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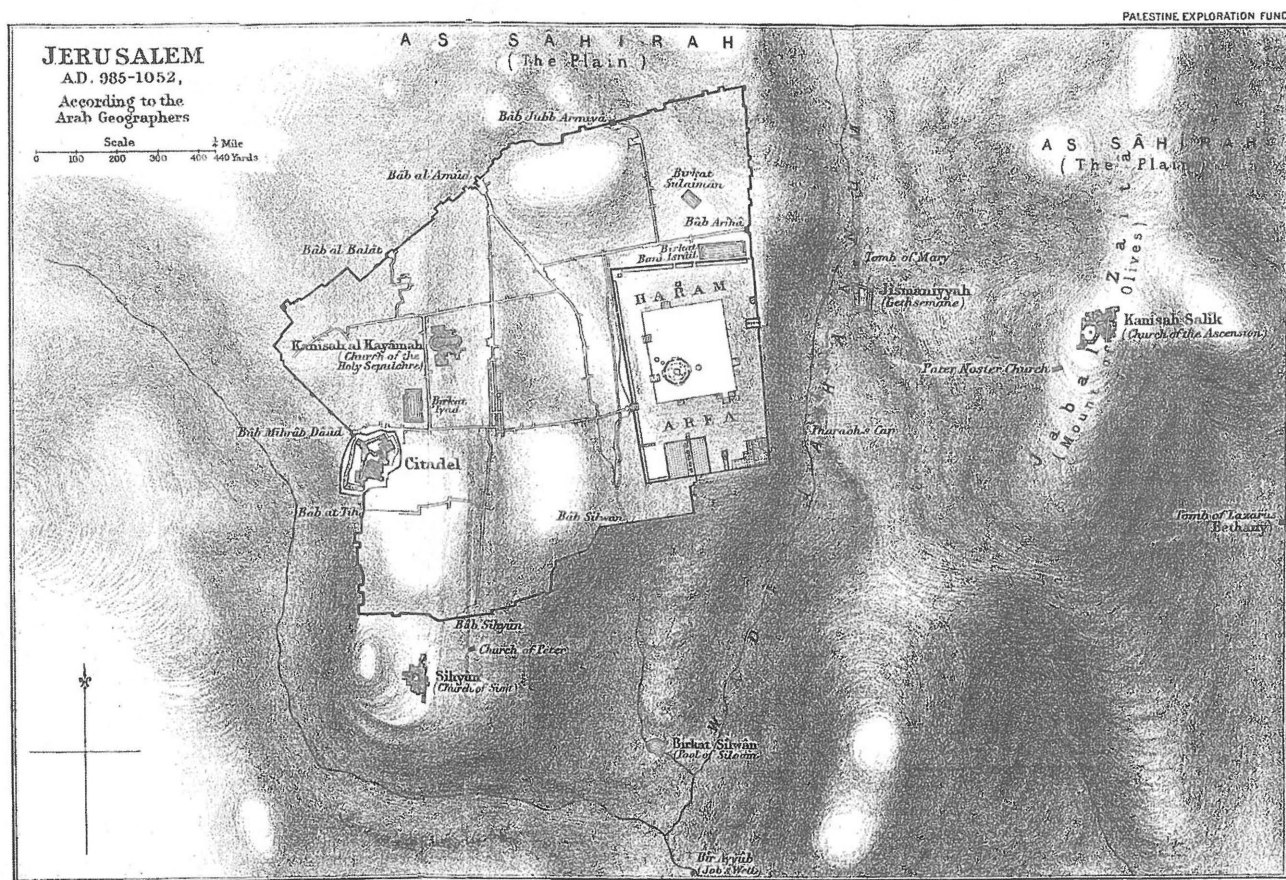
The road to Jerusalem: The Amalfitan Hospice in Jerusalem in its earliest stage until the First Crusade

Introduction

René Aubert de Vertot, a chronicler of the Order of St John, dedicated his 1726 history of the Order, “a fraternity of Hospitallers,”¹ to Grand Master Emanuel de Vilhena, as one confrere to another. His work is used here as one of the contemporary literary sources for searching and researching the identity of the early Hospital. His work is a contemporary view, fully ‘unbiased’ in the view of Christians and fully biased regarding Muslims and Ottomans, and not in the least hindered by modern political correctness or modern ideology. Modern historians have often criticised his work as being inaccurate, prejudicial, judgmental and romanticising, which is however not altogether bad when writing about the

search of identity of the Knights of the Order of St John. His is clearly an emic view, looking from the inside to the outside. This self-image is, of course, crucial for identity building. What others say, the etic view, may at times have less of a consequence for the building of the self. The work of De Vertot is frequently, in this article, compared and contrasted with other works, both of his contemporaries and of modern commentators, over a number of discernible phases during its more than 900 years of existence.

The two volumes of De Vertot used here as reference material, belong to the 1728 English translation in facsimile. It contains, besides the history of the Order, a section of *Proofs*, passages from older writers such as William of Tyre, which are quoted *ad verbatim* in Vol. 1 to show the



A map of Jerusalem (AD 958-1052) according to Arab geographers

basis of his scholarship. When De Vertot makes a mistake, the mistake is copied from his sources. The interpretation of that scholarship is then of a contemporary knight and chronicler.

Historical importance of pilgrimage to Jerusalem

With regard to the Hospitallers' identity, pilgrimage plays a crucial role. Empress Helena, mother of the newly converted Emperor Constantine, is widely recognised as setting the trend for pilgrimage to the significant places where Jesus Christ lived and suffered. She also urged her son to build the Church of the Holy Sepulchre at Jerusalem, which would become a pilgrim's attraction. Soon after, St Jerome settled in Bethlehem and started work on his *Vulgatus* bible, which attracted a steady number of pilgrims from Italy. By the year 400 there were more than 200 monasteries catering for the needs of pilgrims going to Jerusalem.²

Christian pilgrimage to Jerusalem was for a while more than hazardous when the Vandals, after sacking Rome in 455, also made their presence felt as pirates on the sea-lanes to the Holy Land. After the Muslims wrested the area from the Byzantines in 637, Christian pilgrimage became even more difficult and dangerous. Temporarily, the number of male pilgrims to Jerusalem from the West stagnated, while the stream of female pilgrims dried up altogether. Only those pilgrims healthy and wealthy enough to satisfy Arab custom formalities, and a plethora of other demands, kept on going.³ However, many Muslim rulers tolerated Christian pilgrimage, because it created income in the form of tolls and taxes and stimulated the local economy.

