83 “*Notum sit universis quod Margareta, relicta quondam Johannis, dicti Grawe, resignavit fratri Waltero, ad opus hospitalis sancti Johannis in Bruxella, onem usufructum, quem habebat penes domum et domistadium, quo stat dict domus apud Nederbersele, et penes quondam petiam aque jacentis ante curiam Johannis de Lapide, promittens, fide et juramento prestitis, se nunquam calumpniaturam ulla interveniente causa seu occasione dictum usufructum…*” Cartulaire de l’Hôpital Saint-Jean, SJ 256, p. 311. The original is lost.

84 “*Notum sit universis quod Margareta, filia quondam Willelmi Monetarii, contulit Johanni dicto de Linhout domistadium situm extra Waermoesporte just Johannem dictum Platoy, hereditarie et perpetuo possidendum pro quatuor libris, duodecim solidis et quinque denariis monete usualis et communiter in bursa currentis annui census, annuatim ad Natale Domini solvendis, quem censum predictus Johannes dare repromisit predicte Margarete annuatim ad terminum antedictum et primum censum ad Natale
Throughout the thirteenth century, laywomen appeared in the charters of the hospital of Saint John in various capacities. Sometimes they acted alone in charitable donation to the institution, and sometimes they acted along with a husband, brother, sister, father, grandfather, or even guardian. At times, women themselves were not participants in charitable donation, but they were still present in the charter, such as those times in which gifts were made in honor of a particular women or at times when conditions stipulated the actions and/or consent of a woman. While many of these women acted completely on their own in the decision to provide charity to the hospital of Saint John, several of them were guided by the actions of previous family members, who had served as aldermen and provisors to the hospital, and several women followed in the footsteps of previous family members, acting with solidarity in their donations.

Regardless of the nature of the donation or the other people involved, it was clear that the thirteenth century brought considerable change to the abilities of women. Whereas before, only women of noble status would have had the means to make gifts to charitable institutions, the rise of towns and cities, the new classes associated with trade and crafts, and newly freed cash allowed women more social mobility and more monetary freedom. Inspired by the lay movement, many women used their new abilities and income to better the hospital of Saint John. They were not, however, the final group to be involved with the hospital. One group, the town craftsmen, has yet to be explored.

The Townspeople and Their Professions

85 The professions are grouped according to categories.
In a previous chapter it was shown that the birth of the city had a remarkable impact on the rise of various social classes, including the *châtelain*, from the old castellan class, the *burgenses*, created from the privileged families of the newly formed cities, and even women. In the discussion of these people, other professions and classes arose, including merchants and craftsmen. While it proves more difficult to trace the lives and professions of the many bakers, farmers, butchers, blacksmiths, cobblers, cloth makers, and others in the documentation than it does the lives of the noble classes, the townspeople were nevertheless present.

In order to locate the townspeople and tradesmen of the city of Brussels in their proper context, it is necessary to return to the cartulary of the hospital of Saint John. While the cartulary is well-constructed and easily-accessible, the material added to the cartulary, such as charts and indices, is lacking in some ways, especially in its identification of people in the charters. Since Bonenfant, probably limited in space, chose only to identify in his introduction the people who authored the documents, several people were left out and not even mentioned. Included in this group were the local townspeople. While many from this group of people served as witnesses to the charters, several of them also made significant donations to the hospital of Saint John, which allowed the hospital to expand and grow throughout the thirteenth century.

Some of the donations from the townspeople came early in the hospital’s history, but a large majority of the gifts occurred after the hospital’s autonomous phase. Given this trend, the donations by tradesmen and townspeople fit into an overall pattern of increased lay involvement after 1248. Although they only appear in 3.95% of the
documents, tradesmen were an important class to the hospital of Saint John. By examining the charters with an eye to the townspeople, one gets a better sense of who exactly was involved with the hospital, which moves our understanding of the institution and the city beyond the local nobility and clergy. In addition, from this examination one can also get a glimpse of town life in the twelfth and thirteenth centuries. From blacksmiths to farmers, bakers to fisherman, nearly every expected occupation of the medieval town was present in the charters of Saint John, making the hospital’s records invaluable to the study of medieval town life.

One of the only mentions of a “townsman” came rather early in the history of the hospital. Lionnet I, the châtelain of Brussels, his son Lionnet II, and his granddaughter Mathilde sometime between 20-30 April 1253 or between 1-11 April 1254 all gave to the hospital of Saint John. The donation, as mentioned previously, included eight bonniers of arable land located at Molenbeek-Saint-Jean.86 While several witnesses were identified in the charter and while several of the witnesses have been discussed previously, one witness remains to be named: Johannes Rufus, or Jean Roede. Jean was noted as an opidanus Bruxellensis, or a townsman of Brussels. This was the only mention of a specific townsman in the charters. It was, however, significant. As seen before, those with ties to Lionnet I were often influenced to donate to the hospital of Saint John. While we have no documents suggesting that Jean provided charity to the institution, we might assume that the influence was still there. After all, despite the early

86 See above for the details of this charter. Cartulaire de l’Hôpital Saint-Jean, SJ 89, p. 127. The original is lost.
year of the donation, several townspeople and tradesmen went on to provide for the hospital of Saint John.

The first, and perhaps most numerous of the craftsmen, were the blacksmiths. Only a few blacksmiths appeared in the documents, and they all surfaced toward the latter half of the thirteenth century. Mentioned fairly early in the documents was Gautier Couhaar, who appeared by the names of Coenhaer, Faber, and Zmeet. Gautier was a blacksmith and supporter of Lionnet I, the châtelain of Brussels. In February 1242 Gautier appeared among a list of witnesses when Lionnet I sold to Gregory a fonds from a house located in Brussels that Gregory held in census to Lionnet I. For the sale, Gregory and his family were to pay an annual census of duos denarios Bruxellensis.

Several years later, Gautier and his wife, Ode, appeared again in the documents when on 19 August 1250 the couple assigned a rent of quadraginta libras Bruxellensium on their house and their holdings to the hospital of Saint John. Moreover, the two made it known that they would grant all of their holdings to the hospital upon their deaths. This time, however, the blacksmith and his wife made a donation to the hospital.

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87 “Universis tam presentibus quam futuris presentes litteras visuris, L.e., castellanus Bruxellensis, cognoscere veritatem. Noverit universitas vestra quod nos domistadium nostrum situm in Bruxella inter portam de Capella et Rusche broec, quod Sisarius et Gregorius, filius ejusdem, a nobis tenebant ad censum annualem, vendidimus ante dicto G., sub hac forma libere possidendum quod sepe dictus G. et sui heredes nobis persolvent singulis annis duo denarios Bruxellensis monete in recognitionem hereditatis eorumdem...” Cartulaire de l’Hôpital Saint-Jean, SJ 58, p. 86. CPAS, SJ 32, fol. 27.
88 Cartulaire de l’Hôpital Saint-Jean, SJ 58, p. 86. CPAS, SJ 32, fol. 27. The house was located between the port of Chapelle, called Steenporte, and Ruysbroeck.
89 “Notum sit universis presens scriptum inspecturis quod Walterus faber, dictus Couhaar, et uxor ejus Oda contulerunt et assignaverunt magistre et conventui hospitalis beati Johannis in Bruxella super domum suam et domistadium cui eadem domus superedificata est quadraginta libras Bruxellensium in elemosinam. [...] Insuper contulerunt prenominati Walterus et ejus uxor omnia bona sua post mortem suam dicto hospitali possidenda libere et habenda...” The document was completed in the presence of and with the consent of Hugo Moor and Lionnet I. Cartulaire de l’Hôpital Saint-Jean, SJ 82, pp. 119-120. CPAS, SJ 29, fol. 3.
themselves, suggesting that Lionnet I’s support for the hospital of Saint John may have had some influence on the pair. Although influenced by Lionnet I, the pair broke away from the hierarchy to donate to the hospital on their own. What proves interesting is that a blacksmith of middling status was able to make such a donation to the hospital, suggesting that changes had come to both the urban landscape as well as the characteristics of charitable donations.

A much later mention of a blacksmith came in October 1279 when Ide Scattinne, a beguine, transported pro alldio one-sixteenth of a bonnier of a meadow to the hospital of Saint John. The lands were located in Marais in Brussels. Mentioned in the charter was Gosewinum, fabrum, or Gosuin, a blacksmith. Gosuin was referenced in part to the location of the land in which Ide was transporting to the hospital: it was located in Pallude behind those lands formally held by Gosuin. Even though Gosuin had nothing to do with the transfer, and although he certainly was not providing charity to the hospital, the mention of the blacksmith helps one to understand the social make up of Brussels at this time. It also suggests that this blacksmith had considerable means that allowed him to purchase and hold lands.

Similar to the blacksmiths, millers appeared in the documents. The first mention came in July 1247 when the aldermen of Merchtem attested that Siger Penant and Godfrey, the son of Siger’s brother Arnoul, had given satisfaction to the hospital of Saint John in regards to holdings that Siger had sold to the hospital. Included in the holdings...

91 Cartulaire de l’Hôpital Saint-Jean, SJ 187, p. 240. The original is lost.
was the construction of a house that Siger had built on a meadow, which was located next to the hospital. In addition, Siger agreed to the sale of an access road. The charter was presented in the general consensus of Hobosch, a knight of Merchtem, and Arnoldi, a local miller (molendinarii). Unlike the earlier donation of the blacksmith Gautier, the miller Arnoldi served as a legal representative, suggesting that by 1247 local tradesmen had gained social and legal representation.

Beyond the blacksmiths and the millers, most of the trades named in the documents associated with the hospital of Saint John appeared a single time. While a solo mention does not prove to be overwhelming evidence of the association of craftsmen with the hospital, the broad mention of trades does say something about the social and craft makeup of the town of Brussels. In addition to the blacksmith and millers several other professions were indicated in the documents. These professions included cobblers, butchers, candle makers, cloth makers, weavers, measurers, bakers, brewers, and dyers. The wide-range of participants, although small in number, demonstrates the importance of the hospital to all classes and groups in this burgeoning town.

We must first turn to two earlier-mentioned agreements, which also yield information in regards to local craftsmen. Sometime between 1 and 23 June 1263 Henri de Bigard of Capelle-Saint-Ulric, transported in census to the hospital of Saint John seven bonniers of land held by him in fief to Jean de Bigard. The lands were located near Capelle-Saint-Ulric. In return, the hospital remitted a money payment to Henri of an

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92 “...Insuper sciat universitas vestra quod si sepe dictum Sygerum in prato suo, quod terre memorate domus conjunctum est, edificare contigerit et manere, viam, quam erga eandem domum emere tenebitur, habebit, dictam domum indemnem conservando ex utraque parte ejusdem vie...” Cartulaire de l’Hôpital Saint-Jean, SJ 70, p. 101. The original is lost.
annual rent of eight *livres* and seven *deniers.* \(^94\) Present and concerned with the exchange (*interfuerunt*) were several supporters of the hospital: *Geldulphus, dictus Taye,* *Amelricus, dictus Magister,* and *Henricus, dictus de Brania.* \(^95\) Henri de Braine, specifically, was described as a cobbler.

Henri de Bigard appeared again later that year, when between 2 and 23 December 1263 Henri made a transfer to the hospital of Saint John. The transfer included eleven *journaux* of land located next to Capelle-Saint-Ulric, also held by Henri in *fief* to Jean de Bigard. The hospital contracted to remit payment to Henri of a perpetual rent. \(^96\) The men present and concerned with the exchange again included Henri de Braine, as well as *Andreas, carnifex,* and *Henricus, dictus Coman.* \(^97\) Henri de Braine was identified as a “*factor caligarum,*” \(^98\) or a cobbler, \(^99\) and *Andreas* as a “*carnifex.*” While *carnifex* can be translated as either “hangman” or “butcher,” *Andreas* was probably a butcher. Finally,

\(^94\) “*Notum sit universis presens scriptum inspecturis quod, cum Henricus de Bigardis, dictus de Capella, teneret a Johanne de Bigardis septem bonaria terre in feodum in parrochia de Capella Sancti Ulrici, inter ipsum capellam et domum Rasonis, dicti Beire, juxta stratam dictam herstrate jacentia, idem Henricus, de permissione et plenaria voluntate ac consensu dicti Johannis, tamquam domini huic facto astantis, contulit et concessit eandem terram hospitali beati Johannis Baptiste in Bruxella hereditarie possidendam et tenendum sub annuo censu septem denariorum Bruxellensium ipsi Henrico et ejus successoribus a dicto hospitali in perpetuum in Nativitate Domini solvendorum...*” *Cartulaire de l’Hôpital Saint-Jean,* SJ 113, p. 155. The original is lost.

\(^95\) *Cartulaire de l’Hôpital Saint-Jean,* SJ 113, p. 156. The entire group appears in *Cartulaire de l’Hôpital Saint-Jean,* SJ 113, p. 155.

\(^96\) “*Notum sit universis presens scriptum inspecturis quod cum Henricus de Bigardis, dictus de Capella, teneret a Johanne de Bigardis undecim journaia terre, parum plus vel minus, in feodum, in parrochia de Capella Sancti Ulrici prope stratam dictam herstrate jacentia, idem Henricus, de permissione et plenaria voluntate ac consensu dicti Johannis, tamquam domini huic facto astantis, contulit et concessit eandem terram hospitali beati Johannis Baptiste in Bruxella hereditarie possidendam et tenendum sub annuo censu trium denariorum Bruxellensium, ipsi Henrico et ejus successoribus a dicto hospitali in perpetuum in Nativitate Domini solvendorum...*” *Cartulaire de l’Hôpital Saint-Jean,* SJ 116, p. 159. CPAS, SJ 36, fol. 50.

\(^97\) *Cartulaire de l’Hôpital Saint-Jean,* SJ 116, p. 159. CPAS, SJ 36, fol. 50.

\(^98\) The word *caligarum* as used in the charter is specifically identified with “boot,” but it was translated by Paul Bonenfant to mean cobbler. See *Cartulaire de l’Hôpital Saint-Jean,* p. 356.

\(^99\) For another cobbler by the name of Gérard, see below and *Cartulaire de l’Hôpital Saint-Jean,* SJ 112, p. 154. CPAS, SJ 44, fol. 4.
another *Henricus* was identified as a “*candelarum factor,*” or a candle maker.\(^{100}\) The men served important roles as witnesses to the transfer, but they also were supporters of the hospital and local tradesmen. Similar to other trends identified earlier, the merging of tradesmen with hospital representatives proves that the abilities once limited to only nobles were expanding to include the local townspeople.

Similar transfers to those of the cobbler and butcher soon followed. In November 1268, the hospital of Saint John acquired from Jean van den Berg, the son of Gérard, *unum bonarium terre* located at Goyck.\(^{101}\) The hospital agreed to pay Jean an annual census *uno modio siliginis de meliori* for the sale of cloth. While the document does not name anyone or any profession by name, the sale of cloth for the hospital suggests that cloth venders would have been present either in or near the hospital. In addition, in June 1278, Hugues de Bierghes assigned *triginta libras Lovanienses* to come from a *bonnier* of land located at Saintes. The money made off the land was to go to Saint John’s in charity.\(^{102}\) Present at the grant were several people, including *Clemens, textor,* or a weaver, and *Johannes, mensurator, de Offenbais,* or a measurer.\(^{103}\) Similar to the cobbler and the butcher, Clément and Jean acted in legal roles.

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\(^{100}\) Cartulaire de l’*Hôpital Saint-Jean*, SJ 116, p. 159. CPAS, SJ 36, fol. 50.

\(^{101}\) “*Universis presens scriptum inspecturis, scabini de Goyke, salutem. Noveritis quod hospitale beati Johannis Baptiste in Bruxella acquisivit per legem et judicium erga Johannem de Monte, filium Gerardi, unum bonarium terre sit in parrochia de Goyke, cujus dimidium bonarium jacet inter Rusbruch et Macharium de Goyke et aliud dimidium in loco qui dicitur Ter Scept, supra culturam juxta Widengat. Dictum autem bonarium terre contulit et concessit dictum hospitale dicto Johanni hereditarie possidendum et tenendum annuatim pro uno modio siliginis de meliori, juxta denarium in sextario, dicto hospitali in festo sancti Bavonis deliberando, ad pannum lineum ipsius hospitalis pertinentem...*” Cartulaire de l’*Hôpital Saint-Jean*, SJ 137, p. 181. The original is lost.

\(^{102}\) Cartulaire de l’*Hôpital Saint-Jean*, SJ 184, p. 238. The original is lost.

\(^{103}\) Ibid.
Finally, less than a year later Eustaicious de Rus, a baker (pistor), settled an agreement regarding the division of his holdings among his children. Included in the agreement was an assurance for a payment of a census of two sous to go to the hospital of Saint John. Unlike some of the previous craftsmen, Eustaicious donated a gift to the hospital of Saint John rather than serve as a witness or a participant in the act.

After the 1279 settlement by Eustaicious a break occurred in the documents—there was no mention of craftsmen for nearly twenty years. Finally, tradesmen resurfaced again in the last few years of the thirteenth century. In December 1296, Henri, the son of the late Gossuin of Anderlecht, ceded pro allodio to Francon, the son of the late Gérard, a brewery with its utensils located at Cureghem. While it is not exactly clear why such a transfer was included in the records of the hospital and while the transfer had nothing to do with donations to the hospital of Saint John, the document does suggest that yet another group, brewers, was present in the town.

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104 “Noverint universi quod Eustacius, pistor, de Rus talem fecit divisionem inter liberos suos, de consensus et voluntate eorumdem, scilicet quod Ida, filia sua, habebit parvam domum suam sitam in Rus et domistadium quo sita est ipsa domus ab ante usque retro ad fossam, prout pertinent ad domum eandem, et habebit etiam eadem Ida viginti solidos Bruxellensium…” Et cetera. Cartulaire de l’Hôpital Saint-Jean, SJ 186, pps. 239-240. CPAS, SJ 32, fol. 99. In addition, Johannes de Platea et Henricus Portre, aldermen of Brussels, both served as witnesses. See chapter eight for more on these men.

105 This was the period in which Paul Evrard noted that the pope had little intervention in the hospital and that the lay members of the community took over the institution’s administration. While it is not clear why donations from townspeople came to a halt, it may be inferred that infighting, such as between the ‘good folk’ or ‘Golden Spurs’ (i.e. the ruling classes) and the ‘Blue-Nails,’ or the “discontented of all crafts” had come to a head, limiting the activity of the townspeople. See Lyon, Belgium, 16.