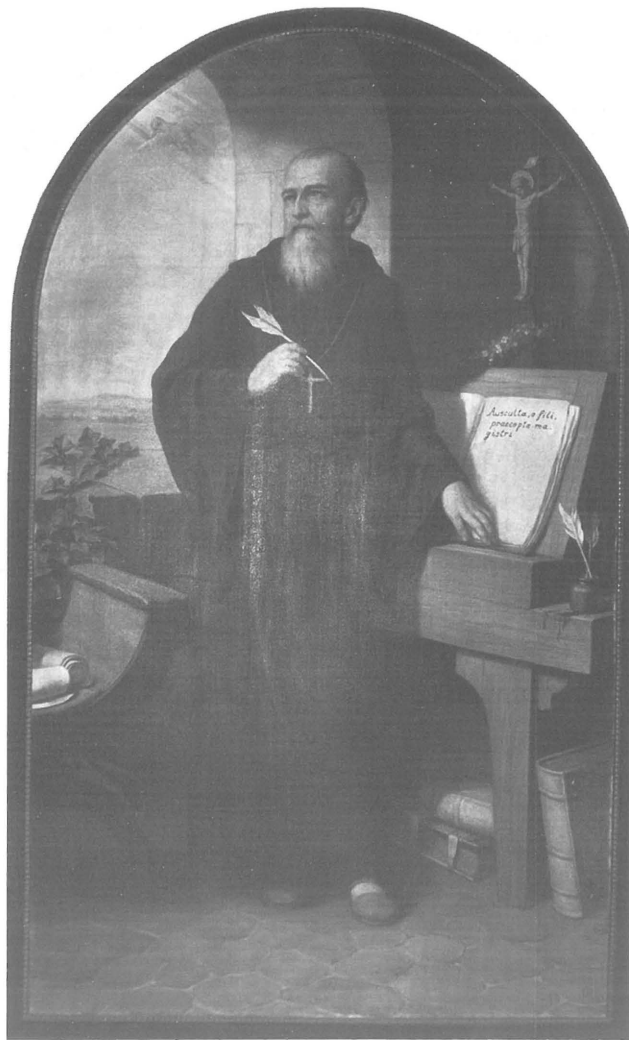
The idea of pilgrims' hospitals to and in Jerusalem was thus not a new one. Sire writes about a Latin hospice founded in 603 by Pope Gregory the Great.⁴ De Vertot relates to some early medieval sources of a certain Eginard, one Abbe Fleury and a brother Bernard. The latter lived around 870 and his journey notes infer that Abbasid caliph Harun al-Rashid (763-809) had allowed the French to build a "house for entertainment" – a hospice for Western Christian pilgrims. In that house there

was also a library, financed by Charlemagne (d. 28 January 814).⁵ Harun al-Rashid is known to have established a hospital himself in Baghdad in 790,⁶ and the fabled library Bayt Al-Hikma (House of Wisdom), also in Baghdad.⁷

In a later turn of events, after the death of caliph Harun al-Rashid in 809, the good relationship between the Franks and the Abbasid Caliphate was gradually discontinued and the hospital and library disappeared. In view of identity, it is demonstrated by Hiestand that there was no real and historical continuation between these early hospices and the later Amalfitan hospice.⁸ Nonetheless, a spiritual continuation may be claimed in view of the persistent Christian effort to try to establish a humanitarian foothold in Jerusalem for the sake of facilitating access and care for Western Latin pilgrims to the Holy City.

Charity

Christian obligation to charity is a topic already present in the work of the early Church fathers, such as Ignatius of Antioch (d. between 98 and 117) and St John Chrysostom (d. 407). The latter, a patriarch of Constantinople, remarked that charity is not only words but require actual assistance and empathy. He advised that all Christians, the poor included, should give alms after each Sunday's Mass and distribute these accordingly.⁹ Scriptural tradition demands charity, both as a generous duty to others and as a humble right to receive. Psalm 68: 6-7 is quite clear about it, *patri pupillorum et defensori viduarum*, God is a father of orphans and a defender of, according to the translation and interpretation of the word *viduarum*, either widows, unmarried women, divorced women or women deprived of livelihood. God is seen as a force which can unite men in one house and free prisoners, but also able to let the unbelievers remain in an ignorant state. Furthermore, this Psalm (1-3), also gives an impetus to actively scatter the enemies of God, to drive them away like smoke vanishes *sicut deficit fumus deficient* and fire melts the candle *sicut tabescit cera a facie ignis*. It seems that charity and protection go hand in hand,¹⁰ an important factor for developments both in armed pilgrimage and protecting pilgrims by armed escorts.



St Benedict of Nursia writing the Benedictine Rule – a painting by Herman Nieg (1849-1928) found in the church of Heiligenkreuz Abbey near Baden bei Wien, Lower Austria

Medieval charity was an ecclesiastical and bishopric initiative, while later it shifted to the monastic orders, such as the Benedictines. Charity is something communities, but also individuals (members of the clergy and wealthy laity), must engage in to care for *les miserables*, the weak, vulnerable or degraded persons inside or outside their direct community. The sense of duty was obviously directly connected with the concern for one's salvation, the avoidance of sin and the service to God.¹¹ It could be that if one turned one's back to *les miserables*, Christ could be among them. Charity is still the main driving force of the Hospitallers today, *obsequium pauperum* – care for the needy.

Further to Brodman, in Roman times, out of civic duty, the elite engaged in patronage and selected clients irrespective of their needs. Christian bishops redefined, or in a sense invented, the 'poor', when

they shifted the burden from social patronage by the elite to religious charity, *opera caritatis*, by everyone who could afford it, automatically creating a class division at the bottom end. St Jerome placed the clergy in the same category as the poor by saying that "whatever the clergy possess, belongs to the poor."¹² In doing so, this created another division between voluntary and involuntary poverty.