106 “Notum sit universis quod Henricus, filius quondam Gossuini de Anderlecht, renuntiando contulit Francioni, filio quondam Gerardi, domicilia sua sita apud Cureghem, cammann scilicet, alia ac omnia vasa ad ipsam cammann pertinentia, pro allodio, promotiens ei inde rectam warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 244, p. 296. The original is lost.

107 The document may have been included because of witnesses: Everwinus Campsor et Gerelmus Heincaert. Both were scabini of Brussels who served the hospital often. In addition, both men were provisors to the hospital, which alone might dictate the inclusion of the document. See chapter eight for more on these men.
In addition, sometime before 24 June 1298 the hospital of Saint John gave for a period of one hundred years (centum annorum continue subsequentium) to Baudouin, the presbytery of Herent and official foraneo of the bishop of Cambrai, a fonds of a house situated in Brussels next to the wall of the Bogards. In order to better explain the location of the fonds, the author indicated that the fonds was located in the very place of the lands held by Johannes, dictus de Tenerimonda, pelliparius. Jean was probably a furrier in town, and similar to Guillaume Clabot, indentified in a previous chapter, Jean’s property served as a landmark, signifying his power and position in the town.

Finally, as mentioned earlier in association with the beguines, on 21 July 1299 the beguine Marguerite of Uccle transported in profit for Élisabeth Wassard, the niece of Jean Papen, a dyer (tinctoris), a fonds of a house that she held in census of the duke, which was located next to the hospital of Saint John. Élisabeth ceded to the hospital the property of the house and gave the hospital the right to collect an annual annuity. Again, although Jean Papen was not part of the transfer, his identification as a dyer again points the variegated social structure of Brussels at this time.

108 “Notum sit universis quod magister, magistra, fratres et sorores hospitalis sancti Johannis in Bruxella, mediante consensu provisorum ejusdem hospitalis, contulerunt viro discreto domino Baldewino, presbytero, curato de Herent, officiali foraneo domini Cameracensis episcopi, domistadium situm juxta murum Begardorum, sicut ibidem tenuit Johannes, dictus de Tererimonda, pelliparius, prout ei est assignatum et deputatum tenendum et possidendum a festo sancti Petri ad Vincula proxime futuro ad terminum seu spaciunm centum annorum continue subsequentium, annuatim interim pro viginti solidis Bruxellensium denariorum monete usualis committer in bursa currentis, simper ad Natale Domini solvendis, promittendo et inde interim varandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 252, p. 306. The original is lost.


110 “Notum sit universis quod Margreta, begina, dicta de Ucle, resignavit in manus Johannis, dicti Biscop, ommem hereditatem et jus, quam et quod habetbat in domistadio, quo ipsa manet, juxta Sanctum Johannem in Bruxella, ad opus Elisabeth, relicte Johannis, dicti Papen, tinctoris, filie Everwini, dicti Wassards, promittens ei inde varandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 263, p. 318. The original is lost.
Ports and Rivers, Farms and Mills, Walls

While identification of the craftsmen associated with the hospital proves enlightening to our understanding of the social makeup of Brussels in the twelfth and thirteenth century, there are other means through which we can understand the development of the city socially, economically, and physically. Walking though modern Brussels, one forgets that the city was once a medieval town. Its paved streets, ports, mills, walls, and other structures, now mostly absent, provided the protection and means by which people lived their everyday lives. These structures were a hallmark of city life—they dictated and allowed for the function of trade and commerce.

Although there are not many appearances of ports, rivers, farms, mills, and walls in the documents of the hospital of Saint John, the few mentions of these physical landmarks in the town of Brussels helps one to better understand the climate into which Saint John’s hospital was emerging. In some ways, the growth of town walls, ports, mills, and farms coincided with the growth of the hospital. As the hospital enlarged its jurisdiction, so did the city of Brussels, which was visible most by its town structures and local economy. In addition, the appearance of rivers and ports throughout the document points to the importance of water access to the town. It was upon these rivers and through these ports that goods entered the towns. Even ideas, including those regarding

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111 I have limited the discussion to the places of production rather than the item produced itself. For example, I have only discussed mills and not the exchange of services or piety for wheat, since many of the transactions included certain amounts of grain, wheat, or rye. The only unusual notable item of exchange came in May 1264 when a pig or other items with its values were given to the hospital of Saint John by Guillaume of Ruysbroeck and his wife Béatrix: “Similiter tenemur eisdem Willelmo et ejus uxori, quamdiu ambo vel alter eorum vixerint, dare et deliberare singulis annis in Nativitate Domini porcum precii sui valoris duodecim solidorum Bruxellensium et in festo sancti Martini hyemalis duo sextaria albarum pisarum...” Cartulaire de l'Hôpital Saint-Jean, SJ 118, p. 161. CPAS, SJ 40, fol. 8.
the construction and sustainment of a hospital, flowed into Brussels throughout the thirteenth centuries.\footnote{See chapter five.} Thus, by examining the few physical structures mentioned in the documents, one gets a better sense for the growth of the town, industry and trade within the context of the hospital of Saint John.

Like most medieval towns, Brussels was situated on several rivers, which “offered great advantages. Rivers served both as a source of water and as sewers. In addition, river navigation was in much of Europe the cheapest, the easiest, and the safest form of transportation, and, furthermore, simply being on the banks of the river gave the town some protection on at least one side.”\footnote{Pounds, \textit{The Medieval City}, 35.} In these trends, the “case of the Netherlands is quite typical. In the tenth century the earlier towns were founded on the shore of the sea or on the banks of the Meuse and the Scheldt; the intermediate region, Brabant, did not yet know them.”\footnote{Pirenne, \textit{Medieval Cities}, 133.} The people of Brabant would have to wait until the twelfth century “before they [made] their appearance on the route which lay between those two great rivers”\footnote{Ibid.} and before came they to know the importance of rivers.

Although most of the mentions of ports, rivers, and water sources occurred in the mid- and later-thirteenth century, at least two references to bodies of water appeared in the documents before 1235. The first mention of a body of water came in July 1226 when Englebert II, lord of Enghien, Lionnet I of Brussels, and Arnoul II, lord of Wesemael, guaranteed a sale made by Gauthier, lord of Aa, to the hospital of Saint John.
The sale included lands that were located between *Martis fontem et curiam Bauchonis*.\(^{116}\)

The same spring was again mentioned in July 1227 when Gautier, the lord of Aa sold to the hospital of Saint John *XVI bonaria terre et dimidium*.\(^{117}\)

Shortly later in October 1227 Guillaume of Grimberghe, lord of Assche, and his wife, Isabeau, gave to the hospital of Saint John an annual rent of “*XX solidos Flandrensium*.” The rent came from profits levied on their census at Woluwe-Saint-Rombaut, which would have been near the river Woluwe.\(^{118}\)

While there were other key points to the agreement, the importance here is the identification of the river Woluwe.\(^{119}\)

Furthermore, this location is identified with Nederwoluwe, at which was located a mill.

In July of 1233, Gautier, the lord of Aa, and his brother Arnoul, gave to the hospital of Saint John *quinque bonaria terre allodii* and *quinque jornaria hereditatis* held in census at Anderlecht.\(^{120}\)

The lands were located near *Racesputte* and near the ducal

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\(^{116}\) “*I., dominus de Hedengem, L., castellanus in Bruxella, A., dominus de Wesemale, universis presens scriptum inspecturis, salutem in Domino. Noverint universi quod cum Walterus, dominus de A, XVI* bonaria terre et dimidium bonarium site inter Martis fontem et curiam bauchonis et juxta Pede, que cum Arnoldo, fratre suo, communia habebat et indivisa, ad ecclesiam Anderlechtensem spectantia, que sua et fratis sui Arnolde errant hereditas, religiose domui hospitali beati Johannis in Bruxella vendidit...*” Cartulaire de l’Hôpital Saint-Jean, SJ 27, p. 47. CPAS, SJ 34, fol. 15.

\(^{117}\) “*Universis presens scriptum inspecturis, ego, Walterus, dominus de Aa, salutem et omne bonum. Universitati vestre fieri notum volo quod ego vendidi XVI bonaria terre et dimidium, site inter Martii fontem et Pedam, religiose domui hospitalis beati Johannis in Bruxella, omni jure, quod ego et frater meus habuimus in dicta terra, legitime renuntiando...*” Cartulaire de l’Hôpital Saint-Jean, SJ 31, p. 54. The original is lost.

\(^{118}\) “*...Ego, Willelmus de Grintbergis, dominus de Ascha, et Elyzabet, uxor mea, universis presens scriptum visuris, salutem in Domino. Notum fieri notum volo quod ego vendidi XVI bonaria terre et dimidium, site inter Martii fontem et Pedam, religiose domui hospitalis beati Johannis in Bruxella XX solidos Flandrensium, annuatim de censu nostro in Wolue Sancti Rumoldi capiendos a procuratoribus dicte domus in festo sancti Remigii...*” Cartulaire de l’Hôpital Saint-Jean, SJ 33, p. 56. The original is lost.

\(^{119}\) There is some difficulty in locating Woluwe-Saint-Rombaut. After a lengthy discussion, Bonenfant comes to the conclusion that Woluwe-Saint-Rombaut might be located in the valley of the Woluwe River between Woluwe-Saint-Étienne and Saventhem. Cartulaire de l’Hôpital Saint-Jean, p. 56, fn 2.

\(^{120}\) “*Inde est quod nos universitati vestre notum fieri volumus quod nos in remissionem peccatorum nostrorum necnon et antecessorum nostrorum quinque bonaria terre allodii nostri site in parrochia de Anderlecht juxta Racesputte et juxta vivarium ducis et quinque jornaria hereditatis nostre site in predicta parrochia juxta Hillenshout et juxta Epe in elemosinam contulimus hospitali beati Johannis in Bruxella ad*
pond: “juxta Racesputte et juxta vivarium ducis.” Later, in 1234, Wiliarde, the widow of Jean Coude d’Obbrussel, ceded to the hospital of Saint John in charity “undecim solidos [Brux]ellensium,” which was received from a fonds of a house situated “in platea que dicitur Smalebeca.” The street name took its name from the Smaelbeek River, and later the street became the Marché-au-Fromage. In addition to being located on the modern street Marché-au-Fromage, the fonds was also located near the modern rue des Éperonniers.

Nearly thirty years passed before another river or body of water was named. The hospital of Saint John and Gertrude Schalie divided up in common accord the succession of Godfrey Onin, the father of Gertrude in June 1262. While the details of the charter have been illuminated upon in several previous sections, the importance of one man in the charter remains. Gérard, a cobbler, was mentioned in the document. Included in the description of the details Gérard’s holdings were noted as located near the port of Ruysbroek. Another river appeared in the documents in January of 1267. Henri Fortis of Erps made it known that the hospital of Saint John had acquired from him tria bonaria of a meadow, as well as a small meadow of the capacity of a jornale located at Erps. The

*opus pauperum eodem loco jacentium in perpetuum possidenda…* Cartulaire de l’Hôpital Saint-Jean, SJ 42, p. 67. CPAS, SJ 34.

121 Cartulaire de l’Hôpital Saint-Jean, SJ 42, p. 67. CPAS, SJ 34.

122 “…notum fieri volo quod ego [contuli] pauperibus hospitalis beati Johannis in Bruxella de consilio virorum proborum undecim solidos [Brux]ellensium annuatim solvendos in Nativitate Domini, medietatem ad refectionem infirmorum, altam medietatem ad luminaria hospitalis, de domistadio sito in platea que dicitur Smalebeca, inter domum lapideam Meinardi bone memorie et domum Henrici Lieveoghe…” Cartulaire de l’Hôpital Saint-Jean, SJ 47, p. 73. CPAS, SJ 33, fol. 47.

123 See Cartulaire de l’Hôpital Saint-Jean, p. 73, fn 2.


125 The phrase reads: “medietas domistadii siti ante portam de Ruschbroc, super quodmanet Gerardus, sotularius, pro allodio…” Cartulaire de l’Hôpital Saint-Jean, SJ 112, p. 154. CPAS, SJ 44, fol. 4. For more on the port of Ruysbroek, see above and Cartulaire de l’Hôpital Saint-Jean, SJ 58, p. 86. CPAS, SJ 32, fol. 27.
details about the location, however, suggest that the meadows were positioned beyond Surebeke River (“situm supra Surebeke”) near the boundary of the Egidii de Nat (“juxta pomerium”). Nat would be the name given to Erps, located near the Surebeke, at a later time. That same month and year, Henri Fortis promised to pay the hospital of Saint John fees on three bonariis of meadow land and for a small meadow of the capacity of a jornale located at Erps. The same location was mentioned again in the document concerning the Surebeke River: “parum plus vel minus, sito supra Surebeke juxta pomerium Egidii de Nat.”

Similarly, in March 1272, Basilie Wert gave to the hospital of Saint John and the poor in puram eleemosinam. This time, the property included tria jornalia et dimidium terre located in Anderlecht and held pro allodio. The lands were located above the pond of Veeweide. In May 1274 Jean, the son of Gerelm, Guillaume de Pille, and his mother Alix conferred to Siger Portere, a burgensis, a fonds from a house located in Brussels outside of the Port of Coudenberg, and later, on 30 November 1276, the abbot

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130 “…ad opus et usum debilium pauperum dicti hospitalis, tria jornalia et dimidium terre parum plus vel minus, sita in parrochia de Anderlecht supra vivarium de Veweiden, pro alldoio, in puram eleemosinam, cum debita renuntiatione subsecuta, promittens eis inde rectam warandiam...” Cartulaire de l’Hôpital Saint-Jean, SJ 152, pps. 196-197. CPAS, SJ 34, fol. 21.

131 Cartulaire de l’Hôpital Saint-Jean, SJ 152, p. 196. CPAS, SJ 34, fol. 21.

132 “Notum sit universis quod Johannes, filius Gerelmi, Willelmus de Pille et Aleydis, mater ipsius Willelmi, contulerunt Sygero dicto Portere domistadium quoddam situm foris portam de Frigido Monte, juxta domum ejusdem Sygeri, sub annuo censu decem solidorum Bruxellensis et trium caponum, semper in Natale Domini solvendorum, hereditarie tenendum, promittens ei inde warandiam, et dabit adveniens duos
of Afflighem, Henri, and his convent then ceded pro allodio a residence with houses, 
fonds, and dependences in Brussels, near the modern day Marché-aux-Poulets. The 
witnesses included two aldermen of Brussels: Johannes de Senna and Henricus dictus 
Portre. In the document, as previously shown, Guillaume was identified as a fisherman. 

In addition, the charter mentioned a river, which would have been important to 
Guillaume’s trade. In addition to the rivers named above, the Pede River was mentioned twice in the 
extant documents. The first occurrence came in May 1286. Catherine, the daughter of 
Siger of Saint-Géry, transported pro allodio to the hospital of Saint John rights on three 
fonds of a house in Brussels located near Saint Nicolas Church. She also transported 
rights of quatuor jornalibus et dimidio of a meadow located next to Pedebroek. The 
name Pedebroek probably comes from the area of the valley of the Pede River. The 
second mention of the Pede River took place shortly later on 18 February 1289. 

Marguerite de Witbroech, via the alderman Johannes de Platea and Henricus Heinkaert,

solidos et recendens similiter duos...” Cartulaire de l’Hôpital Saint-Jean, SJ 160, p. 205. The original is 
lost.

133 “Notum sit universis quod vir religiosus, dominus Henricus, abbas Affligeniensis, cum debita 
renuntiatione contulit ex parte sua et ex parte conventus sui Willelmo dicto Clabot, piscatori, mansionem 
qua manserat Oda, filia Hedelwigis, prope Rivum et prout eadem Oda mansionem ipsam tenuerat com 
domibus et fondis ante et retro et ejus pertinentiis, pro allodio, promittendo ei inde rectam warandiam...” 
Cartulaire de l’Hôpital Saint-Jean, SJ 170, p. 217. CPAS, SJ 32.

134 The river, simply named Rivum, is only identified by the modern location, pointing to the names of 

135 “Noverint universi quod Katherina, filia Sygeri de Sancto Gaugerico, renuntiando contulit fratri 
Waltero de hospitali sancti Johannis, ad opus ejusdem hospitalis, omne jus suum quod habebat in tribus 
domistadiis prope Sanctum Nycholaum, supra quorum uno manet Johannes de Lidekerke, supra aliud 
Johannes, filius Mye, supra tercium Willelms Brulant, necnon omne jus suum et quatuor jornalibus et 
dimidio prati siti in Pedebroec, pro allodio, promittendo ei inde rectam warandiam, salvo sibi de omnibus 
obnis predictis usafrectu suo, salva etiam manentibus in dictis domistadiis hereditate sua...” Cartulaire de 
l’Hôpital Saint-Jean, SJ 204, p. 257. The original is lost.

136 Bonenfant places the location of Pedebroek at Lennick-Saint-Martin. See Cartulaire de l’Hôpital Saint-
Jean, p. 257, fn 2.
made it known that she had received from the hospital of Saint John *septem libras* from a *fonds* of a house located at Pede, which had belonged to the hospital.\(^{137}\) In describing the area of the house, the aldermen indicated that it was near (*apud*) Pede and close to the Bist bridge (*prope pontem de Bist*).\(^{138}\) It is important to note that “few towns that had grown up on one bank of the river failed to spread to the opposite bank. A bridge became a necessity, and the land on the far side of the river quickly became part of the urban hinterland or service area of the town.”\(^{139}\) While this was not necessarily the case in Brussels, it was apparent that bridges played an important role in the lives of the people and in the daily workings of the town as evidenced by the document.

In the last ten years of the thirteenth century, identification of bodies of water increased dramatically. Beginning in January 1290 Jean, the presbytery of Laeken assigned to the hospital of Saint John an annual rent of “*quatuor solidos Turonensium*” on a “*bunerii terre allodie*” located near Drootbeek River. While Jean is described as being sound of mind, albeit sick, and while the rent was to be paid each year on the anniversary of his death by the Poor Table of Saint-Esprit of Laeken,\(^{140}\) the importance of

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137 “Nos, Johannes de Platea et Henricus, dictus Heinkaert, scabini Bruxellenses, notum facimus universis presentes litteras visurus et auditis quod, coram nobis propter hoc personaliter constituta, Margareta, dicta de Witbroech, quitas clamavit et dimisit septem libras, quas habuit ad domistadium situm apud Peda prope pontem de Bist, et et recognovit quod frater Fredericus, magister ac provisor hospitalis sancti Johannis in Bruxella, ex parte dicti hospitalis bene et legitime solvisset ei septem libras antedictas, presentium testimonio litterarum nostris sigillis sigillatarum…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 209, p. 262. The original is lost.
138 *Cartulaire de l’Hôpital Saint-Jean*, SJ 209, p. 262. Bonenfant explains that *L’hof ter Biest*, located at Anderlecht, was situated in the proximity of the River Pede. The hamlets, however, in that location do not bear the name given in the charter. He speculates that the document perhaps referred to the groups of hamlets in the valley of the river. See *Cartulaire de l’Hôpital Saint-Jean*, p. 262, fn 2.
139 Pounds, *The Medieval City*, 35.
140 “Universis presentes litteras specturis scabini de Laken salutem et noscere veritatem. Noverint universi quod dominus Johannes, curatus de Laken, compos mentis, licet egrir corpore, anime sue cupiens providere saluti, assignavit et dedit hospitali sanct Johannis in Bruxella quatuor solidos Turonensium parve monete annuatim, super assignamentum bunerii terre allodie site super Droetbeke, in quam terram benificavit
the charter for this purpose is its identification of Drootbeek River. The lands described in the document were not only located along the river but also along a hameau, or hamlet of Laeken. Also in 1290, Gertrude de Bonne renounced in the favor of the hospital of Saint John the use that she had on her goods that were held by Régnier Eggloy and that the hospital had acquired by exchange. Gertrude also renounced the rights of her daughters and of her relatives on the holdings. In return, the hospital accorded in census to Gertrude and her children two small houses with their fonds located on their holdings next to the port of Coudenberg in Brussels.

Although a five-year break occurred regarding mentions of water sources between 1290 and 1295, the last five years of the thirteenth century saw an overwhelming increase in the mention of bodies of water and their physical counterparts, such as ports. On 5 September 1295 another mention of the Coudenberg Port occurred. Alix, the widow of Gilles Brassator, renounced in profit to Jean Kemmere all her rights on a fonds of a

\[\text{mensam Sancti Spiritus in Laken, a provisoribus dicte mense perpetue in die depositionis sue persolvendos...} \]  
\[\text{Cartulaire de l'Hôpital Saint-Jean, SJ 217, p. 270. CPAS, SJ 39, fol. 46.} \]

\[\text{“Notum sit universis quod Gertrudis, dicta de Bonne, resignavit fratri Godescalco, ad opus hospitalis sancti Johannis in Bruxella omnem usumfructum quem habebat in bonis que dicta Gertrudis tenere solebat quondam a Reynero Ecgloy, que bona per recompensationem et per cambium pro alis bonis incorporata sunt hospitali sancti Johannis in Bruxella, promittens, fide cum juramento prestita corporali, se nunquam calumniaturam usumfructum antedictum...} \]  
\[\text{Cartulaire de l'Hôpital Saint-Jean, SJ 260, p. 314. The original is lost.} \]

\[\text{“...et ejus liberae duas camaras sitas supra dicta bona, illas videlicet camaras, consistentes versus portam Frigidi Montis...} \]  
\[\text{Cartulaire de l'Hôpital Saint-Jean, SJ 260, p. 314. The original is lost.} \]

\[\text{Ports prove extremely important to cities. In most cities, ports acted as the “enclosed place serving as storehouse or transfer point for merchants. [Eventually,] the expression was passed on [and it came to be applied to] landing places where was accumulated in the natural course of trading operations merchandise designed to be shipped further.” See Pirenne, Medieval Cities, 143. In this case specifically, the Port of Coudenburg was located near the ducal palace, linking trade directly to the duke. It was not, however, far from the market or the city walls.} \]
house that she held in census outside of the port of Coudenberg in Brussels. Later still in June 1296 Francon Boyken ceded *pro allodio* to the hospital of Saint John “*septem jornalia tam terre*” located between Aa and Neerpede. The document explains that the land included a meadow (*prati*) situated between *Zone* and *Sennam* beyond Aa.

Also, on 15 February 1298, Marguerite, the wife of Régnier Eggloy, who acted as an assistant to her husband, transported a house *pro allodio* to the hospital of Saint John.

Included in the transfer were there attached vineyards. The items were located in Brussels next to the port of Coudenberg. Later, on 22 April 1299, Gertrude *de Bonne* renounced in the favor of the hospital of Saint John the use that she had on the holdings of Régnier Eggloy and that the hospital had acquired in 1298. The holdings were again located near Coudenberg Port.

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145 “Notum sit universis quod Aleydis, relicta Egidii Brassatoris, resignavit omnem hereditatem et jus, quam et quod habebat in quodam domistadio sito foris portam Frigidi Montis prope Willelmi Harseel…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 238, p. 291. The original is lost.

146 “Notum sit universis quod Franco dictus Boyken renuntiando contulit fratri Waltero ad opus hospitalis sancti Johannis Bruxellensis septem jornalia tam terre quam prati siti inter Zone et Sennam apud Aa et tria jornalia terre site in duabus petiis inter Aa et Nepe, pro allodio, promittendo ei inde ad opus dicti hospitalis rectam warandiam…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 240, pps. 292-293. CPAS, SJ 34, fol. 29. Bonenfant explains that the indication of *Zone* is meant to provoke the River Zuene and not the hamlet of Zuen. *Cartulaire de l’Hôpital Saint-Jean*, p. 293, fn 1.

147 “Notum sit universis quod Margareta, uxor Reineri Eggloi, et Reinerus Eggloi, ejus maritus, tamquam ejus tutor, contulerunt cum debita resignatione Marie de Ledeberge, magistre, fratri Godesdaclco, magistro hospitalis sancti Johannis in Bruxella, ad opus dicti hospitalis, domum cum domistadiis, proat jacent extra portam Frigidi Montis et eis sunt assignata, cum vinea appendente, pro allodio, promittentes eis inde rectam warandiam ad opus dicti hospitalis, salvo jure ac hereditate Gertrudis de Bonne et suorum heredum…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 249, pps. 303-304. The original is lost.

148 “Notum sit universis quod Gertrudis, dicta de Bonne, resignavit fratri Godescalco, ad opus hospitalis sancti Johannis in Bruxella omnem usumfructum quem habebat in bonis que dicta Gertrudis tenere solebat quondam a Reynero Ecgly, que bona per recompensationem et per cambium pro aliis bonis incorporata sunt hospitali sancti Johannis in Bruxella, promittens, fide cum juramento prestita corporali, se nunquam calumpturatam usumfructum antedictum…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 260, p. 314. The original is lost.

149 “…consistentes versus protam Frigidi Montis…” and “…Et est condiction quod dicta Gertrudis nec sui liberi nullum habebant exitum retro versus vineam nec versus ortum, et dicte camere habebant viam versus vicum, et eandem viam habebant camere hospitalis predicti, ubicumque nunc jacet vel in posterum jaceri contigerit…” *Cartulaire de l’Hôpital Saint-Jean*, SJ 260, p. 315. The original is lost.
water came on 16 February 1299 when Marguerite, the widow of Jean Grawe, renounced to Gautier specifically the hospital in general, the use that he had on a *fonds* and a house that she owned located at Neer-Beersel. The land was located near water.\textsuperscript{150}

With so many mentions of water sources, bodies of water, and their associated physical counterparts, such as ports, one must take a step back to question why these structures and formations were so important to the authors of the documents associated with Saint John’s hospital. The most obvious reason was for legal matters. Most of the charters in the hospital’s collection concerned the transference of lands and property to the hospital or to the hospital’s use. In order to better identify those lands, the authors of the documents simply referred to landmarks in and near the cities in which properties were located. While this reason may seem sufficient enough, there may have been other motivations behind the naming of the rivers and their associated bodies of water. Quite simply, this was a town that grew via trade and commerce, of which rivers and other bodies of water were clearly important to the success of the city.

Whereas mentions of rivers and bodies of water make up the greatest number of landmarks and structures identified in the documents, other similar formations were certainly present. While “walls emphasized the contrast between town and country and gave to the city an almost personal quality,”\textsuperscript{151} walls also served as landmarks and as

\textsuperscript{150} “*Notum sit universis quod Margareta, relicta quondam Johannis, dicti Grawe, resignavit fratri Waltero, ad opus hospitalis sancti Johannis in Bruxella, omnem usufructum, quem habebat penes domum et domistadium, quo stat dict domus apud Nederbersele, et penes quondam petiam aque jacentis ante curiam Johannis de Lapide, promittens, fide et juramento prestitis, se nunquam calumpniataram ulla interveniente causa seu occasione dictum usufructum…” Cartulaire de l’Hôpital Saint-Jean, SJ 256, p. 311. The original is lost.  

\textsuperscript{151} Pounds, *The Medieval City*, xxviii.
Thus, it should not come as a surprise that walls appeared in the documents of Saint John’s hospital, especially when several disagreements concerning the hospital were centered on the city walls.

The most important and earliest mention of the city walls occurred on 18 November 1253. The subject of the charter was the exercising of parishioner rights for those persons living in the part of the parish of the church of Notre-Dame de la Chapelle, which was within an enclosure belonging to the hospital. While several disputes were settled in the agreement, the most significant change had to do with the city walls. In addition to the funeral rights that the hospital would receive, the charter also restructured the hospital’s jurisdiction, splitting it between the first and second city walls.

Later, in December 1257. Jean Gortesac ceded to the hospital of Saint John one half of twenty-seven sous in census that was received in Brussels. In outlining how the

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152 For additional information on city walls, see Nicolas, Urban Europe: 1100-1700, 68-70.
153 In 1210, Notre-Dame de la Chapelle was established in the parish by an accord reached between the abbot of Saint-Sépulcre and the chapter of Sainte-Gudule. See Abbé Thibaut de Maisières, Eglises Gothiques de Bruxelles (Bruxelles: Editions du Cercle d’Art, 1942), 13. The involvement of the cathedral chapter in the creation of Notre-Dame de la Chapelle would help to explain its later involvement over arguments of jurisdiction with Saint John’s hospital.
154 “…Noverit universitas vestra quod, cum quaedam particular parrochie de Capella infra septa hospitalis sancti Johannis sit sita et super oblationibus oblatis in funeribus quorumdam commorantium infra predictam particulam inter nos in curia Cameracensi controversia verteretur, nos, omne controversione occasionem de nobis volentem amovere et bonum pacis inter nos conservare, de consilio proborum, talem inter nos fecimus ordinacionem, utilitate ecclesiarum nostrarum considerate diligentem in eadem: quod illi, qui in posterum habitu dicti hospitalis sibi non assumpto infra predictam particulam in habitu seculari manebunt, tenebuntur peccata sua presbytero de Capella confiteri nisi ea alias confiteantur de ipsius licentia speciali; oblations suas in quatuor majoribus solemnmitatibus videlicet in solemnmitate Omnium Sanctorum, Natalis Domini, Pasche et Penthecostes, unoquoque anno facere ad altare ecclesie de Capella supradicte; jura christianitatis recipere a presbytero memorato et infra cimiterium dicte Capelle, nisi alias, salvo jure parrochiali, suam elegerint sepulturam, sepeliri; et oblationes que in funeribus eorum offerentur, tam in denariis quam in candelis, penes nos abbatem sancti Sepulcri, conventum ejusdem loci, remanebunt tanquam nostre, eo nobis non obstante quod predicti habitatores dicte particule infra septa dicti hospitalis suas habuerint masiones…” Cartulaire de l’Hôpital Saint-Jean, SJ 86, pps. 123-125. The original is lost.
155 “Notum sit universal quod Johannes, dictus Gortesac, contulit cum debita renuntiatione fratri Waltero hospitalis beati Johannis Baptistae ad opus ejusdem hospitalis unam medietatem viginti septem solidorum
twenty-seven sous were to be divided, the author of the charter included the phrase, “ad domistadium ante Wikettum triginta denarios.” Wikettum probably was in reference to an office located on the first city wall near the bottom of the current rue Fossé-aux-Loups.157

Not all references, however, were to places inside the city walls. On 7 March 1294 the children of Henri Monterkens, Jean, Hedwige and Élisabeth, transported pro allodio to the hospital of Saint John the rights on a fonds of a house located in Brussels. The house was located outside the city wall above a canal and between the port of Herbes-Potagères and the home of a Godfrey.158 A final reference to a city wall occurred in June 1298 before the twenty-fourth of that month. The hospital of Saint John gave for a period of one hundred years to Baudouin, the presbytery of Herent and official foraneo of the bishop of Cambrai, a fonds of a house situated in Brussels next to the wall of the Bogards.159

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157 For more information on this, see Cartulaire de l’Hôpital Saint-Jean, p. 140, fn 2.
158 “Notum sit universis quod Johannes, Heylewigs et Eylyzet, liberi quondam Henrici, dicti Monterkens, contulerunt cum debita renunciation Johanni dicto Vroembout omne jus quod habebant et eis competebat in quodam domistadio sit extra murum, supra fossam, inter Warmoesporte et domum quondam Godefridi, dicti Ettel, pro allodio, promittentes ei inde rectame warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 232, p. 284. The original is lost.
159 “Notum sit universis quod magister, magistra, fratres et sorores hospitalis sancti Johannis in Bruxella, mediante consensu provisorum ejusdem hospitalis, contulerunt viro discretō domino Baldewino, presbytero, curato de Herent, officiali foraneo domini Cameracensis episcopi, domistadium situm juxta murum Begardorum, sicut ibidem tenuit Johannes, dictus de Tererimonda, pelliparius, prout ei est assignatum et deputatum tenendum et possidendum a festo sancti Petri ad Vincula proxime futuro ad terminum seu spaciunctum annorum continue subsequentium, annuatim interim pro viginti solidis Bruxellensium denariorum monete usualis communiter in bursa currentis, simper ad Natale Domini solvendis, promittendo ei inde interim warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 252, p. 306. The original is lost.
Whereas city walls appeared in the documents of Saint John’s hospital after the institution entered its autonomous phase, the earliest mention of farms, farm lands, or farmers came before that period.\textsuperscript{160} In fact, the specification of farmlands before 1248 and the specification of walls after 1248 seems to denote the changes in the region from rural to urban. Farmlands, indicating rural development, appeared earlier, whereas city walls, the hallmark of urban life, came after more town development.

The first noted instance of farmlands came on 3 February 1242. Henri de Velst, a knight, gave to Saint John’s hospital and to other institutions rents that he assigned on a rural farm situated in Brusseghem, which was held by him in census to the cathedral chapter of Sainte-Gudule.\textsuperscript{161} The institutions were all responsible with the celebration of his death and that of his wife’s, Marguerite’s. In the introduction the charter, Bonenfant describes the land as an \textit{exploitation rurale}, which could be believed to be a farm.\textsuperscript{162} The Latin in the charter appears as: \textit{curtim citam}.\textsuperscript{163}

In addition, on 16 March 1250 Hugues, lord of Saintes, placed the hospital of Saint John in possession of a \textit{dîme} located at Pepinghen. On that date Hugues also released Jean, the son of Gauthier of Loth from the \textit{dîme}. Prior to the agreement, Gauthier had relinquished Jean from all that he held in \textit{fief} to Hugues. The agreement

\textsuperscript{160} I have limited the discussion here to larger enterprises. There are several appearances of “courtyards” and “gardens” that may have been used as small farm ground.

\textsuperscript{161} “Noveritis quod Henricus, miles, de Velst, in presentia nostra constitutus, XVI d. annuatim in festo beati Blasii in perpetuum solvendos hospitali sancti Johannis et duodecim d. in monasterio beate Katerine et sex d. hospitali sancte Gudile et sex den. in domo leprosorum in Bruxella in eleemosinam contult, eosdem assignando ad quondam curtim citam (sic) in parrochia de Brucengem in loco qui dicitur Rajardengata, quam de nobis pro octo den. hereditarie possidet, adjecta hac conditione quod, ipso et uxore sua Margarata defunctis, in predicto festo beati Blasii anniversarium ipsorum dicta hospitalia et dictum monasterium in perpetuum observavunt…” Cartulaire de l’Hôpital Saint-Jean, SJ 57, p. 84. CPAS, SJ 22.

\textsuperscript{162} Cartulaire de l’Hôpital Saint-Jean, p. 83.

\textsuperscript{163} Cartulaire de l’Hôpital Saint-Jean, SJ 57, p. 84. CPAS, SJ 22.
was made in the presence of and with the consent of a number of people, including Walterus de Strathem. Bonenfant argues that Streethem was that name of a farm previously existing at Brages, and thus Walterus probably had some sort of connection to the farm. Finally, in April 1268 between 8 and 30 of that month, Simon vnder Ingherstraten made it known that he had sold to the hospital of Saint John quatuor jornalia et dimidium terre hereditarie located at Erps and held in census to Gilles of Nat. The guarantors of the hospital listed in the agreement included Simonem de Drischghe. Drischge was the name given to a farm at Erps.

In addition to farms, there were some mentions of vine and vineyards. An interesting occurrence appeared in February 1258 when Lambert Minutor set up in profit to the hospital of Saint John a rent of five solidos Bruxellenses, which was to come from his home located on Volrestrate, or the current Rue du Lombard. The rent was established in karitatis intuit in order to be able to distribute wine to the poor of the

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164 “Ego, Hugo dominus de Saintes, notum facio omnibus hoc scriptum visuris quod Walterus de Lothse resignavit totum feodum suum quod de me tenuit in manu mea ad opus Johannis filii sui per legem et per judicium. Et ego reddidi integraliter Johanni, filio suo, in feodum. Et Johannes antedictus mihi reportavit in manu unam decimam, que spectabat ad feodum suum, ad opus hospitalis sancti Johannis in Bruxella per legem et per judicium. Et ego hereditavi hospitali antedicto dictam decimam coram scabinis de Pepingham, ubi dicta decimal jacet, pro duobus denariis Bruxellensis, pro censu annuatim solvendis ad festum beati Remigii simper de anno in annum...” Cartulaire de l’Hôpital Saint-Jean, SJ 78, p. 114. The original is lost.