Reception of pilgrims

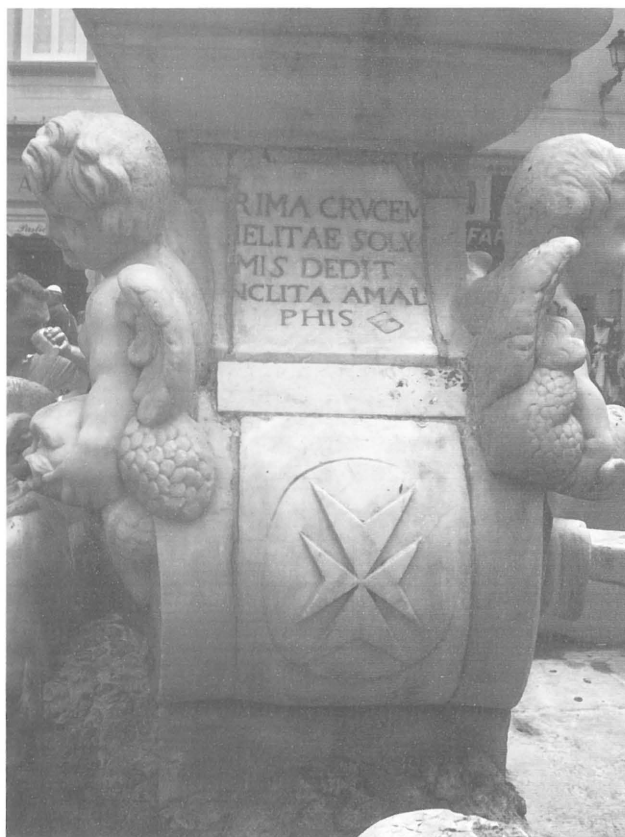
The reception of pilgrims has had a long tradition in Christianity. At present, pilgrims and pilgrimage are still one of the pillars of the modern Hospitallers. In the first week of May, thousands of knights and their charges arrive at Lourdes in France for the annual Hospitaller pilgrimage.

According to Sumption, a pilgrim must be offered free hospitality in the form of shelter, water and bread. In the early church, this duty was first and foremost to be carried out by bishops, as the pilgrims belonged to the category of 'the poor' in most instances. From the beginning, it was the monasteries that seriously engaged in this task of free hospitality and soon enough this principle became embedded in, among others, the Benedictine Rule. The virtue of Christian charity included, in principle, welcoming the pilgrims, washing, nurturing and clothing them, providing shelter for the night and against the elements. Of course, the hospitality provided and received were of different nature and quality and some of these rules were abided better by the one than by another; washing the feet of the pilgrims was not everyone's favourite task. At times, the service and food were in abundance and of good quality, while other establishments were run by humble institutions and poor monks, providing only necessities instead of niceties. Along busy roads, the capacity of the monasteries was soon filled up and large guest halls were built to this end from the eighth century onward. As a result, independent hospices were built along the pilgrim roads and at a certain distance from the monasteries, managed by monks or canons.¹³

The *Codex Calixtinus*, or Pilgrim's Guide to Santiago, provides a number of reasons why pilgrims must receive free hospitality. This charity

was also extended to the casual travellers who were not pilgrims.¹⁴ Chapter XI of Book V of the *Codex* says that it is a duty to receive all pilgrims, poor or rich, with respect and charity. In the case of St James and Santiago, it means that for those welcoming and caring for pilgrims, they will have as their guests not only St James but the Lord Jesus Christ himself. In the Gospel of Matthew (10:40) it is written that “he who welcomes you, welcomes me”. The *Codex* mentions a few examples of those who did not heed the advice to welcome pilgrims, and possibly refused shelter to Christ himself, and as a result brought God’s wrath over themselves. Liars were embarrassed, lodgings from which a refusal was received for shelter burnt down to the ground, and bread refused to the pilgrims turned to stone in the oven.¹⁵

Pilgrimage led to an intensive networking, so characteristic for the later network of hospitals leading to Jerusalem. The concept of networking is not a new idea, there was already a very diverse network of dwellings, monasteries, hospices, villages and cities leading to Santiago de Compostela, established from the ninth century onwards, among others, by Benedictine monks.¹⁶



The eight-pointed cross which is the coat of arms of the Duchy of Amalfi and which became the Cross of the Order of St John

Pilgrimage to Santiago, Rome and other places caused the economy of necessity to create a large number of hospitality stations. Some were managed by religious orders, others were locally established out of a sense of duty to traditional monastic hospitality.

During the tenth century, pilgrimage started to become institutionalised and various pilgrim ways led to Jerusalem, where the Arab rulers engaged in the economics of accommodating pilgrimage. After all, pilgrimage was big business.

According to Ure, the Cluniac Order encouraged wealthy people to go on a pilgrimage and arranged their travel. After the opening up of Hungary in view of its conversion to Christianity, the overland routes via Constantinople became more attractive than the dangerous sea-lanes. Large and small groups of pilgrims travelled these roads, with or without armed escorts for defence.¹⁷

Rules of religious orders

Community life of religious people started to be regulated in the fourth century, as one may deduce from Bishop Eusebius of Vercelli (d. 371). St Augustine formed a community of lay monks at Hippo and later an episcopal community of priests when St Augustine became an *episcopus*, or bishop, himself. These communities strove for an ascetic life, renouncing personal property and wealth and lived an unmarried life. Their work was the ideal of the salvation of other people by living an exemplary life of humility, charity and peace. The Augustinian Rule is the oldest (c. 400 AD), a short treatise for religious community life out in the world.¹⁸ This Augustinian Rule would be important for the later developments in the Hospital of Jerusalem when its identity and presence became more widely distributed over Europe. In the beginning, however, the hospice at Jerusalem set off with the Benedictine Rule, as a logical consequence of the initiative of the Amalfitan merchants and their tight relationship with the Benedictine monastery of Monte Casino.

The Benedictine Rule, written in c. 529,¹⁹ regulated communal life indoors, with an abbot in charge. It

also had as its principle *stabilitas loci*, which means striving for internal stability for all the members within the monastery, but also remaining life-long in one place. D’Aronco describes the superior rule of St Benedict when it comes to caring for, rather than curing, the weak pilgrim and the poor.²⁰ St Benedict was not only concerned about the physical well-being of the needy, but also with the moral treatment of the sick; “let them be served as if they were Christ himself”.²¹

Marr understands that it was during this period that Benedict wrote his Rules to accommodate a flourishing life within a monastery, in the first half of the sixth century. The Benedictine Rule is composed from 200 years of monastic life and borrows from other writers such as John Cassian (360-435), but Benedict’s adaptation reflects the needs of the day to bring order and structure in chaotic times. Benedict anticipated that his Rule would be changed in different times and environments and thus gave the Superior ample discretionary powers to do so, as long as the Rule could stimulate the stronger minds to a challenge and the weaker minds not to desist.²² Benedict saw a monk also as God’s soldier fighting the enemy of God, a person who would work for the benefit of God and as a lifelong pilgrim on a journey to God. The most superior of the monks were those who, besides *ora et labora*, could do good work and retain their humility.²³ It is probable that Gerard identified strongly with this aspect.

It is also considered that the Rule of St Benedict was well relevant to situations in other conflicted times, such as Jerusalem in the eleventh century. Benedict, according to Marr, wrote his rule in view of the cenobitic life – to live and serve under the rule of an abbot, which required absolute obedience of the monks to the abbot.²⁴ This idea can be transferred in later times to the master of the Hospital and the Grand Master of the Order of St John.

Since the abbot then represented Christ on earth, the abbot “should live a sacrificial life devoted to nurturing others.” Benedict created three vows; stability (promise to stay in the monastery), obedience (to the abbot and community) and fidelity (to the monastic life). This is a different set of vows to the later vows of the Order; poverty, chastity and obedience.²⁵

The concept of hospitals

Hospitals did not generally exist in Western Europe as they do today. The upper class had its own doctors and suppliers of medicine. The lower classes, the old and the frail had to seek help at alms-houses. The lepers were isolated in *leprosaria*, while the blind, crippled and weak could resort to alms-houses or the *leprosaria* if and when there was space. *Hospitales*, few and far between, catered for people who were really sick.²⁶

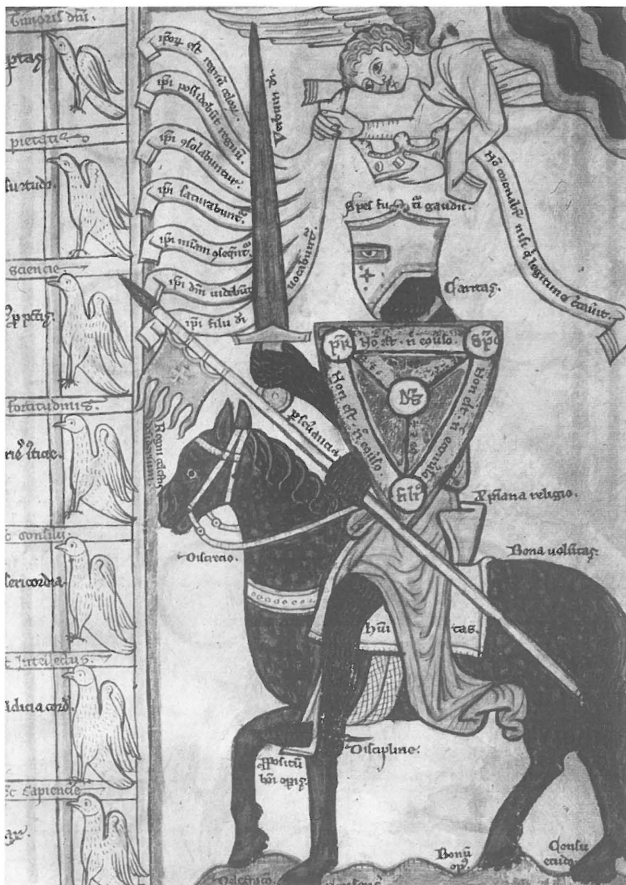
Rome had hospitals in the seventh century, among others, the Hospital of Santa Maria and a number of hospices near St Peter. In later medieval times, hospices, as a place of shelter and asylum, would sprout up in many towns and villages. These were initiated by religious persons and laity alike. These hospices, as shelters, catered initially for travellers and pilgrims, although later they also admitted orphans, the elderly, the undernourished, the unemployed, the insane and sufferers from the plague, leprosy and chronic diseases. Especially the religious shelters provided charity of the last resort for the poor, while later on also non-ecclesiastical bodies catered for the ‘deserving poor’. Usually, these charity houses were part of local communities, rather than part of a larger entity or national system. According to Brodman, the diversity of institutions and initiative defies definition and generalisation.²⁷

In view of the above, only the monasteries (under Benedictine rule) had their care institutionalised. Benedictine infirmaries were carefully and strictly managed, caring for their own brothers and guests. Their gardens grew medicinal herbs while medical staff set broken bones, cleaned wounds and ulcers, applying enemas and performing amputations.²⁸

The Amalfitans imported large amount of spices from the East, and with this import arrived also the knowledge for their use in medicine. They were close and good neighbours of Salerno too, where the fabled medical school was. It is very likely that the teaching of medicine at Salerno profited from the knowledge brought home by Amalfitan spice traders. Salerno had both male and female students and was heavily influenced by Islamic medicine and medicinal practice from Sicily and North Africa.²⁹

The development of chivalry

The emergence of the Hospital at Jerusalem and the development of the knightly social class are closely connected to social and historical developments in feudal Europe, a most troubled time. By the beginning of the fifth century, Christianity had become the religion of the Roman Empire. Besides perceived equality among men and a better after in Heaven than in Hades, the greatest advantage was thought to be that through the Grace of the Lord Jesus Christ the Christians were able to overcome demons in battle, albeit not always directly there and then. And of those demons there were quite a few, but everybody could become a spiritual soldier of Christ, an idea coming from Constantine's surprise



An early example of the *miles christianus* allegory in a manuscript of the *Summa Vitiorum* by William Peraldus (mid-13th century). The knight is equipped with a detailed Armour of God, including an early depiction of the Shield of the Trinity, and he is crowned by an angel holding the *gloss non coronabuntur nisi qui legitime certaverint* (none will be crowned but those who truly struggle) and in the other hand a list of the seven beatitudes, matched with the seven gifts of the Holy Spirit and the seven heavenly virtues which in turn are set against the seven cardinal vices.

victory in A.D. 312. St Augustine, in *The City of God*, explained that the earthly glory of Rome, as seen through the eyes of the pagans and Christians, was totally immaterial compared to the spiritual triumph which true Christians (alive or dead) could win in the City of God, Jerusalem. However, St Augustine also endorsed that, in order to pursue a just Christian life on earth, worldly concerns with political power, governments and authority are beneficial and required.³⁰ The importance of Jerusalem as a city chosen by God and the concept of becoming a soldier of Christ to fight the enemies of religion is therefore quintessential for the identity building discussed in the work.

Although the discussion is still ongoing, Janse claims that there is a structural and fundamental continuity from the Roman senatorial nobility via the Carolingian state nobility to the medieval feudal nobility. The latter was a social group, characterized by its allegiance to the king or emperor, with an administrative, tax and judicial system, military leadership, a code of honour and a consciousness of forming the top layer of society.³¹ According to Huizinga, the chivalric ideal helped to create an illusion of order in a very chaotic period of history. Fragmented Europe was in chaos, not only because of continuous invasions and internal wars, but also because of the existence of many pockets of power, there was an inextricable tangle of rules, regulations and borders.³²

True nobility was therefore regarded to be in the heart, as a gift of God and those who wanted to be noble should externalise this in noble deeds and show nobility of the mind. This thought is probably as old as nobility itself, but needless to say, there were many defaulters over time, notwithstanding the pressure and influence of the Church.³³