166 Cartulaire de l’Hôpital Saint-Jean, SJ 133, p. 177. CPAS, SJ 37, fol. 24.

167 “…Noveritis quod Simon, dictus vander Ingherstraten, cognovit coram nobis se vendidisse hospitali beati Johannis in Bruxella quatuor jornalia et dimidium terre hereditarie, parum minus, site in parochia de Erpse, supra locum dictum Stiberch, que tenetur hereditarie ab Egidio de Nat super 1 denarium et super duos denarios si fuerit permutata. Et cognovit idem Simon se investivisse et instituisset dictum hospitale in dicta terra ad legem et judicium...” Cartulaire de l’Hôpital Saint-Jean, SJ 133, p. 177. CPAS, SJ 37, fol. 24.

hospital. The only other mention of vine or vineyards came rather late in the thirteenth century (15 February 1298), Marguerite, the wife of Régnier Eggloy, acting as an assistant to her husband transported a house pro allodio to the hospital of Saint John. Included in the transfer were their attached vineyards. The items were located in Brussels next to the port of Coudenberg. On 22 April 1299, Gerturde de Bonne, named in the previous charter, renounced in the favor of the hospital of Saint John the use that she had on the holdings of Régnier Eggloy that the hospital had acquired in 1298. The holdings again included in the original named vineyard and were located near Coudenberg Port.

While farmlands and vineyards did appear in the documents of Saint John’s hospital, mills were mentioned much more frequently. Of all the inventions of the Middle Ages, perhaps the most significant was the mill. Although mills had been found in civilizations older than those of the Middle Ages, they were not used for agricultural

169 “Notum sit universis quod Lambertus, dictus Minutor, karitatis intuitu, hereditarie contulit hospitali beati Johannis Baptiste in Bruxella super domum et domistadium suum, super prope stratam dictam Wolrestrata, quinque solidos Bruxellenses annuatim in die Pasche ad primam commestionem ad vinum pauperum ejusdem hospitalis convertendos...” Cartulaire de l’Hôpital Saint-Jean, SJ 103, p. 142. The original is lost.

170 “Notum sit universis quod Margareta, uxor Reineri Eggloi, et Reinerus Eggloi, ejus maritus, tamquam ejus tutor, contulerunt cum debita resignatione Marie de Ledeb erghe, magistre, fratri Godescalco, magistro hospitalis sancti Johannis in Bruxella, ad opus dicti hospitalis, domum cum domistadiis, prout jacent extra portam Frigidi Montis et eis sunt assignata, cum vinea appendente, pro allodio, promittentes eis inde rectam warandiam ad opus dicti hospitalis, salvo jure ac hereditate Gertrudis de Bonne et suorum heredum...” Cartulaire de l’Hôpital Saint-Jean, SJ 249, pp. 303-304. The original is lost.

171 “Notum sit universis quod Gertrudis, dicta de Bonne, resignavit fratri Godescalco, ad opus hospitalis sancti Johannis in Bruxella omnem usum fructum quem habebat in bonis que dicta Gertrudis tenere solebat quondam a Reynero Eggloy, que bona per recompensationem et per cambium pro aliis bonis incorporata sunt hospitali sancti Johannis in Bruxella, promittens, fide cum juramento prestita corporali, se nunquam calumnianturam usum fructum antedictum...” Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 314. The original is lost.

172 “…consistentes versus protam Frigid Montis...” and “…Et est condictum quod dicta Gertrudis nec sui liberi nullum habebant exitum retro versus vineam nec versus ortum, et dicte camere habebant viam versus vicum, et eandem viam habebant camere hospitalis predicti, ubicumque nunc jacet vel in posterum jacere contigerit...” Cartulaire de l’Hôpital Saint-Jean, SJ 260, p. 315. The original is lost.
purposes,\textsuperscript{173} that is, until, renewed trade and the rise of cities. Prior to the high Middle Ages, most “historians agree that it was a feature of the feudal economy that mills, like other valuable assets, were firmly in the hands of manorial lords.”\textsuperscript{174} In fact, Marc Bloc commented in 1935 that “all mills whose history we can more or less follow were in fact seigneurial in origin.”\textsuperscript{175} The advent of towns and trade, however, meant that more capital and power was freed up for other uses. In addition, “wealth made its appearance: that of mercantile wealth, consisting no longer in land but in money or commodities of trade measurable in money.”\textsuperscript{176}

Yet, even with increased personal capital, the use and possession of mills was still limited to the noble classes. For example, at least in England in 1086, all mills were demesne mills. A century or so later, the mills then “slipped into hereditary tenure.”\textsuperscript{177} It was only after the economic resurgence of the thirteenth century that lords began to regret the trends of the previous century. Not only did they bring demesnes, also leased out in the twelfth century, back into what has been called ‘direct management’ […]", they attempted to do the same with tenant mills, taking them back in their own hands over the course of the thirteenth century or the early fourteenth when the twelfth-century leases expired or when the hereditary tenure of mills failed for lack of heirs, or perhaps when such mills made their way back to the demesne through purchase or gift.\textsuperscript{178}

Accordingly, Brussels may have followed a similar pattern to that described above. The mention of mills in the documents of Saint John’s hospital in Brussels

\begin{footnotes}
\item\textsuperscript{173} See for example Lynn White, who discusses the Vitruvian mill in ancient times, which probably used to cut rock and not for agriculture. Lynn White, \textit{Medieval Technology and Social Change} (Oxford: Clarendon Press, 1962), 81.
\item\textsuperscript{175} Ibid.
\item\textsuperscript{176} See especially Pirenne, \textit{Medieval Cities}, 222.
\item\textsuperscript{178} Ibid.
\end{footnotes}
appears in a number ways: the granting of privileges for the usage of the mill, exploitation of mills, and the use of mills as landmarks. While it is difficult to show transitions in Brussels as those that occurred in England over the twelfth and thirteenth century, the documents do point to a possible return of mills to common use, namely through gifts to the hospitals. Although there are no records that actually demonstrate a transfer of a mill, the rights to the mills were certainly becoming more widespread. These rights thus became a hallmark of the end of the feudal economy and the beginnings of trade via increased capital.179

As could be expected, the number of mills appearing in the documents of Saint John’s hospital in Brussels proves to be proportionally higher than those of farms and vineyards. This should come as no surprise as mills were necessary for the processing of grain. Thus, unlike the appearance of many of the farms and vineyards, mills actually surface rather early in the hospital’s history. In addition, mills tended to be more directly associated with the hospital. The first mention of a mill came early in the hospital’s history and was associated with Duke Henry I. As was in England, we have the most information about demesne mills that lords leased out. The leases included the length of the term that the lessee would hold the mill. It was either for life or for a set number of enterprises.

179 Furthermore, some have even suggested that increased occurrence of mills in the records of the high Middle Ages may be evidence for a possible ‘industrial revolution’ of the Middle Ages. Much of this debate stems from Eleanor Carus-Wilson’s 1941 article titled, “An Industrial Revolution of the thirteenth century,” in which “she did much to promote the view of the medieval period as an age of mechanical innovation” according to Holt, The Mills of Medieval England, 145. For Carus Wilson’s article, see Eleanor Mary Carus-Wilson, “An Industrial Revolution of the thirteenth century,” in Economic History Review, 11:1, pp. 39-60 (Blackwell Publishers, 1941). For more in the technical and innovative aspects associated with mills, see Holt, The Mills of Medieval England, 117-144.
years. Similarly in Brussels, on 4 February 1225, Duke Henry I granted to the hospital of Saint John the annual collection of five bushels of wheat, which had been imposed on milling at the Ruysche mill in Brussels. Shortly later in July 1226, Oston III, the lord of Trazegnies, gave to the hospital of Saint John an annual rent of one muid of rye to be collected from his mill of Braine-le Château, and in May 1247, Oston IV of Trazegnies, the lord of Braine-le-Château, confirmed the original donation that had been made in 1226, which evoked the memory of the mill at Braine-le-Château.

In addition, in 1233, another early mention of a mill occurred when Guillaume de Turbize gave to the hospital of Saint John for the profit of the sick an annual and perpetual rent of four muids of wheat. The wheat was to be taken from the collection of processed wheat the mill of Abeiche, and the entire grant was done with the consent of Gautier of Abeiche, who held the mill in fief. Similarly, in April of either 1234 or

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180 Langdon, Mills in the Medieval Economy, 187.
181 “...Sciant universi quod nos, ob remissionem omnium peccatorum nostrorum, contulimus domui hospitalis beati Johannis in Bruxella singulis annis quinque modios annone, percipientes de mulctura molendini nostri quod dicitur Rusca supra Sinnam...” Cartulaire de l’Hôpital Saint-Jean, SJ 24, p. 43. CPAS, SJ 32.
183 “Universis presens scriptum inspecturis, ego, Osto de Trasiniis, dominus de Branix Castelli, notum facio tenore presentium quod bone memorie pater meus Osto contulit hospitali beati Johannis in Bruxella litteras suas in hunc modum: [insert the previous act here]. Ego autem Osto predictam collationem ratam habeo et firmam...” Cartulaire de l’Hôpital Saint-Jean, SJ 68, p. 99. The original is lost. Later, Oston IV would also become lord of Trazegnies.
184 “...Universiti vestre notum fieri volumus quod nos libere et absolute contulimus in elemosinam hospitali sancti Johannis in Bruxella, ad opus pauperum ibidem decumbentium, quatuor modios annone secundum mensuram Braine Allodii, annuatim perpetualiter percipientes de cujusdam molendini proventibus siti apud Habbeke, quod tenemus jure phodali a Waltero de Hebbeke, et hoc ipso Waltero presente et consentiente sub testimonioque virorum suorum, Godefridi de Rodenam, scabini de Hal, Henrici, scabini de Lembeke, Arnoldi de Ultra Cennam...” Cartulaire de l’Hôpital Saint-Jean, SJ 44, p. 69. The original is lost. The same act was issued again in 1233 with some variation. See Cartulaire, SJ 45, p. 70. The original is lost.
Gérard Hacca, a knight of Axpoel under Sempst, his wife and his son Gérard all gave to the hospital of Saint John an annual and perpetual rent of a dimidium modium of wheat to be taken from the mill of Molhem.

After the identification of the mill of Molhem, no mills appeared in the documents for another fifteen years, after which a mill located in Saint-Gilles, Nieuwmolen, was mentioned rather frequently in the hospital’s documents. The first notation of Nieuwmolen came in indirect relation to the hospital. In September of 1248 the mistress of the hospital, Ide, used several witnesses to show that land reclaimed by Sophie of Coudenberg to Gertrude Schalie was an allodium of the hospital of Saint John. In the discussion of Gertrude Schalie and her family, Paul Bonenfant argued that the Schalies had a “certain predilection for the exploitation mills.” Included in this misuse of mills was the mill, Nieuwmolen, which Gilles Schalie exploited in the thirteenth century.

Similar oppression followed by the father of Gertrude after and then again in the fourteenth century by Michel Schalie, a knight. In addition, Nieuwmolen mill was directly addressed in 1262 sometime before 24 June in a sentence arbitration between the hospital of Saint John on one part and Ideloïe, the widow of Godefry Onin on the other.

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185 See Cartulaire de l'Hôpital Saint-Jean, p. 74.
187 For the details of the document, see chapter seven.
188 Cartulaire de l’Hôpital Saint-Jean, pps. 105-106, fn 2.
189 The mill is known by several names: Novum molendinum, Nieuwmolen, and Nouveau molen. Nieuwmolen, however, was the name given to the mill in 1285. For more information on the mill into the fourteenth, fifteenth, and sixteenth centuries, see Wauters, Histoire de l’église en Belgique, t. III, 559.
The subject of the address included the *fonds* at Nieuwmolen and the holdings located nearby.\(^{191}\) The mill was identified simply as “*[Nov]um molendinum.*”\(^ {192}\)

After June 1262, the hospital and Gertrude Schalie came to an agreement to divide up in common accord the succession of Godfrey Onin, the father of Gertrude. In this agreement, the mill was again mentioned. The two parties came to an agreement regarding the use of the mill.\(^ {193}\)

After the dispute and the division of the use of the mill between Gertrude and the hospital, the mentions of the mill did not cease. In fact, in other encounters between Gertrude and the hospital, the mill appeared. On 10 June 1266 Gertrude recognized that the hospital had purchased from her certain holdings that had been part of her inheritance,\(^ {194}\) which were located next to the *Novum molendinum.*\(^ {195}\) Finally, in July

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192 Cartulaire de l’Hôpital Saint-Jean, SJ 111, p. 151. CPAS, SJ 44, fol. 3.

193 “…medietas sex jornalium prati hereditarii, parum minus, siti ante Novum molendinum; medietas prati hereditarii, quod dicitur commune partum, siti prope ipsum Novum molendinum versus Bruxellam; medietas terre hereditarie site citra dictum molendinum Novum, juxta Sennam; preter id, quod jacet ante ipsum molendinum, pro quo dicta Gertrudis habet annuatim, quamdiu vixerit, quinque sextaria siliginis de meliori, juxta duos demarios in ipso sextario, in festo sancti Bavonis persolvenda…” Cartulaire de l’Hôpital Saint-Jean, SJ 112, p. 153. CPAS, SJ 44, fol. 4.

194 “…Noveritis quod Gertrudis, quondam Godefridi, coram nobis constituta, recognovit hospitale beati Johannis in Bruxella erga ipsam emisse de bonis, que cesserunt eidem Gertrudis in portionem s[ua]m, hec bona…” Cartulaire de l’Hôpital Saint-Jean, SJ 124, p. 167. CPAS, SJ 44, fol. 5.

1268, Gertrude renounced in favor of the hospital of Saint John its use and ability to receive income on several holdings, which included rights to the mill.\textsuperscript{196}

The appearances of mills in the documents were not limited to the first half of the thirteenth century. In February 1284 the hospital of Saint John invested Francon, the son of Arnoul Suaef, of the holdings exchanged between him and his father at Saint-Gilles. Included in the holdings was a \textit{dimidio bonario terre arabilis}, which was located before \textit{Novum Molendinum}.\textsuperscript{197} \textit{Novum Molendinum} appeared earlier in the disputed between Gertrude Schalie and Godfrey Onin. Similarly, on 22 July 1289, Pierre Keiser transported \textit{pro allodio} to Jean Loschart, a house and \textit{unum jornal Cartulaire e terre} located at Eysinghen.\textsuperscript{198} The lands were located near a mill: \textit{prope molendinum}.\textsuperscript{199} The last mention of a mill came in May 1300. Jean, the son of Gerelm and through the


\textsuperscript{197} “Nos, Margareta, magistra hospit\[alis\] beati Johannis Bru\[xellensis\], et totus\[s\] conventus nostr\[eri\] ibidem, [scire] volumes universes quod, cum nos de consilio provisorum nostrorum, propter utilitatem hospitalis [nostri] predicti in hoc evidenter inspectam, [c]ambium seu commutationem fecerimus cum Arnoldo, dicto [S\[uef\], et [filio] s\[uo], Fran\[cone,\] de quibusdam bo\[nis nostris, s\]itis apud Ob\[ru\]xellam ret\[ro cu\]riam ejusdem Arnoldi, videlicet de bonario u\[no, par\]um plus, prout [jacet ibidem in pascuis, cum quodam domistadio adjacent, necnon [de] quodam jortalie terre arabilis, jacente ibidem [retro] horreum dicti Arnoldi, cum quodam p\[eti\]a terre adjacent que thetonice drisch nominator, pro dimidio bonario terre arabilis, jacente [an\]te Novum Molendinum nostrum [de] Obbruxella, et pro dimidio bonario prati…” Cartulaire de l’Hôpital Saint-Jean, SJ 201, p. 254. CPAS, SJ 44, fol. 7.

\textsuperscript{198} “Noverint universi quod Petrus, dictus Keiser, cum debita renunciatione contulit Johanni, dicto Loscart, domum sitam apud Heisinghen, juxta mansionem domine Elizabeth Taihinne, cum ejus pertinenciis et appendicitiis, et unum jonalie terre cum dimidio jacentis apud Heisinghen prope molendinum, pro allodio, promittendo ei inde rectam warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 211, p. 263. CPAS, SJ 38, fol. 36.

\textsuperscript{199} Cartulaire de l’Hôpital Saint-Jean, SJ 211, p. 263. CPAS, SJ 38, fol. 36.
consent of his wife Élisabeth, conferred to Saint John’s an annual and perpetual rent of 
duo sextaria siliginis on the part of a mill called Labusmolen in Ophem that he held.200

Conclusion

May 1300 marked the final mention of a mill. For the women of Brussels as well as the town craftsmen, several opportunities had emerged, which allowed them to provide significant donations to the hospital of Saint John. Their abilities came from the rise of cities, the creation of new trades, and the opening up of wealth. As a result, women gave to charitable institutions in overwhelming numbers—they accounted for more than one-quarter of the hospital’s gifts throughout the twelfth and thirteenth centuries.

While not as numerous, town craftsmen appeared in the hospital’s documents. Many of the craftsmen were mentioned in the documents, and several did not even play a direct role in charitable gifts. Their importance, however, cannot be ignored.

Identification of the many social classes and trades of Brussels proves important in our understanding of the young city. In addition, being able to locate several city structures and natural formations also helps us to understand the composition of the town in its early years. Thus, having surveyed the lay women involved with the hospital, the town craftsmen mentioned in the documents, and the structures and formations named in the charters, we conclude our study on the hospital of Saint John and the high medieval city of Brussels.

200 “Notum sit universis quod Johannes, filius Gherelmi, contulit, de consensus domicelle Elyzabet, uxoris sue, hospitali sancti Johannis duo sextaria siliginis, hereditarie et perpetuo annuatim recipienda ad Nativitatem beatissimi Johannis Baptiste ad partem suam, quam ipse habet in molendino dicto Labusmolen, sito apud Ophem, promittendo eidem hospitali inde warandiam…” Cartulaire de l’Hôpital Saint-Jean, SJ 272, pps. 327-328. The original is lost.
CONCLUSION

The high Middle Ages were truly remarkable times. Across the European continent several changes took place. Advancements in farming techniques coupled with a brief warming period ensured successful crops and a well-fed population. Relative peace in the wake of the Viking attacks secured cities and allowed populations to flourish. As cities transitioned from centers of protection to centers of production, trade increased, the merchant class grew, and new social divisions arose. Finally, overall prosperity guaranteed that the arts and religion could flourish: Arabic texts flowed into the West, Roman and Greek thought were recovered, and canon law was introduced.