In the view of Huizinga, knightly fiction was created to make sense of the incomprehensibility and chaos of the above-described medieval world. Even from contemporary writers and chroniclers, Huizinga filters out the thin veneer of chivalry, hastily coating over a reality of merciless fighting, greed, corruption and noble arrogance. The chivalric ideal reduced the harsh reality to an unreachable ideal, wistful thinking rather, of knightly virtue and princely honour, a game with noble rules. The knightly

ideal is a collection of winning narratives forming collectively an aesthetic ideal, vibrant imagination and moving charm, and also a corresponding identity. The passionate longing to be remembered for one's reputation and honour, to be praised by those coming after, is a strong motivator. A true knight had a dislike of wealth, was sober, moderate, pious and at the same time courteous and educated. Also, the ascetic element was very strong and equaled the most severe monastic ideals and rules.³⁴ Such people were perfect candidates to become part of a Hospitaller system.³⁵

From unarmed pilgrim to crusader

Normally a pilgrim went unarmed, but idea had grown that it was acceptable to defend one's self on strange soil. From this it is a small step to accompany pilgrims by armed men and to take control by force and place areas under Christian control for the safety of pilgrims. From there it was another small step to presume that fighting the infidel was the same as performing a pilgrimage.³⁶

The absolutions and indulgencies offered by the popes soon became common good. Slaying the enemies of Christ, whomever they were, was one of the greatest virtues of chivalry, and was regarded as dispensing charities.³⁷ The development of chivalry, the justifications for a Holy War, the increased resistance against Muslim imperialism and expansionism and popularity of pilgrimages would in the end result in the Crusades, by which time the Amalfitans had lost their power in Jerusalem.

Humble beginnings: Amalfi c.1054-c.1070

It seems that the identity, both individually and corporate, of the site at Jerusalem went through roughly three phases. From c.1054, the year of inception to c.1070, the hospice was firmly in the hands of the Amalfitan founders. From c.1070 to 1120 the most important person for the formation of early identity of the Order of St John, is the person who is regarded as the founder or *institutor* of the Hospital, a man called Gerard about whom little is known. Nonetheless, he is the person who expanded the institution from a hospice to a



A representation of the founder of the Order of St John, Blessed Gerard, in the act of caring for the weak and the needy in hospital

Hospitaller Order. Between 1070 and 1120 there is the period of great change, innovation and the founding of the Hospitaller identity under the guidance of Gerard. After his death, then Raymond du Puy leads the changeover from a Hospital to a fully fledged military order, adding the military aspect to the identity package. From there onwards, until the final loss of Acre and the Holy Land in 1291, the Hospitaller Order of St John continues to grow and develop its existence and identity under duress of continuous war.

The story of searching identity of the Hospitaller Order of St John started well before there was ever an idea of a Hospitaller Order. The foundation of the norms and identity of the Order of St John were laid by wealthy merchants from Amalfi, who had a reputation of piety. This piety caused them to build a number of hospices for weary traveller, writes De Vertot, who backs up this claim by reproducing a relevant chapter of William of Tyre and other contemporary writers.³⁸

A closer look to the Duchy of Amalfi, in the Gulf of Salerno, Italy, will show some matters of importance for the development of an independent identity for the later Hospital in Jerusalem. The first initiatives of the Amalfitans show simultaneously a ground for continuation of one kind of identity and a discontinuation of another.

In the ninth century, Amalfi was part of the Duchy of Naples, belonging to the sphere of influence of the Byzantine Empire. Although Amalfi obtained autonomy in 839, it continued to recognise the Byzantine *basileus*, who generously bestowed the Amalfitan notables with titles, dignities, privileges and favours.³⁹ The Byzantines regarded Amalfi as a member of the greater Byzantine family and it remained attached to Byzantium with an allegorical umbilical cord for its sustenance. Although the Byzantines regarded Amalfi as a member of the greater Byzantine family, the Amalfitans regarded themselves as the free people of the Duchy of Amalfi. Nonetheless, the Amalfitans were said to be the most 'Byzantinized' Italians, most influenced by Byzantine custom and tradition.

In the same period, the early ninth century, Amalfi is heard of as a seafaring entity, without any obvious preference for trading partners.⁴⁰ The Amalfitans had their own quarter in Constantinople and a trading post in Albania. They also had their own monastery, *Santa Maria degli Amalfitani*, on Mount Athos, the most holy place in Byzantine monasticism.⁴¹ The prominent Amalfitan merchant Mauro di Pantaleone also known as Mauro di Comitemauro (an acquired name to indicate their Byzantine noble status), was the patron of the Benedictine community at Monte Casino, close to Amalfi.⁴²

In the early tenth century, the merchants of Amalfi were certainly forerunners with regard to foreign relationships. In an apparent age of exchange of goodwill, the Amalfitans went further afield than their competitors (Venice, Genoa and Pisa) and established a foothold in both the Byzantine and Arabic worlds. A large presence of Arabic traders and diplomats in Amalfi coincides with the Amalfitan harbour being the largest importer of goods from the East. Amalfitan traders had trade representatives and ambassadors nearly everywhere in the Levant and along the Maghreb Coast.

By the 880s, Amalfi seems to have been committed very strongly to its Arab trading partners; so strong that Pope John VII could sever these ties, notwithstanding his threats of excommunication or promises of money.⁴³ During the tenth century, the Amalfitans had further developed their trading connections, not only along the Mediterranean Muslim coast but also with the Byzantine Empire. Their influence was strong enough to intervene on behalf of the Byzantine patriarch Nicolas the Mystic for the freeing of Christian slaves from the Muslims.⁴⁴ The release of Christian slaves becomes an important topic later on in the history of the Order of St John.

Abū Tamīm Ma'add al-Mustanşir bi-llāh

Due to their successful Arabic trade contacts, especially with the Egyptian rulers of Palestine, the Amalfitans managed to maintain good relationships, even in times when Shiite caliphs went through periods of intolerance and unforgiving attitudes towards followers of other religions or even other versions of Islam. Normally, Christians and Jews were tolerated as long as they kept quiet. Caliph Al-Hakim Bi-amr Allah (985-1021), coming from the Fatimid dynasty of orthodox Shi'ite orientation, became known for his reign of terror. He demolished the Church of the Holy Sepulchre in 1009,⁴⁵ and most other Christian buildings in Jerusalem.⁴⁶ This caused momentarily another halt in the steady stream of pilgrims to the Holy Land.