In the wake of what can roughly be defined as the “twelfth-century renaissance,” other social and religious changes occurred. The most prevalent of these innovations was a rethinking of Christian perceptions regarding the poor and sick. No longer was it OK to allow only religious institutions to care for Christ’s poor. Instead, the lay spiritual movement spurred individuals to care for their neighbors. The rise of brotherly concern for the poor was augmented by the ascent of the profit economy. Newly freed-up cash and rents, in addition to the creation of a new merchant class, allowed men and women traditionally not included in the nobility to give gifts to religious institutions for the care of the sick and the poor.

While all these evolutions were apparent throughout Europe, nowhere was it more evident than at Saint John’s hospital in Brussels. Born in the mid-late twelfth century, Saint John’s exhibited many of the changes that the rest of medieval society was undergoing. Saint John’s, however, was unusual in this transition. Throughout its
history the hospital, in addition to the expected participants, had several generous 
patrons, lay and religious.

Nearly every level of the religious hierarchy was involved with the hospital. The 
local bishops of Cambrai aided in the creation of the hospital by granting the institution 
its statutes. They also participated by enacting privileges, securing the hospital a chapel, 
and protecting the hospital during times of trouble. In addition, nearly all the popes of 
the twelfth and thirteenth centuries were also involved and concerned with the hospital of 
Saint John. Each one granted or renewed privileges—from exempting holdings, 
protecting lands and buildings, to allowing for a priest and cemetery and permitting the 
hospital to stay open during times of interdict—and each pope assured the success of the 
hospital as a Christian institution. Their achievements were so successful that one might 
even argue that the hospital of Saint John and its patrons and administrators provided an 
effective response to charity. Although not centralized per se, the hospital system of the 
high Middle Ages and its associated members seemed to combat poverty and illness to 
the best of its abilities.

Finally, members of local religious community were concerned with the hospital 
of Saint John. Even from its earliest history, local monasteries and other religious 
organizations granted lands and privileges to the institution. This unusual income from 
outside religious figures insured the future success of the hospital, and created a 
“geography of charity” from which religious patronage can be traced. From near and far, 
various religious organizations all added to the growing domain of the hospital: beguines,
Dominicans, Franciscans, Premonstratenians, abbots, priests, clerics, and many, many more appeared in the hospital’s documents to secure its future success.

In addition to the expanse of religious patrons, Saint John’s had several generous lay patrons. From the duke of Brabant down through the local townspeople, nearly every level in the social hierarchy in Brussels was represented in the hospital’s documents. One of the greatest participants was the Duke of Brabant, Henry I, who throughout his life granted several privileges to the hospital and may have even aided in the renaming of the institution.

While Henry’s role in the hospital’s affairs was significant, they were not without parallel. Indeed, beyond Duke Henry I several mid-level knights also aided in the growth and development of the hospital, suggesting that while Henry I has been credited with the overall success of the institution, other participants need to be examined. Knights, such as Guillaume of Ledebergh, Arnoul of Meysse, and Gautier of Aa, all made significant contributions to the hospital. Their donations were as noteworthy as a hospital chapel and as minimal as a small land donation. Regardless of size or importance, all the donations by the mid-level nobles signaled a rise of the profit economy and new opportunities for men and women traditionally not part of the nobility. Their donations to Saint John’s hospital were indicative of those changes.

Other significant social advances also appeared within Saint John’s documentation. New opportunities for women, both in conjunction with their husbands, fathers, brothers, and guardians, and alone, arose in the twelfth and thirteenth centuries. This trend was best exhibited in the hospital of Saint John, which had throughout its
twelfth- and thirteenth-century history several grants and donations by women across the social spectrum. Indeed, nearly twenty-five percent of the extant charters in the hospital’s collection involved women. The number does not even account for the many women religious who were prevalent in the hospital’s affairs. Several hospital mistresses ensured the growth of the hospital via their involvement in specific land transfers. In addition, the local beguines were also prevalent in the hospital’s relations.

One also cannot forget the several mid- to low-level lay patrons who served administrative roles in addition to those who made donations to the hospital. The hospital of Saint John was fortunate in that its original foundation occurred thanks to a combined effort by the townspeople, including the local burgher class. The burgher class went on to become some of the staunchest supporters of the hospital. They ran the hospital by providing lay and administrative support, they composed documents, and they provided their services as witnesses to the many charters that enlarged the hospital’s holdings. Many of the lay participants served as town aldermen, hospital provisors, hospital *mambours*, and hospital representatives. Their position in town affairs allowed them to better aid the hospital in its growth, and their position in the hospital created a link between them and their family members, many of whom would go on to provide their own donations to the hospital.

Finally, the local townsmen, tradesmen, and craftsmen all appeared in the hospital documents. From the butcher and baker to the blacksmith, farmer, fisherman and more, nearly every social occupation was represented in the institution’s charters. Many of the men and their families gave generously to the hospital. Some appeared simply for legal
reasons, while others, in addition to the name of items and landmarks important to their trade, such as rivers, mills, and walls, served as a reminder of the variegated town life that flourished in the twelfth and thirteenth centuries.

Although part of a system of donations to one hospital in the Low Countries, the patrons of the hospital of Saint John in Brussels proved to be representative of an entire European population. Their contributions, actions, and involvement all spoke to the changes European society was undergoing in a period of transformation: the twelfth-century renaissance. From turning outward in a communal movement to care for one’s brother, to having money to give to institutions thanks to changes in the economy, being more free to give as a woman to those organizations of choice, and acting in familial solidarity, the patrons of the hospital of Saint John show us how as historians we can understand life in the Middle Ages by looking to one institution. Subsequently, by examining Saint John’s hospital and the changes of the twelfth and thirteenth centuries, we not only have a better understanding of the periods in question, but also the periods that came before and after. Although a blip on the map of history, the hospital of Saint John in Brussels can no longer be ignored.
Map 1: Medieval Brussels

From Terlinden, “Bruxelles, place de guerre,” 141.
Adapted from de Moreau, Supp. I: Cartes, Carte II. The smallest circle on the map represents many of the areas from which donations to Saint John's hospital came early in its history. As the hospital gained more autonomy, the circle was widened as represented by the larger circle. A final circle, not pictured here, would include areas in Germany, Rome, Constantinople, and even Jerusalem. Note, however, that not all the areas mentioned in this chapter appear on this map.
Map 3: The Early Modern Hospital of Saint John³