A rapprochement with the Byzantine powers followed, when Al-Hakim's grandson Abū Tamīm Ma'add al-Mustanşir bi-llāh (d. 10 January 1094) came to power in 1035. Al-Hakim mysteriously had previously vanished from the face of the earth in 1021,⁴⁷ when Al-Mustansir had inherited the reign at the age of eight months, with al-Mustansir's mother as regent. As a result, the Byzantine emperors were also allowed to begin rebuilding the basilica of the Holy Sepulchre, pilgrimage returned and the Amalfitan connection became stronger than ever, becoming the only western port which was regularly engaged in a two-pronged trade with both the Muslims and the Byzantines. In particular, the Amalfitans rose to prominence due to the phenomenon of *cabotage* – carrying and trading

a mixed load of goods on board of their ships, to alternating harbours under Arab or Byzantine (or any other) rule.⁴⁸

Motivations for instituting the Amalfitan hospice

Some Amalfitan merchants who, according to De Vertot, had suffered the “inhumanity of both the one and the other, undertook to procure an asylum for the European pilgrims.” De Vertot’s “the one and the other” refers to “false zeal of the Mahometans and the enmity and aversion of the schismatical Greeks.” In the eighteenth century mind of De Vertot, the Amalfitans were portrayed as victims.⁴⁹ Whether victims or opportunists, the Amalfitans, being the indispensable trading partners they were, did create hostels at some places, such as at Antioch and at Jerusalem.⁵⁰

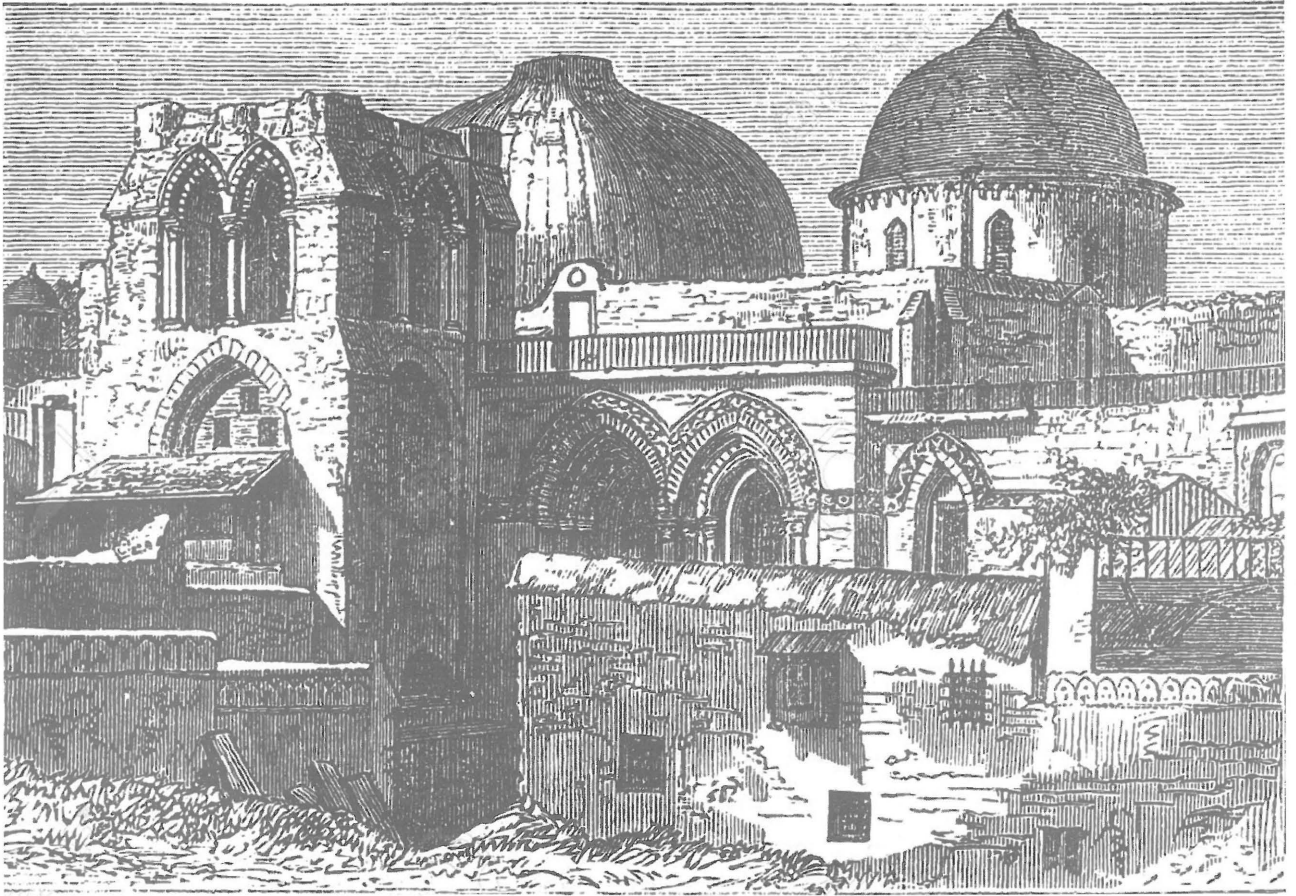
In the first half of the eleventh century, they had sent envoys to the Caliph in Egypt, who gave them permission to build an Amalfitan compound in Jerusalem. A dispatch was sent out and the governor of Jerusalem allowed work to start soon after, resulting in a trading post, chapel and hostel, providing food and shelter.⁵¹ Initially, these were meant to cater exclusively as lodging houses for the traders and pilgrims from Amalfi. Later on, the complex catered for a larger market, including the local poor and other Christian pilgrims. Being a merchant was not without its danger, and being a pilgrim was far more dangerous than any other on the road. Christian pilgrims continued to be maltreated on their way to Jerusalem, adding to the many reasons why the Amalfitans would initiate their asylum,⁵² or *xenodochium* – guesthouse for foreigners – the later basis out of which the Order of St John would develop.⁵³

The idea for an asylum or *xenodochium* was not new or unique; as John of Würzburg had written, the Armenians already had a hospital in Jerusalem.⁵⁴ The Byzantines also had their *nosokomeia* all over the Byzantine world, and also in Jerusalem. Some of these either had a monastic relationship or remained independent lay institutes. Physicians, from the seventh century onwards, would be salaried and were at times hospital administrators.