³ Image courtesy of CPAS. CPAS, SJ 1.
### Chart 1: The Documents

<table>
<thead>
<tr>
<th>Document</th>
<th>Date</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>15 October 1131</td>
<td>Uncertain</td>
</tr>
<tr>
<td>2</td>
<td>14 or 31 October 1186</td>
<td>Roger, the Bishop of Cambrai</td>
</tr>
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<td>3</td>
<td>[1186-1194]</td>
<td>Thierry II, Abbot of Jette</td>
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<td>4</td>
<td>1195</td>
<td>Henry I, Duke of Brabant</td>
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<td>5</td>
<td>14 August 1204</td>
<td>Henry I, Duke of Brabant</td>
</tr>
<tr>
<td>6</td>
<td>3 August 1207</td>
<td>Pope Innocent III</td>
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<td>7</td>
<td>January 1209</td>
<td>Godfrey, Lord (châtelain) of Brussels</td>
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<td>Gualterus, Priest of the Forest</td>
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<td>Robert, Abbot of Afflighem</td>
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<td>October 1211</td>
<td>Jean III, Bishop of Cambrai</td>
</tr>
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<td>11</td>
<td>29 April 1216</td>
<td>Lionnet I, Lord (châtelain) of Brussels</td>
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<td>12</td>
<td>28 October 1218</td>
<td>Pope Honorius III</td>
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<td>13</td>
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<td>Pope Honorius III</td>
</tr>
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<td>14</td>
<td>[7-30] April 1219</td>
<td>Jean III, Bishop of Cambrai</td>
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<td>15 June 1220</td>
<td>Godfrey, Bishop of Cambrai</td>
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<td>Gautier, Lord (seigneur) of Aa</td>
</tr>
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<td>18</td>
<td>3 September 1220</td>
<td>Sir Arnoul of Meyssse</td>
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<tr>
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<td>September 1220</td>
<td>Sir Arnoul of Meyssse</td>
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<td>Henry Pau</td>
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<td>22</td>
<td>Before 1 August 1224</td>
<td>Guillaume, brother of the Duke of Brabant</td>
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<td>Godfrey, Bishop of Cambrai</td>
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<td>Henry I, Duke of Brabant</td>
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<td>25</td>
<td>2 December 1225</td>
<td>Pope Honorius III</td>
</tr>
<tr>
<td>26</td>
<td>July 1226</td>
<td>Oston III, Lord (seigneur) of Trazegnies</td>
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<td>27</td>
<td>July 1226</td>
<td>Englebert II, Lord \textit{(seigneur)} of Enghien; Lionnet I, Lord \textit{(châtelain)} of Brussels; and Arnoul II, Lord \textit{(seigneur)} of Wesemael</td>
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<td>August 1226</td>
<td>Raoul, Abbot of Ninove and the monastery chapter</td>
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<td>Gautier of Braine, Canon of Notre Dame of Cambrai and former Dean of Hal</td>
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<td>9 May 1227</td>
<td>Guillaume of Ledebergh and his oldest son, Gilles</td>
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<td>Guatier, Lord \textit{(seigneur)} of Aa</td>
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<td>Arnoul of Meyesse, knight \textit{(chevalier)}</td>
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<td>October 1227</td>
<td>Guillaume of Grimbergh, Lord \textit{(seigneur)} of Assche and his wife Isabeau</td>
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<td>Henry I, Duke of Brabant</td>
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<td>Conrad, Abbot of Premonstratensians and the General Council of Abbots of his order</td>
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<td>July 1230</td>
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<td>Arnoul, the brother of Gautier, Lord \textit{(seigneur)} of Aa</td>
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<td>1231</td>
<td>Guillaume</td>
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<td>40</td>
<td>[11-30] April 1232</td>
<td>Gautier, Lord \textit{(seigneur)} of Aa and his son Arnoul</td>
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<td>9 June 1232</td>
<td>Pope Gregory IX</td>
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<td>42</td>
<td>July 1233</td>
<td>Gautier, Lord \textit{(seigneur)} of Aa and his son Arnoul</td>
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<td>13 September 1233</td>
<td>Lionnet I, Lord \textit{(châtelain)} of Brussels</td>
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<td>44</td>
<td>1233</td>
<td>Guillaume of Tubize</td>
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<td>45</td>
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<td>Guillaume of Tubize</td>
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<td>46</td>
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<td>Adam of Hal</td>
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<td>47</td>
<td>1234</td>
<td>Wiliarde, widow of Jean Coude of Obbrussel</td>
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<td>48</td>
<td>[23-30 April 1234 or [1-7] April 1235</td>
<td>Gérard Hacca, Knight \textit{(chevalier)} of Axpoel under Sempst, his wife,</td>
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<td>Bernard of Ledebergh, knight (chevalier)</td>
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<td>Henry, legitimate heir of Alix, widow of Henry, son of Jean Helde</td>
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<td>68</td>
<td>May 1247</td>
<td>Oston IV of Trazegnies, Lord (seigneur) of Braine-le-Château</td>
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<td>69</td>
<td>June 1247</td>
<td>Godfrey, Lord (seigneur) of Perwez and of Grimbergh and his wife Alix</td>
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<td>Siger Penant and Godfrey, son of his brother [the former’s?] brother Arnoul</td>
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<td>Henry of Groelst</td>
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<td>The Deans of the Chapter of Sainte-Gudule</td>
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<td>75</td>
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<td>Maxim of the Arbitrators <em>(Sentence des arbitres)</em></td>
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<td>The Abbot of the Monastery of Gremberge</td>
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<td>Gertrude, widow of Arnoul of Ameke</td>
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<td>16 March 1250</td>
<td>Hugues, Lord <em>(seigneur)</em> of Saintes</td>
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<td>Godfrey of Louvain, Lord <em>(seigneur)</em> of Leeuw-Saint-Pierre and his wife, Marie</td>
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<td>80</td>
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<td>Woytin Winne and his children</td>
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<td>May 1250</td>
<td>Gautier Couhaar, blacksmith, and his wife, Ode</td>
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<td>The men of Hugues, Lord <em>(seigneur)</em> of Saintes</td>
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<td>Mathilde, granddaughter of Lionnet I, Lord <em>(châtelain)</em> of Brussels</td>
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<td>11 June 1253</td>
<td>The Abbess of the Convent of Forest</td>
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<td>85</td>
<td>7 July 1253</td>
<td>An accord between the Abbot of the Monastery of Saint Sepulcure of Cambrai, the patron of the Church of Notre Dame of Chapelle, and the presbytery of that church</td>
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<td>86</td>
<td>18 November 1253</td>
<td>Mabilie, widow of Thierry Balle</td>
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<td>1253 [After 24 June]</td>
<td>Gilles of Pepinghen</td>
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<td>88</td>
<td>5 April 1254</td>
<td>Lionnet I, Lord <em>(châtelain)</em> of Brussels, Lionnet, his son, and Mathilde, daughter of the latter</td>
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<td>Pierre Capocci, Cardinal Legate</td>
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<td>Marie, widow of Godfrey of Louvain, and Henry of Louvain, his son</td>
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<td>Gérard, Presbytery of Audenaeken</td>
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<td>5 September 1257</td>
<td>The Canons of Meerbeek</td>
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<td>101</td>
<td>December 1257</td>
<td>Jean Gortesac</td>
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<td>102</td>
<td>[1250-1257]</td>
<td>Godfrey, Lord (seigneur) of Perwez and of Grimberghe</td>
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<td>103</td>
<td>February 1258</td>
<td>Lambert Minutor</td>
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<td>104</td>
<td>August 1258</td>
<td>Henry Stolten, Clerk</td>
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<td>105</td>
<td>12 February 1259</td>
<td>Michael of Hal, Priest of Gysegem</td>
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<td>30 April 1259</td>
<td>Machaire d’Esschene, knight (chevalier)</td>
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<td>107</td>
<td>21 February 1260</td>
<td>Marguerite and Gertrude to their presbytery</td>
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<td>108</td>
<td>June 1260</td>
<td>Sentence arbitration attributed to the hospital of Saint John</td>
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<td>4 February 1261</td>
<td>Gérard, Pércepteur of the Order of the Templars in Brabant and in Hesbaye</td>
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<td>110</td>
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<td>Thomas Scepmn of Scipburg of Brussels</td>
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<tr>
<td>111</td>
<td>1262, Before 24 June</td>
<td>Sentence arbitration between the hospital of Saint John and Ideloïe, widow of Godfrey of Onin</td>
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<tr>
<td>112</td>
<td>June 1262</td>
<td>The hospital of Saint John and Gertrude Schali</td>
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<td>113</td>
<td>1-23 June 1263</td>
<td>Henry of Bigard of Capelle-Saint-Ulric</td>
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<td>114</td>
<td>August 1263</td>
<td>Godescalc, Abbot of Jette</td>
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<td>115</td>
<td>August 1263</td>
<td>Godescalc, Abbot of Jette</td>
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<td>116</td>
<td>2-23 December 1263</td>
<td>Henry of Bigard of Capelle-Saint-Ulric</td>
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<td>117</td>
<td>March 1264</td>
<td>Gilles Blijsman</td>
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<td>118</td>
<td>May 1264</td>
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<td>119</td>
<td>August 1264</td>
<td>Henry Weert</td>
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<td>120</td>
<td>24 December 1264</td>
<td>Jean of Bigard</td>
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<td>121</td>
<td>August 1265</td>
<td>Marguerite of Hoeylaert</td>
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<td>122</td>
<td>October 1265</td>
<td>Arnoul Halve Elle</td>
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<td>Date</td>
<td>Event Description</td>
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<tr>
<td>October 1265</td>
<td>Arnoul, son of Heineman Aubert</td>
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<td>10 June 1266</td>
<td>Gertrude Schalie</td>
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<tr>
<td>1266, After August</td>
<td>Hedwige, son of Francon van der Maerct</td>
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<tr>
<td>3 December 1266</td>
<td>Arnoul, knight, Lord (<em>chevalier</em> and <em>seigneur</em>) of Crainhem</td>
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<tr>
<td>January 1267</td>
<td>Henry Fortis of Erps</td>
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<td>January 1267</td>
<td>Henry Fortis of Erps</td>
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<td>January 1267</td>
<td>Lambert of Schoonaarden</td>
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<td>Lambert of Schoonaarden</td>
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<td>February 1267</td>
<td>Pierre of Erps</td>
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<td>March 1267</td>
<td>Lambert of Schoonaarden</td>
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<tr>
<td>[8-30] April 1268</td>
<td>Simon vander Ingherstraten</td>
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<td>[8-30] April 1268</td>
<td>Gilles, son-in-law of Jean de Nosseghem</td>
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<td>31 May 1268</td>
<td>Henry, Bishop of Chiemsee</td>
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<td>July 1268</td>
<td>Gertrude Schalie</td>
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<td>The hospital of Saint John</td>
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<td>November 1268</td>
<td>Clémence of Luxum</td>
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<td>24 September 1269</td>
<td>The hospital of Saint John</td>
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<td>January 1270</td>
<td>Guillaume Mersman of Melsbroeck</td>
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<td>February 1270</td>
<td>Lionnet Bursere</td>
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<td>[13-30] April 1270</td>
<td>Jean of Wyckhuyzen, Nicholas of Haecht and his sisters Tusienne, Marguerite, Catherine, and Ide</td>
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<td>24 October 1270</td>
<td>Ode, widow of Arnoul of Bruke</td>
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<td>29 December 1270</td>
<td>Catherine, widow of Gautier Vorloep and daughter of Gérard Rufus of Biest</td>
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<td>December 1270</td>
<td>Henry Loepre of Louvain</td>
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<td>Gautier, son of Henry of Capelle-Saint-Ulric</td>
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<td>Henry of Wanghe, Cleric</td>
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<td>3 December 1271</td>
<td>Jean Pipenpoy, Dean of Sainte-Gudule of Brussels</td>
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<td>January 1272</td>
<td>Gilles Penant</td>
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<td>January 1272</td>
<td>Basilie, daughter of the late Gérard Wert</td>
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<td>Arnoul Loschart</td>
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<td>152</td>
<td>March 1272</td>
<td>Basilie, daughter of the late Gérard Wert</td>
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<td>153</td>
<td>July 1272</td>
<td>Eggeric of Sterrebeek</td>
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<td>154</td>
<td>20 November 1272</td>
<td>The Deans of the Chapter of Sainte-Gudule</td>
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<td>155</td>
<td>24 November 1272</td>
<td>Henry of Beersel, Priest</td>
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<td>156</td>
<td>January 1273</td>
<td>Gertrude Schalie</td>
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<td>157</td>
<td>26 January 1274</td>
<td>Pope Gregory X</td>
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<td>158</td>
<td>28 January 1274</td>
<td>Pope Gregory X</td>
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<td>159</td>
<td>11 April 1274</td>
<td>Alard, Abbot of Parc, Delegate of Saint-Siège</td>
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<td>160</td>
<td>May 1274</td>
<td>Jean, son of Gerelm, Guillaume of Pille and his mother Alix</td>
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<td>161</td>
<td>2 August 1274</td>
<td>Wibaud of Sarts, Archdeacon of Cambrai at Brussels</td>
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<td>162</td>
<td>8 August 1274</td>
<td>The Deans of the Chapter of Sainte-Gudule and the Chaplain of the church of Saint John, and the Mistress of the Community of the hospital of Saint John</td>
</tr>
<tr>
<td>163</td>
<td>August 1274</td>
<td>The Deans of the Chapter of Sainte-Gudule and the Chaplain of the church of Saint John, and the Mistress of the Community of the hospital of Saint John</td>
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<td>164</td>
<td>November 1274</td>
<td>Arnoul van der Noot</td>
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<td>165</td>
<td>December 1274</td>
<td>Hedwige van der Maerct, a Beguine</td>
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<td>166</td>
<td>January 1275</td>
<td>Guillaume</td>
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<td>167</td>
<td>March 1275</td>
<td>The Infirmary of the Beguinage of the Virgin</td>
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<td>168</td>
<td>30 August 1276</td>
<td>Henry Prochiaen and his wife Ide</td>
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<td>169</td>
<td>[1-30] November 1276</td>
<td>Henry, Abbot of Afflighem and his monastery</td>
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<td>30 November 1276</td>
<td>Henry, Abbot of Afflighem and his monastery</td>
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<td>171</td>
<td>February 1277</td>
<td>Gosuin of Moortebeek</td>
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<td>172</td>
<td>25 March 1277</td>
<td>Gautier of Bodeghem, knight (chevalier)</td>
</tr>
<tr>
<td>174</td>
<td>[1-27] March 1277 (ibid.)</td>
<td>Guillaume II, Lord (seigneur) of</td>
</tr>
<tr>
<td>Date</td>
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<tr>
<td>5 April 1277</td>
<td>The Mistress, the Brothers and Sisters of the hospital of Saint John and the Temporal Headmasters</td>
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<tr>
<td>9 April 1277</td>
<td>Pope John XXI</td>
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<td>April 1277</td>
<td>The hospital of Saint John and the Teraken Foundation</td>
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<tr>
<td>10 June 1277</td>
<td>Ide, wife (<em>dame</em>) of Dongelberg</td>
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<td>10 June 1277</td>
<td>Gautier of Bodeghem, knight (<em>chevalier</em>)</td>
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<td>11 June 1277</td>
<td>Gautier of Bodeghem, knight (<em>chevalier</em>)</td>
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<td>23 June 1277</td>
<td>Gautier of Bodeghem, knight (<em>chevalier</em>)</td>
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<tr>
<td>30 September 1277</td>
<td>Enguerrand II, Bishop of Cambrai</td>
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<td>October 1277</td>
<td>Elisabeth, daughter of Englebert, son of Everwin Vos, Knight (<em>chevalier</em>)</td>
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<td>June 1278</td>
<td>Hugues of Bierghes</td>
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<td>4 December 1278</td>
<td>Bernard van der Scipbrug</td>
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<td>18 October 1279</td>
<td>Eustache of Rus, baker</td>
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<td>October 1279</td>
<td>Ide Scattinne, beguine</td>
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<tr>
<td>January 1280</td>
<td>Jean of Bovenberg</td>
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<td>22 November 1280</td>
<td>Gautier de Leeuw</td>
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<td>February 1281</td>
<td>Jean of Laeken</td>
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<td>2 April 1281</td>
<td>Michael de Leeuw</td>
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<td>7 June 1281</td>
<td>Gautier of Bodeghem, knight (<em>chevalier</em>)</td>
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<tr>
<td>1 September 1281</td>
<td>The Abbot of the monastery of Ninove</td>
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<td>3 September 1281</td>
<td>The monastery of Ninove</td>
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<tr>
<td>15 March 1282</td>
<td>Jean Dumeken, Arnoul of Cortenberg and Gautier, son of Hugues</td>
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<td>19 April 1282</td>
<td>The Abbot and the monastery of Ninove</td>
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<tr>
<td>January 1283</td>
<td>Ivain of Molenbeek and his brothers, David and Nicholas</td>
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<td>2 February 1283</td>
<td>Ivain of Molenbeek</td>
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<td>199</td>
<td>19 February 1283</td>
<td>Godfrey of Wouweringen, Jean, his son, Olivier of Essele, Jean Ardenake and Gossuin, his brother</td>
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<td>200</td>
<td>4 February 1284</td>
<td>Guillaume Clabot</td>
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<td>201</td>
<td>February 1284</td>
<td>The hospital of Saint John</td>
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<td>202</td>
<td>16 October 1284</td>
<td>Elisabeth, daughter of Henry van den Spiegele and Arnoul, her husband</td>
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<td>203</td>
<td>18 September 1285</td>
<td>Gertrude Schalie</td>
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<td>204</td>
<td>May 1286</td>
<td>Catherine, daughter of Siger of Saint-Géry</td>
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<td>205</td>
<td>20 June 1287</td>
<td>Henry Meyer of Assche</td>
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<td>206</td>
<td>June 1287</td>
<td>Gilles Berthout, Knight (chevalier), Lord (seigneur) of Humbeek and of Droogenbosch</td>
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<td>207</td>
<td>4 April 1288</td>
<td>Marie, daughter of Francon Rolibuc</td>
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<td>208</td>
<td>3 January 1289</td>
<td>Gautier De Leeuw and Marguerite, widow of Gautier Labus</td>
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<td>209</td>
<td>18 February 1289</td>
<td>Marguerite of Witbroech</td>
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<td>210</td>
<td>11 July 1289</td>
<td>Alix of Helbeke</td>
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<td>211</td>
<td>22 July 1289</td>
<td>Pierre Keiser</td>
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<td>212</td>
<td>24 July 1289</td>
<td>Marie Dribodinne</td>
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<td>213</td>
<td>Around 11 November 1289</td>
<td>Jean of Pede</td>
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<td>214</td>
<td>12 November 1289</td>
<td>Jean of Pede and Lionnet of Aa, Knight (chevalier)</td>
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<td>215</td>
<td>4 January 1290</td>
<td>Jean of Louvain, son of the late Jean of Louvain</td>
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<td>216</td>
<td>4 January 1290</td>
<td>Elizabeth, daughter of the late Jean of Louvain, and Godfrey of Mont-Saint-Pont, her guardian</td>
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<tr>
<td>217</td>
<td>January 1290</td>
<td>Jean, Presbytery of Laeken</td>
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<td>218</td>
<td>12 May 1290</td>
<td>Gilles, Pierre and Gautier of Alsinghen</td>
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<td>219</td>
<td>16 June 1290</td>
<td>Elisabeth, widow of Henry Malremans and her daughter Catherine</td>
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<td>220</td>
<td>18 August 1290</td>
<td>Godfrey of Eysinghen</td>
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<td>221</td>
<td>16 December 1290</td>
<td>Pierre Mouwe of Sterrebeek</td>
</tr>
<tr>
<td>Date</td>
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<td>Description</td>
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<tr>
<td>4 March 1291</td>
<td>Jean, Francon, Gilles, Arnoul and Michel, sons of Henry son of Geldolf</td>
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<td>8 March 1291</td>
<td></td>
<td>Adam of Pede</td>
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<tr>
<td>23 March 1291</td>
<td></td>
<td>Catherine, Elisabeth and Alix of Alsemberg</td>
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<tr>
<td>1-21 April 1291</td>
<td></td>
<td>Jean Loschart</td>
</tr>
<tr>
<td>4 May 1291</td>
<td></td>
<td>The hospital of Saint John</td>
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<tr>
<td>21 June 1291</td>
<td></td>
<td>Catherine, daughter of the late Gautier Mennens, and her guardian Nicholas</td>
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<td>1 January 1292</td>
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<td>Guillaume Robijn</td>
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<td>12 April 1293</td>
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<td>Lady (demoiselle) Anskine, daughter of Sir Étienne of Helbeke</td>
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<td>17 November 1293</td>
<td></td>
<td>Gilles Blijsman and Gautier, Pries, his son</td>
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<td>December 1293</td>
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<td>The Headmasters of the Table of the Poor of Laeken</td>
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<tr>
<td>7 March 1294</td>
<td></td>
<td>The children of Henry Monterkens, Jean, Hedwige and Elisabeth</td>
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<td>29 March 1294</td>
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<td>Hedwige, daughter of Arnoul van der Steen</td>
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<td>September 1294</td>
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<td>The monastery of the hospital of Saint John and the Chapellenie</td>
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<tr>
<td>September 1294</td>
<td></td>
<td>Siger Labus</td>
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<td>9 October 1294</td>
<td></td>
<td>Godfrey II, Count of Vianden and Lord (seigneur) of Grimbergh, and his eldest son</td>
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<tr>
<td>1 February 1295</td>
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<td>Marguerite Proefinne</td>
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<td>5 September 1295</td>
<td></td>
<td>Alix, widow of Gilles Brassator</td>
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<tr>
<td>16 March 1296</td>
<td></td>
<td>Judgment of the Episcopal Court of Cambrai</td>
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<tr>
<td>June 1296</td>
<td></td>
<td>Francon Boyken</td>
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<tr>
<td>18 July 1296</td>
<td></td>
<td>Catherine and Ide, sisters of Godescalc of Breedhout</td>
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<tr>
<td>5 October 1296</td>
<td></td>
<td>Henry of Linkebeek, Priest</td>
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<tr>
<td>23 November 1296</td>
<td></td>
<td>Jean Koukaert, Priest</td>
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<td>December 1296</td>
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<td>Henry, son of the late Gossuin of Anderlecht</td>
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<td>4 April 1297</td>
<td></td>
<td>Godfrey Monart and his brother Henry</td>
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<td>246</td>
<td>6 August 1297</td>
<td>Clémence, widow of Jean of Coudenberg</td>
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<td>248</td>
<td>27 January 1298</td>
<td>André of Lennick-Saint-Quentin, son of Henry Wert</td>
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<td>249</td>
<td>15 February 1298</td>
<td>Marguerite, wife of Régnier Eggloey, assisted by her husband</td>
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<td>250</td>
<td>8 April 1298</td>
<td>Gui II, Bishop of Cambrai</td>
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<td>251</td>
<td>28 May 1298</td>
<td>Frédéric of Audenarde</td>
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<td>252</td>
<td>June 1298 [Before the 24th]</td>
<td>The hospital of Saint John</td>
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<td>253</td>
<td>June 1298 [Before the 24th]</td>
<td>Laurent of Uccle and his wife Clarisse</td>
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<td>254</td>
<td>June 1298 [Before the 24th]</td>
<td>Gysellin of Audegem and his wife Maarguerite, sister of the late Jean Poluwe</td>
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<td>255</td>
<td>27 January 1299</td>
<td>Henry of Strata</td>
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<td>256</td>
<td>16 February 1299</td>
<td>Marguerite, widow of Jean of Grawe</td>
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<td>257</td>
<td>February 1299</td>
<td>The hospital of Saint John</td>
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<td>258</td>
<td>28 March 1299</td>
<td>Amauri of Quercu, perpetual Chaplain of the Church of Saint John</td>
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<td>259</td>
<td>6 April 1299</td>
<td>Gertrude Scalie</td>
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<td>260</td>
<td>22 April 1299</td>
<td>Gertrude of Bonne</td>
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<td>261</td>
<td>May 1299</td>
<td>Gertrude of Bonne</td>
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<td>262</td>
<td>June 1299</td>
<td>The hospital of Saint John</td>
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<tr>
<td>263</td>
<td>21 July 1299</td>
<td>Marguerite of Uccle, Beguine</td>
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<td>264</td>
<td>October 1299</td>
<td>Arnould of Beernem of Erps</td>
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<tr>
<td>265</td>
<td>29 November 1299</td>
<td>Alix, Priest, and the Monastery of Val-Duchesse</td>
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<td>266</td>
<td>20 December 1299</td>
<td>Jean Slabbart, son of Thomas van</td>
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<td>der Bossche</td>
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<td>267</td>
<td>1299</td>
<td>Henry of <em>Strata</em>, of Erps</td>
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<tr>
<td>268</td>
<td>24 January 1300</td>
<td>Marguerite, daughter of Guillaume Munters</td>
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<tr>
<td>269</td>
<td>January 1300</td>
<td>Jean II, Duke of Brabant</td>
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<tr>
<td>270</td>
<td>February 1300</td>
<td>The hospital of Saint John</td>
</tr>
<tr>
<td>271</td>
<td>25 March 1300</td>
<td>Gui II, Bishop of Cambrai</td>
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<tr>
<td>272</td>
<td>May 1300</td>
<td>Jean, son of Gerelm, by the consent of his wife Elisabeth</td>
</tr>
<tr>
<td>273</td>
<td>June 1300</td>
<td>Jean, Presbyter of Leerbeek</td>
</tr>
<tr>
<td>274</td>
<td>8 July 1300</td>
<td>Pierre, son of the knight (<em>chevalier</em>) Hugues of Bierghes</td>
</tr>
<tr>
<td>275</td>
<td>25 July 1300</td>
<td>Francon of Papinghem</td>
</tr>
<tr>
<td>276</td>
<td>10 September 1300</td>
<td>Gui II, Bishop of Cambrai</td>
</tr>
<tr>
<td>277</td>
<td>7 October 1300</td>
<td>Lionnet van den Bossche</td>
</tr>
<tr>
<td>278</td>
<td>19 December 1300</td>
<td>Marie of Saint-Trond and her husband Jean, son of Amauri of <em>Muro</em></td>
</tr>
</tbody>
</table>
### Chart 2: Knights Involved with the Hospital of Saint John

<table>
<thead>
<tr>
<th>Knights</th>
<th>Document Numbers</th>
<th>Date(s)</th>
<th>Association with the hospital according to the documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aa, Gautier II, seigneur d’</td>
<td>11, 17, 27, 31, 36, 37, 40, 42, 166, 196</td>
<td>-</td>
<td>See chapter 5</td>
</tr>
<tr>
<td>Berthout, Gilles</td>
<td>206</td>
<td>June 1287</td>
<td>Gilles renounced profit on a <em>bonnier</em> of a meadow located at Forest.</td>
</tr>
<tr>
<td>Bierghes, Sire Hugues de</td>
<td>184</td>
<td>June 1278</td>
<td>Hugues assigned to the hospital of Saint John 30 <em>livres</em> in charity.</td>
</tr>
<tr>
<td>Bierghes, Pierre</td>
<td>274</td>
<td>8 July 1300</td>
<td>Pierre recognized his father’s donation of 30 <em>livres</em> to the hospital of Saint John. Pierre also promised to provide for the hospital.</td>
</tr>
<tr>
<td>Bodeghem, Gautier de</td>
<td>172, 175, 178, 179, 180, 181, 182, 190, 192</td>
<td>-</td>
<td>See above.</td>
</tr>
<tr>
<td>Braine, les de (Family)</td>
<td>49</td>
<td>October 1236</td>
<td>A member of the Braine family appeared in a charter where the bishop of Cambrai approved the transfer of the chaplaincy of Ledebergh to the hospital of Saint John.</td>
</tr>
<tr>
<td>Coninc, Guillaume de Platea, son of Arnoul de Platea</td>
<td>114, 116, 123, 124, 148, 175, 194, 202, 213</td>
<td>-</td>
<td>See above.</td>
</tr>
<tr>
<td>Name</td>
<td>Page</td>
<td>Date Range</td>
<td>Details</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>------</td>
<td>--------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Crainhem, Arnoul II, seigneur de</td>
<td>126, 137</td>
<td>3 December 1266 and November 1268</td>
<td>Arnoul gave Jean Clauet full power to serve as the representative of a transfer that would be made to the hospital of Saint John and others. In the second, the hospital acquired a <em>bonnier</em> of land from Jean van den Berg. Arnoul II approved the agreement.</td>
</tr>
<tr>
<td>Elighen, Anselme d’</td>
<td>17, 99</td>
<td>July 1220 and September 1256</td>
<td>Anselme served as a witness to a charter where Gautier of Aa placed the hospital of Saint John in possession of one-third of a <em>dîme</em>. He later appeared when the parish priest of Audenaeken, Gérard, gave the hospital of Saint John half of some land. Anselme’s home was named in the charter to pinpoint the location of the land.</td>
</tr>
<tr>
<td>Esschene, Macaire Portere d’</td>
<td>106</td>
<td>30 April 1259</td>
<td>Machaire gave the hospital of Saint John a perpetual rent of a <em>demi-muid</em> of rye.</td>
</tr>
<tr>
<td>Francon, mayor of Gembloux</td>
<td>5</td>
<td>14 August 1204</td>
<td>Francon appeared as a member of the lay community who was “present and concerned” with the donation by Duke Henry I to the poor of the hospital of Saint John.</td>
</tr>
<tr>
<td>Name</td>
<td>Page Ref</td>
<td>Date</td>
<td>Description</td>
</tr>
<tr>
<td>-------------------------------------------</td>
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<td>------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Hacca, Gérard, and his son Gérard</td>
<td>48, 71</td>
<td>23-30 April 1234 or 1-7 April 1235 and October 1247</td>
<td>Gérard and his son Gérard gave an annual and perpetual rent to the hospital of Saint John. Later, one of the two men was present when Siger Penant, Godfrey, and his brother Arnoul renounced all rights to the hospital of Saint John that Siger had on lands and that Godfrey and Arnoul approved. Whether Gérard was present, however, is not clear.</td>
</tr>
<tr>
<td>Hoeylaert, Francon de</td>
<td>5</td>
<td>14 August 1204</td>
<td>Francon appeared as a witness to the donation made by Duke Henry I to the poor of the hospital of Saint John.</td>
</tr>
<tr>
<td>Kerchove, Englebert van den</td>
<td>84, 116</td>
<td>11 June 1253 and 2-23 December 1263</td>
<td>Englebert was mentioned as “present and concerned” with a donation by the granddaughter of Lionnet I and later in the same position in a donation from Henri de Bigard to the hospital of Saint John.</td>
</tr>
<tr>
<td>Koekelberg, Gautier de</td>
<td>178, 179</td>
<td>10 June 1277</td>
<td>Gautier appeared in two agreements concerning the hospital and Gautier de Bodeghem. See chapter 3 for more information.</td>
</tr>
<tr>
<td>Lionnet II, knight and brother of Lionnet I</td>
<td>43, 52, 54, 59, 84, 89</td>
<td>-</td>
<td>See above.</td>
</tr>
<tr>
<td>Lose, Guillaume I, knight and alderman</td>
<td>53, 165, 166</td>
<td>-</td>
<td>See above.</td>
</tr>
<tr>
<td>Name</td>
<td>Page(s)</td>
<td>Date</td>
<td>Event Description</td>
</tr>
<tr>
<td>-------------------------------------------</td>
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<td>-------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Mélin, les de</td>
<td>178</td>
<td>10 June 1277</td>
<td>The Mélin family appeared in an agreement concerning the hospital and Gautier de Bodeghem. See above for more information.</td>
</tr>
<tr>
<td>Overyssche, Arnoul d’</td>
<td>178</td>
<td>10 June 1277</td>
<td>Arnoul appeared in an agreement concerning the hospital and Gautier de Bodeghem. See chapter 3 for more information.</td>
</tr>
<tr>
<td>Ruysbroeck, Gautier de</td>
<td>37</td>
<td>1230</td>
<td>Guatier served as a witness to Arnoul d'Aa's donation to the hospital of Saint John.</td>
</tr>
<tr>
<td>Sterrebeek, Henri II de Mere de, knight and alderman of Uccle</td>
<td>34, 73</td>
<td>1 February 1229 September 1248</td>
<td>Henri II was the notary for the donation by Duke Henri I that placed the monastery of Ninove in possession of 10 <em>bonniers</em> of land. Later he served as a witness to the dispute between the Mistress Ide and Sophie de Coudenberg.</td>
</tr>
<tr>
<td>Tirlemont, Robert de</td>
<td>5</td>
<td>14 August 1204</td>
<td>Tirlemont appeared as a member of the lay community who was “present and concerned” with the donation by Duke Henry I to the poor of the hospital of Saint John.</td>
</tr>
<tr>
<td>Tubize, Guillaume de</td>
<td>44, 45</td>
<td>1233 (both)</td>
<td>Guillaume gave to the hospital in charity an annual and perpetual rent.</td>
</tr>
<tr>
<td>Name</td>
<td>Year</td>
<td>Date</td>
<td>Notes</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>------</td>
<td>-------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------</td>
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<tr>
<td>Udekem, Arnoul d’</td>
<td>5</td>
<td>14 August 1204</td>
<td>Arnoul appeared as a member of the lay community who was “present and concerned” with the donation by Duke Henry I to the poor of the hospital of Saint John.</td>
</tr>
<tr>
<td>Velst, Henri de</td>
<td>57</td>
<td>3 February 1242</td>
<td>Henri gave to the hospital of Saint John and other institutions rents.</td>
</tr>
<tr>
<td>Vos, Everwin I, knight, alderman of Brussels and of Uccle, provisor of the hospital</td>
<td>52, 72, 74, 75, 77, 82, 83, 84, 86, 127, 128, 129, 130, 132, 146, 245</td>
<td>-</td>
<td>See above.</td>
</tr>
<tr>
<td>Walhain, Arnoul V, seigneur de</td>
<td>221</td>
<td>16 December 1290</td>
<td>Arnoul was present and concerned with a sale between Pierre Mouwe de Sterrebeek and Duke Jean I. The lands in the agreement were later sold to the hospital of Saint John.</td>
</tr>
<tr>
<td>Walhain, Oston de, knight and brother of Arnoul V</td>
<td>221</td>
<td>16 December 1290</td>
<td>Oston was present and concerned with a sale between Pierre Mouwe de Sterrebeek and Duke Jean I. The lands in the agreement were later sold to the hospital of Saint John.</td>
</tr>
<tr>
<td>Wemmel, Gautier IV de</td>
<td>89</td>
<td>[20-30] April 1253 or [1-11] April 1254</td>
<td>Gautier was a witness and “present and concerned” with a donation by Lionnet I, Lionnet II, and Mathilde, the granddaughter of Lionnet I, to the hospital of Saint John.</td>
</tr>
<tr>
<td>Name</td>
<td>Page</td>
<td>Date</td>
<td>Details</td>
</tr>
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<td>-----------------------</td>
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</tr>
<tr>
<td>Wemmel, Jacques de</td>
<td>5</td>
<td>14 August 1204</td>
<td>Jacques appeared as a member of the lay community who was “present and concerned” with the donation by Duke Henry I to the poor of the hospital of Saint John.</td>
</tr>
<tr>
<td>Mistresses, Masters, Brothers, and Sisters of the Hospital of Saint John</td>
<td>Document(s) in which they appear</td>
<td>Page Numbers</td>
<td></td>
</tr>
<tr>
<td>---</td>
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<tr>
<td>Baudouin (Me), brother of the hospital of Saint John and curé of Notre-Dame de la Chapelle</td>
<td>74</td>
<td>108</td>
<td></td>
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<tr>
<td>Carpentator, Gerard, brother of the hospital</td>
<td>121, 128, 131, 132, 139-145, 148, 151, 153, 164, 165, 188</td>
<td>164, 171, 172, 175, 176, 183-188, 191, 192, 195, 197, 209, 211, 241</td>
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<tr>
<td>Clémence, sister, lesser mistress of the hospital</td>
<td>141</td>
<td>185</td>
<td></td>
</tr>
<tr>
<td>Élisabeth, mistress of the hospital</td>
<td>156, 179, 180, 187</td>
<td>200, 229, 234, 240</td>
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<td>Franciscans</td>
<td>135</td>
<td>178, 179</td>
<td></td>
</tr>
<tr>
<td>Dominicans</td>
<td>265</td>
<td>320</td>
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<tr>
<td>Godescalc, brother and master of the hospital</td>
<td>249, 251, 253, 254, 259-264, 267, 277</td>
<td>303, 305, 308, 309, 313-319, 322, 332</td>
<td></td>
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<tr>
<td>Hedwige, sister of the hospital</td>
<td>246</td>
<td>298</td>
<td></td>
</tr>
<tr>
<td>Henri de Luetzelburg, brother of the order of the Franciscans</td>
<td>135</td>
<td>178, 179</td>
<td></td>
</tr>
<tr>
<td>Ide, mistress of the hospital</td>
<td>63, 73-75, 86, 102, 118</td>
<td>90, 104, 105, 106, 107, 108, 110, 111, 112, 123, 124, 125, 141, 160</td>
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<tr>
<td>Ide II, mistress of the hospital</td>
<td>146</td>
<td>189</td>
<td></td>
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<tr>
<td>Ludon, master of the hospital</td>
<td>37, 63</td>
<td>61, 90</td>
<td></td>
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<tr>
<td>Maerct, Hedwige van der Maerct, sister of the hospital</td>
<td>124, 125, 165</td>
<td>167, 168, 210, 211</td>
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<tr>
<td>Marguerite, mistress of the hospital</td>
<td>194, 201</td>
<td>247, 248, 254</td>
<td></td>
</tr>
<tr>
<td>Ode, mistress of the hospital</td>
<td>138</td>
<td>182</td>
<td></td>
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<tr>
<td>Pouleke, Ide van, sister of the hospital</td>
<td>180</td>
<td>234</td>
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<tr>
<td>Rodenbeke, Guillaume de, brother and master of the hospital</td>
<td>270, 275, 276</td>
<td>325, 330-332</td>
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<td>Name</td>
<td>Page</td>
<td>Reference</td>
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<tr>
<td>Saccites (brothers), religious community in Brussels</td>
<td>--</td>
<td>XXV</td>
<td></td>
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<tr>
<td>Villers-le-Temple, Gérard de, précepteur of the order of the Templars in Brabant and Hesbaye</td>
<td>109</td>
<td>148-149</td>
<td></td>
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<tr>
<td>Voets, Louise, sister of the hospital</td>
<td>66</td>
<td>93</td>
<td></td>
</tr>
</tbody>
</table>
Chart 4: Religious Figures Involved with the Hospital of Saint John

<table>
<thead>
<tr>
<th>Ecclesiastical Authorities</th>
<th>Number of acts</th>
<th>Documents in which they appear</th>
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<tbody>
<tr>
<td>The Pope</td>
<td>16</td>
<td>6, 12, 13, 25, 38, 41, 50, 51, 64, 65, 66, 67, 96, 158, 176</td>
</tr>
<tr>
<td>The Abbot of Parc</td>
<td>1</td>
<td>159</td>
</tr>
<tr>
<td>A Cardinal Legate</td>
<td>6</td>
<td>90-95</td>
</tr>
<tr>
<td>The Bishops of Cambrai and the Dioceses</td>
<td>13</td>
<td>2, 10, 14, 16, 20, 23, 49, 55, 60, 182, 250, 271, 276</td>
</tr>
<tr>
<td>The Episcopal Court of Cambrai</td>
<td>1</td>
<td>239</td>
</tr>
<tr>
<td>The Canons of Notre-Dame of Cambrai</td>
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<td>29</td>
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<tr>
<td>The Archdeacon of Cambrai of Brussels</td>
<td>3</td>
<td>161, 162, 163</td>
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<td>The Bishops not of the Dioceses of Cambrai</td>
<td>2</td>
<td>135, 247</td>
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<tr>
<td>The Deans of Christendom</td>
<td>3</td>
<td>30, 45, 46</td>
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<td>Secular Chapters and/or their Dignitaries</td>
<td>8</td>
<td>18, 57, 74, 100, 154, 198, 213, 230</td>
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<tr>
<td>The Parish Priests</td>
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<td>86, 105, 153, 184, 273</td>
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<td>The Aldermans Synod of Lennick-Saint-Quentin</td>
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<td>248</td>
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<tr>
<td>The dignitaries of religious orders</td>
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<td>35, 109</td>
</tr>
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<td>The heads of religious houses and/or their communities</td>
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<td>See below</td>
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<td>The Lesser Mistress of the Hospital of Saint John</td>
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<td>74, 86, 118, 168, 175, 177, 201, 257, 261, 270</td>
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<td>The Chaplain of the Hospital of Saint John</td>
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<td>77</td>
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<td>The Parish Priest and the Mistress of the Infirmary of the Beguniage of Brussels</td>
<td>2</td>
<td>167, 183</td>
</tr>
<tr>
<td>The clerics chosen from arbiters</td>
<td>2</td>
<td>75, 108</td>
</tr>
<tr>
<td>The Heads of Religious Houses and/or their Communities</td>
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<tr>
<td>Afflighem</td>
<td>3</td>
<td>9, 56, 170</td>
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<tr>
<td>Forest</td>
<td>2</td>
<td>8, 85</td>
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<tr>
<td>Grimberghge</td>
<td>1</td>
<td>76</td>
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<tr>
<td>Jette</td>
<td>2</td>
<td>3, 115</td>
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<td>La Cambre</td>
<td>1</td>
<td>262</td>
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<td>Ninove</td>
<td>4</td>
<td>28, 39, 193, 196</td>
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<td>Saint-Sépulcre of Cambrai</td>
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<th>Val-Duchesse</th>
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481
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<th>Principal Persons/Institutions Involved</th>
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<tr>
<td>SJ 1</td>
<td>15 October 1131</td>
<td>Uncertain</td>
</tr>
<tr>
<td>SJ 2</td>
<td>14 or 31 October 1186</td>
<td>Roger, the Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 3</td>
<td>[1186-1194]</td>
<td>Thierry II, Abbot of Jette</td>
</tr>
<tr>
<td>SJ 4</td>
<td>1195</td>
<td>Henry I, Duke of Brabant</td>
</tr>
<tr>
<td>SJ 6</td>
<td>3 August 1207</td>
<td>Pope Innocent III</td>
</tr>
<tr>
<td>SJ 8</td>
<td>June 1210</td>
<td>Gualterus, Priest of the Forest</td>
</tr>
<tr>
<td>SJ 9</td>
<td>June 1210</td>
<td>Robert, Abbot of Afflighem</td>
</tr>
<tr>
<td>SJ 10</td>
<td>October 1211</td>
<td>Jean III, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 11</td>
<td>29 April 1216</td>
<td>Lionnet I, Lord (châtelain) of Brussels</td>
</tr>
<tr>
<td>SJ 12</td>
<td>28 October 1218</td>
<td>Pope Honorius III</td>
</tr>
<tr>
<td>SJ 13</td>
<td>27 April 1219</td>
<td>Pope Honorius III</td>
</tr>
<tr>
<td>SJ 14</td>
<td>[7-30] April 1219</td>
<td>Jean III, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 16</td>
<td>15 June 1220</td>
<td>Godfrey, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 20</td>
<td>1220</td>
<td>Godfrey, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 23</td>
<td>27 January 1225</td>
<td>Godfrey, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 25</td>
<td>2 December 1225</td>
<td>Pope Honorius III</td>
</tr>
<tr>
<td>SJ 28</td>
<td>August 1226</td>
<td>Raoul, Abbot of Ninove and the monastery chapter</td>
</tr>
<tr>
<td>SJ 29</td>
<td>21 December 1226</td>
<td>Gautier of Braine, Canon of Notre Dame of Cambrai and former Dean of Hal</td>
</tr>
<tr>
<td>SJ 35</td>
<td>11 October 1229</td>
<td>Conrad, Abbot of Prémontré and the Genearl Council of Abbots of his order</td>
</tr>
<tr>
<td>SJ 38</td>
<td>21 February 1231</td>
<td>Pope Gregory IX</td>
</tr>
<tr>
<td>SJ 41</td>
<td>9 June 1232</td>
<td>Pope Gregory IX</td>
</tr>
<tr>
<td>SJ 50</td>
<td>21 May 1237</td>
<td>Pope Gregory IX</td>
</tr>
<tr>
<td>SJ 51</td>
<td>22 May 1237</td>
<td>Pope Gregory IX</td>
</tr>
<tr>
<td>SJ 55</td>
<td>22 December 1240</td>
<td>Gui I, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 56</td>
<td>10 October 1241</td>
<td>Guillaume, Abbot of Afflighem</td>
</tr>
<tr>
<td>SJ 60</td>
<td>17 September 1242</td>
<td>Gui I, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 64</td>
<td>13 August 1245</td>
<td>Pope Innocent IV</td>
</tr>
<tr>
<td>SJ 65</td>
<td>16 October 1246</td>
<td>Pope Innocent IV</td>
</tr>
<tr>
<td>SJ 66</td>
<td>4 December 1246</td>
<td>Pope Innocent IV</td>
</tr>
<tr>
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</tr>
<tr>
<td>SJ 67</td>
<td>21 March 1247</td>
<td>Pope Innocent IV</td>
</tr>
<tr>
<td>SJ 73</td>
<td>September 1248</td>
<td>Ide, Mistress (<em>maîtresse</em>) of the hospital of Saint John</td>
</tr>
<tr>
<td>SJ 74</td>
<td>6 July 1249</td>
<td>The Deans of the Chapter of Sainte-Gudule</td>
</tr>
<tr>
<td>SJ 75</td>
<td>9 August 1249</td>
<td>Maxim of the Arbitrators (<em>Sentence des arbitres</em>)</td>
</tr>
<tr>
<td>SJ 76</td>
<td>August 1249</td>
<td>The Abbot of the Monastery of Gremerghe</td>
</tr>
<tr>
<td>SJ 86</td>
<td>18 November 1253</td>
<td>An Accord between the Abbot of the Monastery of Saint Sepulcure of Cambrai, the Paron of the Church of Notre Dame of Chapelle, and the presbytery of that church</td>
</tr>
<tr>
<td>SJ 90</td>
<td>25 August 1254</td>
<td>Pierre Capocci, Cardinal Legate</td>
</tr>
<tr>
<td>SJ 91</td>
<td>27 August 1254</td>
<td>Pierre Capocci, Cardinal Legate</td>
</tr>
<tr>
<td>SJ 92</td>
<td>27 August 1254</td>
<td>Pierre Capocci, Cardinal Legate</td>
</tr>
<tr>
<td>SJ 93</td>
<td>28 August 1254</td>
<td>Pierre Capocci, Cardinal Legate</td>
</tr>
<tr>
<td>SJ 94</td>
<td>28 August 1254</td>
<td>Pierre Capocci, Cardinal Legate</td>
</tr>
<tr>
<td>SJ 95</td>
<td>20 November 1254</td>
<td>Pierre Capocci, Cardinal Legate</td>
</tr>
<tr>
<td>SJ 96</td>
<td>3 December 1255</td>
<td>Pope Alexander IV</td>
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<td>SJ 100</td>
<td>5 September 1257</td>
<td>The Canons of Meerbeek</td>
</tr>
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<td>SJ 104</td>
<td>8 August 1258</td>
<td>Henry Stolten, Clerk</td>
</tr>
<tr>
<td>SJ 105</td>
<td>12 February 1259</td>
<td>Michael of Hal, Priest of Gysegem</td>
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<td>SJ 108</td>
<td>June 1260</td>
<td>Sentence Arbitration attributed to the hospital of Saint John</td>
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<tr>
<td>SJ 109</td>
<td>4 February 1261</td>
<td>Gérard, <em>Pércepteur</em> of the Order of the Templars in Brabant and in Hesbaye</td>
</tr>
<tr>
<td>SJ 111</td>
<td>1262, Before 24 June</td>
<td>Sentence Arbitration between the hospital of Saint John and Ideloïe, widow of Godfrey of Onin</td>
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<tr>
<td>SJ 112</td>
<td>June 1262</td>
<td>The hospital of Saint John and Gertrude Schali</td>
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<td>SJ 114</td>
<td>August 1263</td>
<td>Godescalc, Abbot of Jette</td>
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<tr>
<td>SJ 115</td>
<td>August 1263</td>
<td>Godescalc, Abbot of Jette</td>
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<td>SJ 118</td>
<td>May 1264</td>
<td>The hospital of Saint John</td>
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<td>SJ 135</td>
<td>31 May 1268</td>
<td>Henry, Bishop of Chiemsee</td>
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<td>SJ 137</td>
<td>November 1268</td>
<td>The hospital of Saint John</td>
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<td>SJ 139</td>
<td>24 September 1269</td>
<td>The hospital of Saint John</td>
</tr>
<tr>
<td>SJ 147</td>
<td>October 1271</td>
<td>Henry of Wanghe, Cleric</td>
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<tr>
<td>SJ 148</td>
<td>3 December 1271</td>
<td>Jean Pipenpoy, Dean of Sainte-Gudule of Brussels</td>
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<td>SJ 154</td>
<td>20 November 1272</td>
<td>The Deans of the Chapter of Sainte-Gudule</td>
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<td>SJ 155</td>
<td>24 November 1272</td>
<td>Henry of Beersel, Priest</td>
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<td>SJ 157</td>
<td>26 January 1274</td>
<td>Pope Gregory X</td>
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<td>SJ 158</td>
<td>28 January 1274</td>
<td>Pope Gregory X</td>
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<td>SJ 159</td>
<td>11 April 1274</td>
<td>Alard, Abbot of Parc, Delegate of Saint-Siège</td>
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<td>SJ 161</td>
<td>2 August 1274</td>
<td>Wibaud of Sarts, Archdeacon of Cambrai at Brussels</td>
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<td>SJ 162</td>
<td>8 August 1274</td>
<td>The Deans of the Chapter of Sainte-Gudule and the Chaplain of the Church of Saint John, and the Mistress of the Community of the hospital of Saint John</td>
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<tr>
<td>SJ 163</td>
<td>August 1274</td>
<td>The Deans of the Chapter of Sainte-Gudule and the Chaplain of the Church of Saint John, and the Mistress of the Community of the hospital of Saint John</td>
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<tr>
<td>SJ 165</td>
<td>December 1274</td>
<td>Hedwige van der Maerct, a Beguine</td>
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<td>SJ 167</td>
<td>March 1275</td>
<td>The Infirmary of the Beguinage of the Virgin</td>
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<td>SJ 169</td>
<td>[1-30] November 1276</td>
<td>Henry, Abbot of Afflighem and his Monastery</td>
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<tr>
<td>SJ 170</td>
<td>30 November 1276</td>
<td>Henry, Abbot of Afflighem and his Monastery</td>
</tr>
<tr>
<td>SJ 175</td>
<td>5 April 1277</td>
<td>The Mistress, the Brothers and Sisters of the hospital of Saint John and the Temporal Headmasters</td>
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<tr>
<td>SJ 176</td>
<td>9 April 1277</td>
<td>Pope John XXI</td>
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<tr>
<td>SJ 177</td>
<td>April 1277</td>
<td>The hospital of Saint John and the Terarken Foundation</td>
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<td>SJ 180</td>
<td>11 June 1277</td>
<td>Gautier of Bodeghem, Knight (chevalier)</td>
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<td>SJ 182</td>
<td>30 September 1277</td>
<td>Enguerrand II, Bishop of Cambrai</td>
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<td>SJ 183</td>
<td>October 1277</td>
<td>Elisabeth, daughter of Englebert, son of Everwin Vos, Knight (chevalier)</td>
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<td>SJ 193</td>
<td>1 September 1281</td>
<td>The Abbot of the Monastery of Ninove</td>
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<td>SJ 194</td>
<td>3 September 1281</td>
<td>The Monastery of Ninove</td>
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<td>SJ 196</td>
<td>19 April 1282</td>
<td>The Abbot and the Monastery of Ninove</td>
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<tr>
<td>SJ 201</td>
<td>February 1284</td>
<td>The hospital of Saint John</td>
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<td>SJ 217</td>
<td>January 1290</td>
<td>Jean, Presbytery of Laeken</td>
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<td>SJ 226</td>
<td>4 May 1291</td>
<td>The hospital of Saint John</td>
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<td>SJ 230</td>
<td>17 November 1293</td>
<td>Gilles Blijsman and Gautier, Priest, his son</td>
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<td>SJ 231</td>
<td>December 1293</td>
<td>The Headmasters of the Table of the Poor of Laeken</td>
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<td>SJ 234</td>
<td>September 1294</td>
<td>The Monastery of the hospital of Saint John and the <em>Chapellenie</em></td>
</tr>
<tr>
<td>SJ 236</td>
<td>9 October 1294</td>
<td>Godfrey II, Count of Vianden and Lord of Grimberge, and his eldest son</td>
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<tr>
<td>SJ 239</td>
<td>16 March 1296</td>
<td>Judgment of the Episcopal Court of Cambrai</td>
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<tr>
<td>SJ 242</td>
<td>5 October 1296</td>
<td>Henry of Linkebeek, Priest</td>
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<tr>
<td>SJ 243</td>
<td>23 November 1296</td>
<td>Jean Koukaert, Priest</td>
</tr>
<tr>
<td>SJ 250</td>
<td>8 April 1298</td>
<td>Gui II, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 252</td>
<td>June 1298 [Before the 24th]</td>
<td>The hospital of Saint John</td>
</tr>
<tr>
<td>SJ 257</td>
<td>February 1299</td>
<td>The hospital of Saint John</td>
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<tr>
<td>SJ 258</td>
<td>28 March 1299</td>
<td>Amauri of Quercu, perpetual Chaplain of the Churuch of Saint John</td>
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<tr>
<td>SJ 262</td>
<td>June 1299</td>
<td>The hospital of Saint John</td>
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<tr>
<td>SJ 263</td>
<td>21 July 1299</td>
<td>Marguerite of Uccle, Beguine</td>
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<tr>
<td>SJ 265</td>
<td>29 November 1299</td>
<td>Alix, Priest, and the Monastery of Val-Duchesse</td>
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<td>SJ 270</td>
<td>February 1300</td>
<td>The hospital of Saint John</td>
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<tr>
<td>SJ 271</td>
<td>25 March 1300</td>
<td>Gui II, Bishop of Cambrai</td>
</tr>
<tr>
<td>SJ 273</td>
<td>June 1300</td>
<td>Jean, Presbytery of Leerbeek</td>
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<tr>
<td>SJ 276</td>
<td>10 September 1300</td>
<td>Gui II, Bishop of Cambrai</td>
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Chart 6: The Laity