The patients were divided according to gender and disease, for instance a division was made in wards for fractures and wounds, while intestinal diseases and other conditions were elsewhere. Schools for medicine were established too. Islamic hospitals were built from the eighth century onwards and by the twelfth century there were even more than one in each big city. These employed Jewish, Christian and Muslim doctors and staff, according to their capabilities, not religion. These also made divisions into wards, male and female sections and further divided according to disease; for example there were wards for patients with fever, mental challenges, the wounded or sufferers from gastrointestinal problems.⁵⁵

Creating an Amalfitan complex in Jerusalem

De Vertot describes the formation of the Amalfitan asylum in a short paragraph in his *History*, whereby he does not mention the person of Gerard. Only in the *Proofs of the History* is Gerard mentioned when William of Tyre is quoted. Later on, then, De Vertot himself writes about Gerard, but only as a Frenchman in Jerusalem before the Crusades arrive. De Vertot, quoting *ex libro decimo octavo Historiae Willelmi Tyriensis Archiepiscopi* (Cap 4. p. 933), states that Jerusalem was at that time divided into four districts *in quatuor partes pene divisa aequaliter* by Al-Mustansir, to avoid problems between the various populations, namely a district each for the Jews, Armenians, Christians and Muslims.⁵⁶ This division of the city is confirmed by Boas, who adds that Jerusalem was already divided into four near-equally sized sections in the second century AD, when it was still *Aelia Capitolina*. Two main streets ran through it, the *Cardo* and the *Decumanis*. Although Al-Mustansir was the Egyptian Muslim ruler of the city, Muslims were actually a minority. Al-Mustansir used the Roman quartering of the city to accommodate the ethnic and religious divisions of the day. The Greeks known as the Chalcedonians, were the majority of Christians in Jerusalem before the Crusades, followed by the Syrian Christians, Monophysites (non-Latin Christians), Muslims and Jews. The Muslims lived around the Temple Mount. The north-west was the Christian quarter, dominated by the Orthodox Church, with a Latin Christian enclave south of



A print of the Church of the Holy Sepulchre or Church of the Resurrection in Jerusalem as it was during the 1890s

the Church of the Holy Sepulchre. It was here that Hospitallers made this enclave their own in a later stage of the hospital development.⁵⁷

De Vertot continues to quote William of Tyre that in the Latin Quarter of Jerusalem, *in ea parte quam Christiani habitant*, close to the Church of the Holy Sepulchre, a *locus sanctus* (transl. a holy place), the Amalfitans built their own domicile. The Amalfitan monastery of the Ever Virgin Mary was just a stone throw away from the door of the church dedicated to the Resurrection, *Ecclesiae Dominicae Resurrectionis* (transl. the Church of the Holy Sepulchre). Other contemporaries say that it was south of the Holy Sepulchre, near St Mary Latin. The Hospitallers' bell tower was apparently directly opposite or facing the Holy Sepulchre.⁵⁸ The Benedictine monastery of St Mary of the Latins, is thus placed nearly next door to the ultimate Christian *locus sanctus* of Jerusalem. At the same time, says De Vertot, a *Monachorum* or nunnery, and a hospital for women, were constructed, dedicated to Mary Magdalene. Finally, a *xenodochium* arose, a hospital for the poor and for sick pilgrims of both genders, in which building an altar was consecrated to St John the Almoner.⁵⁹

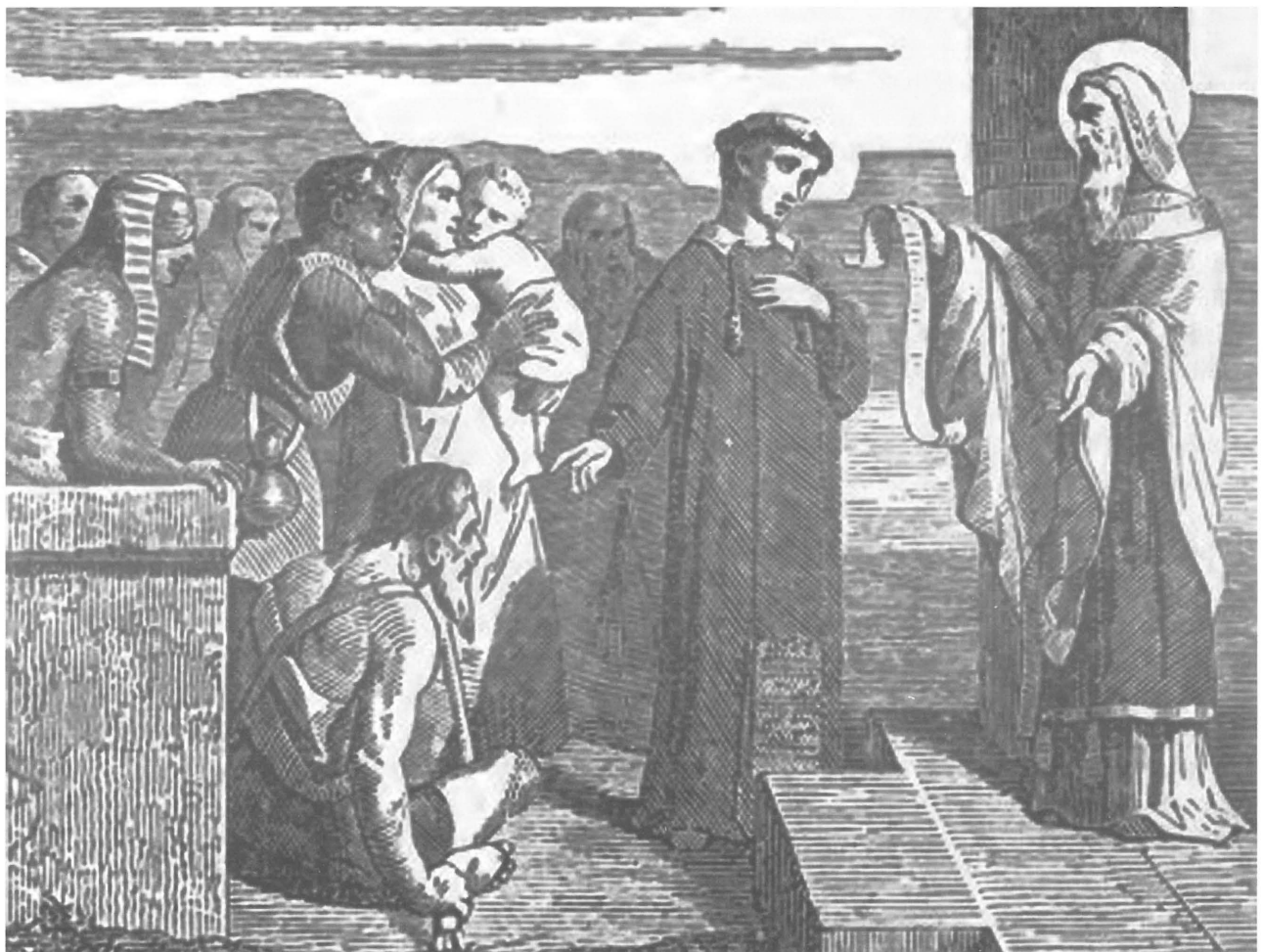
The above, taken from William of Tyre, and then interpreted by De Vertot, makes the chronology slightly difficult to understand. The text of William of Tyre is actually quite clear and his narrative about the hospital takes up chapter V, lines 934-940. Tyre's narrative confirms that the Amalfitans first built a monastery dedicated to the Virgin Mary. They also built offices for the monks and for the reception of guests from Amalfi. After finishing, an abbot and monks were shipped in from Amalfi and the monastery was invested and operating. Chaste and holy widows were apparently regular guests to Jerusalem, presumably among them widows of rich Amalfitan merchants. Those widows, notwithstanding their natural timidity, were fearless of all the possible dangers along the way, is the patronising comment of William of Tyre. To meet this demand, consequently a place was built where these women could be honourably received, and were provided with their own quarters, including a house, a chapel and later on a small convent, dedicated to Mary Magdalene, "by divine mercy in honour of that pious sinner," remarks Tyre, not less condescendingly but not contrary to contemporary opinion. Female pilgrims were admitted too and Benedictine nuns were engaged to manage the