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<thead>
<tr>
<th>Breakdown of the Cartulary Documents: The Laity</th>
<th>Number of Acts</th>
<th>Number(s) in the Cartulary</th>
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<tbody>
<tr>
<td>The Duke of Brabant</td>
<td>7</td>
<td>4, 5, 21, 24, 34, 221, 269</td>
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<tr>
<td>Ducal Officers</td>
<td>3</td>
<td>63, 70, 73</td>
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<tr>
<td>The Accompanying Lords or Non-Members of Their Family</td>
<td>31</td>
<td>7, 11, 17, 22, 26, 27, 31, 33, 36, 40, 42, 52, 54, 58, 68, 69, 78-81, 89, 97, 102, 106, 126, 174?, 178, 206, 236</td>
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<tr>
<td>The Members of Seignorial Families</td>
<td>3</td>
<td>37, 84?, 98</td>
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<tr>
<td>Nobles</td>
<td>9</td>
<td>19, 32, 44, 48, 61, 62, 71, 179?, 214</td>
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<tr>
<td>Non-Noble</td>
<td>1</td>
<td>47</td>
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<tr>
<td>The Aldermen’s Court</td>
<td>133</td>
<td>See chart below</td>
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<tr>
<td>The Court Censale of Henri Lopere of Louvain</td>
<td>1</td>
<td>144?</td>
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<tr>
<td>The Temporal Provisors of the Hospital of Saint John</td>
<td>1</td>
<td>175</td>
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<tr>
<td>The Provisors of the Foundation Terarken at Brussels</td>
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<td>177</td>
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<td>The Aldermen’s Court</td>
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<td></td>
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<tr>
<td>Aldermen of the Lord of Assche</td>
<td>1</td>
<td>139</td>
</tr>
<tr>
<td>Aldermen of Sainte-Gertrude of Nivelles in Brussels</td>
<td>2</td>
<td>125, 245</td>
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<td>Aldermen of Goyck</td>
<td>1</td>
<td>137</td>
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<tr>
<td>Aldermen of Laeken</td>
<td>2</td>
<td>217, 231</td>
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<tr>
<td>Aldermen of Leeuw-Saint-Pierre</td>
<td>4</td>
<td>88, 99, 107, 120</td>
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<td>Aldermen of Léon d'Aa à Leeuw-Saint-Pierre</td>
<td>2</td>
<td>166, 229</td>
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<td>Aldermen of Tervueren</td>
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<td>143</td>
</tr>
<tr>
<td>Aldermen of Uccle</td>
<td>1</td>
<td>73</td>
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<tr>
<td>Aldermen of Wambeek</td>
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</table>
Chart 7: The Aldermen

The échevins of Brussels, 1135-1279

<table>
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<th>Year</th>
<th>1135</th>
<th>1251</th>
<th>1265</th>
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<tr>
<td>Baudouin</td>
<td>Henri Piliser</td>
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<td>Henri Merthe</td>
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<tr>
<td>Erluin</td>
<td>Geroius de Rodenbeke</td>
<td>Guillaume, son of Arnoul</td>
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<tr>
<td>Everard</td>
<td>Guillaume de Sabulo</td>
<td>Jean, son of Gerelin</td>
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<tr>
<td>Warner</td>
<td>Geronius de Weert called Hospes</td>
<td>Henri Wert</td>
<td></td>
</tr>
<tr>
<td>Siger, son of Marguerite ex Atrio</td>
<td>Arnoul Tuninc</td>
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<tr>
<td>1138</td>
<td>Jean Clivere</td>
<td>Guillaume Egloi</td>
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<tr>
<td>Gosuin Clibinc</td>
<td>Jean Lose</td>
<td>Jean de Senna</td>
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<tr>
<td>François Conus</td>
<td>Rolin Villicus</td>
<td>Everwin Vulpes</td>
<td></td>
</tr>
<tr>
<td>Egeric</td>
<td></td>
<td>Jean Leo</td>
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<tr>
<td>Arnoul de Widescat</td>
<td>1252</td>
<td>Frannco Desdir</td>
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<tr>
<td>Gosuin</td>
<td>Everwin Vulpes, knight</td>
<td></td>
<td></td>
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<tr>
<td>Baudouin</td>
<td>Arnoul, brother of Conrad</td>
<td>1266</td>
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<tr>
<td>Meinard: was named in a donation to the hospice of Sainte-Gertrude in Brussels</td>
<td>Henri Piliser</td>
<td>Everwin Vulpes or De Vos, knight</td>
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<tr>
<td>Geroyus Wert</td>
<td>René Clutinck</td>
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<tr>
<td>1173</td>
<td>Guillaume de Saphalo</td>
<td>Guillaume Grove</td>
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<tr>
<td>Henri Monotarius or Monnayeur</td>
<td>Siger de Atrio</td>
<td>Henri Piliser</td>
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<td>Everwin, brother of Henri le Monnayeur</td>
<td>Jean de Senna</td>
<td>Jean Wert</td>
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<tr>
<td>Guillaume</td>
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<td>Guillaume of Huffle</td>
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<td>Hugues</td>
<td>1253</td>
<td>Arnoul De Coninck</td>
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<tr>
<td>Théodoric or Thierry</td>
<td>Everwin Vulpes or Vos</td>
<td>Guillaume de Platea</td>
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<tr>
<td>Rolin Meier, also called Rodolphe Villicus</td>
<td>Henri De Wert, son of Guillaume</td>
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<tr>
<td>1195</td>
<td>Engelbert de Molenbeke</td>
<td>Gilles de Frigido Monte</td>
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<td>Jean Clivere</td>
<td>1267</td>
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<td>Daniel of Overhem</td>
<td>Guillaume, knight, or Guillaume, son of Arnoul</td>
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<td>Jean, son of Gerelin</td>
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<td>Guillaume de Platea</td>
<td>Henri Wert, or Henri De Wert</td>
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<td>Eselin</td>
<td>Henri Pyliser</td>
<td>Guillaume Egloi</td>
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<tr>
<td>Siger</td>
<td>Guillaume de Platea</td>
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<tr>
<td>Henri de Spigle: was listed in the charter of Duke Henry I in favor of the hospital of Saint John</td>
<td>Guillaume of Huffle</td>
<td>Rolin Villicus</td>
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<td>Hugues</td>
<td>Geroius Wert</td>
<td>1268</td>
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<td>Henri Leo</td>
<td>Amelric Sconekeint</td>
<td>Guillaume Grove</td>
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<td>Francon</td>
<td>Everwin Vulpes</td>
<td>Arnoul Tuyne or Tuninc</td>
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<td>Everwin of Woluwe</td>
<td>Jean Leo</td>
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<td>1257</td>
<td>Guillaume <em>de Platea</em>, knight</td>
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<td>Michel Leo</td>
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<td>Henri Wert</td>
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<td>1261</td>
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493
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### TABLE 1: Genealogy of the House of Leuven/Brabant

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<thead>
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<th>Era</th>
<th>Name</th>
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<tr>
<td>Godfrey I</td>
<td>Godfrey I the Bearded (1095-1139)</td>
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</tr>
<tr>
<td></td>
<td>Godfrey II (1139-1142)</td>
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</tr>
<tr>
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<td>Godfrey III (1142-1190)</td>
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<tr>
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<td>Henry I (1190-1235)</td>
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<td>Henry II (1235-1248)</td>
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</tr>
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<td>Henry III (1248-1261)</td>
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</tr>
<tr>
<td></td>
<td>Henry IV (1261-1267)</td>
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</tr>
<tr>
<td></td>
<td>John I (1267-1294)</td>
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<tr>
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<td>John II (1294-1312)</td>
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<td>John III (1312-1355)</td>
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<td>Godfrey of Brabant (+1302)</td>
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Table 2: The Duchy of Brabant

House of Louvain

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<th>Period</th>
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<tbody>
<tr>
<td>1106-1128</td>
<td>Godfrey I, the Bearded (Count of Louvain; Duke of Lower Lorraine 1106; deposed, died 1139)</td>
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<tr>
<td>1128-1139</td>
<td>Walram II of Limburg</td>
</tr>
<tr>
<td>1139-1142</td>
<td>Godfrey II (son of Godfrey I)</td>
</tr>
<tr>
<td>1142-1190</td>
<td>Godfrey III (son)</td>
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<tr>
<td>1190-1235</td>
<td>Henry I (son; co-regent 1183)</td>
</tr>
<tr>
<td>1235-1248</td>
<td>Henry II (son)</td>
</tr>
<tr>
<td>1248-1261</td>
<td>Henry III (son)</td>
</tr>
<tr>
<td>1261-1267</td>
<td>Henry IV (son; abdicated)</td>
</tr>
<tr>
<td>1267-1294</td>
<td>John I, the Victorious (brother; Duke of Limburg 1288)</td>
</tr>
<tr>
<td>1294-1312</td>
<td>John II (son)</td>
</tr>
<tr>
<td>1312-1355</td>
<td>John III (son)</td>
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Table 3: Timeline of the Early History of the Hospital of Saint John

<table>
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<th>Year</th>
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<tbody>
<tr>
<td>1186</td>
<td>Approval of the charitable confraternity of Saint-Espirit by the Bishop of Cambrai, Roger</td>
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<tr>
<td>1204</td>
<td>Duke Henry I gives to the poor of the hospital of Saint John, formally called Saint-Espirit</td>
</tr>
<tr>
<td>1211</td>
<td>Bishop of Cambrai, Jean III, gives the hospital of Saint John its statutes</td>
</tr>
<tr>
<td>1225</td>
<td>Godfrey, the Bishop of Cambrai, delegated his power to Gautier, the Dean of Hal, for the erection of a <em>chapellenie</em> that Guillaume of Ledeberg desired to establish</td>
</tr>
<tr>
<td>1237</td>
<td>Pope Gregory IX allows the Bishop of Cambrai to grant the brothers and sisters of the hospital of Saint John a priest and cemetery</td>
</tr>
<tr>
<td>1254</td>
<td>Papal Legate, Pierre Capocci, accorded thirty days of indulgences to those who made donations to the mistress, the brothers, or the sisters for the reconstruction of the hospital</td>
</tr>
</tbody>
</table>
BIBLIOGRAPHY

Primary Sources

Brussels, Archives Générales du Royaume (AGR):
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Tiffany A. Ziegler was born in Ogallala, NE and grew up in Julesburg, CO where she was raised by her father, Clinton Ziegler (a signal maintainer for the Union Pacific Railroad) and her mother, Leatte Ziegler (a florist). Tiffany spent much of her early childhood with her two grandmothers, Carolyn Williamson and Dorothy O’Berg, both of whom lived not far from her in Julesburg and both of whom work as florists. Tiffany has one sister, Sonja Talley, who lives with her husband, Jacoby Talley in Scottsbluff, NE. Sonja teaches special education in Morrill, NE, while Jake works in Scottsbluff as a nurse. Tiffany also has one brother, Zachary Ziegler, who lives in Ogallala, NE where he works as a car mechanic. Tiffany married her husband, Michael Heil, a CPA, in 2004.

Tiffany received her BA in early European History and secondary education (as well as a minor in art history) at Hastings College in Hastings, NE in 2003. She then relocated to Lubbock, TX, where she pursued a Master’s in Medieval History, with a minor emphasis in French, at Texas Tech University in 2005. There she completed a thesis that focused on the artistic devotion and patronage of confraternities on the eve of the later Middle Ages and the early Renaissance. Tiffany relocated, along with her husband, to Columbia during the summer of 2005, at which point she began course work towards her PhD in Medieval History under the guidance of Dr. Lois Huneycutt.