place, under the rule of Abbess Agnes. The latter was from Roman nobility, well prepared to receive widows of noble and rich merchants. Since the monastery was rather small, it could not cater for the ever-growing stream of pilgrims, nobles, middle class and poor alike, who had either consumed all their money or were robbed of it. On arriving in Jerusalem, having paid their last gold piece at the gate, if so lucky to be able to, they entered the city exhausted and in a state of nakedness. Since the city was inhabited mostly by Saracens, infidels, the miserable Syrian people and the Greek patriarch and his clergy, so writes Tyre, there was no one who cared for the Latin Christian pilgrims. On the contrary, they were continuously abused, mistreated and even murdered by the locals. The monks of the monastery of the Latins finally took pity on them and started caring for them at their own expense. At a later stage, a hospital was built for this purpose within the Amalfitan complex and this offered shelter for all the Latin pilgrims, sick or healthy, because they might be killed on the streets of Jerusalem during the night. Food was made available, which meant the leftovers from the monastery and the convent. In this pilgrim's

hospital an altar was erected, dedicated to St John the Almoner. Tyre mentions Gerard as a person who had been working devotedly in the hospice for a long period under the supervision of the abbot and monks when Jerusalem was still in the hands of the 'enemy', which probably refers to the Seljuks and the Egyptians.⁶⁰

Tyre makes no mention of St John the Baptist, but according to Avni there was a Byzantine church dedicated to St John the Baptist which had survived al-Hakim. None of the ancient sources reveals whether the Amalfitans only constructed anew or if they restored buildings or integrated existing buildings into their complex.

The monastery was officiated by a Benedictine abbot and monks, the convent by a Benedictine abbess and nuns, while the hospice was run by a number of European laymen, filled with "zeal and charity", who served the sick and the poor in this religious house. These Europeans had renounced the idea of ever going back to their respective fatherlands. The Amalfitan merchants financed the place by sending over collected alms, paying for food, care



St John the Almoner in the act of helping the poor and the destitute

and shelter.⁶¹ Duchesne here makes a link between the financing of the hospice by the Amalfitans and the management by medical oriented monks of the Benedictine monastery of Monte Casino. This commentator does not share the opinion that the hospitaller monks were lay brothers; instead he claims that they were professed brethren, that is, Benedictine monks, coming from a long history of caring and serving; its long established Rule had the hospitaller monks well prepared “to give humble service to the sick and poor.”⁶²

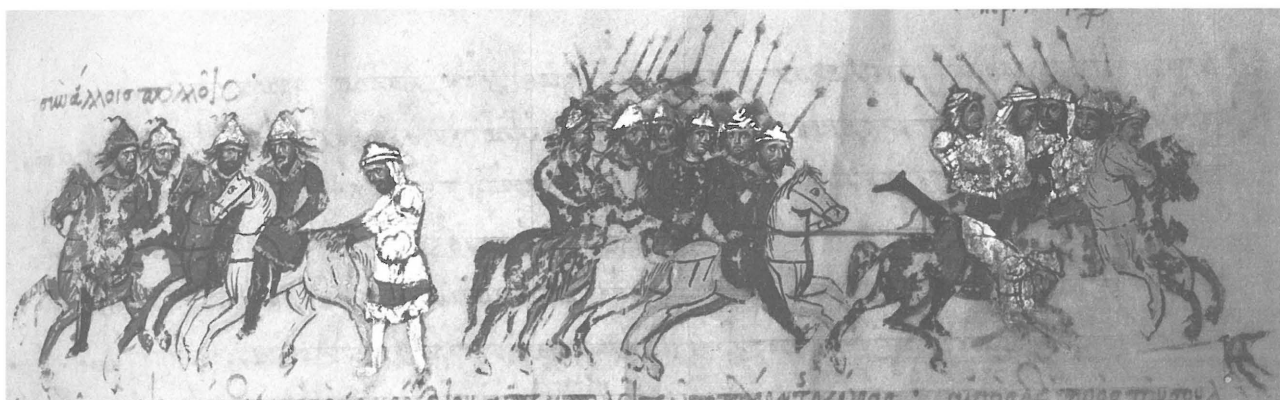
In line with the developments of hospices in Europe, part of the early identity includes that it was not a hospital for medical care in the modern sense, it was an asylum and a place where one could rest, be nurtured and regain strength again, but also a place where one would receive care rather than cure.⁶³ Nonetheless, because of all the external influences, the care was probably much different and advanced, compared to mainland Europe, which did not have the direct Amalfitan advantages of its proximity to the knowledge of the East. Undoubtedly, medical knowledge must have been incorporated from the nearby international medical school of Salerno. However, it could very well be that this hospice, after all run by strangers in a strange land, was eventually influenced by Byzantine or Arabic medical wisdom. The Amalfitans, as previously mentioned, were the most Byzantinized Italians around and well connected with the Arabic world and with the international medical school at Salerno. It is very likely that the hospice would have employed or hired local physicians too, Byzantine, Islamic, or even Jewish, as qualified staff was always hard to come by. It is logical to assume that the hospice would have engaged local physicians or healers to apply local methods fighting locally caused diseases and parasites, unknown in Europe.⁶⁴ The

Israel Antiquities Authority even mentioned that Jewish patients were given kosher food.⁶⁵

Jacques de Vitry in his *Historia Hierosolymitana* as quoted by De Vertot, also mentions that the Benedictine monastery for women was in the hands of the abbess Agnes, an Italian noble lady. The *xenodochium* was managed by a certain Geraldus.⁶⁶ Jacques de Vitry, quoted from in his *Historia Hierosolymitana* by De Vertot, adds that a certain Gerardus had for a long time the mandate of the Benedictine abbot to faithfully administer the hospital of the poor.⁶⁷ The Amalfitans had thus created a haven of safety for both men and women in a hostile world, in which daily sustenance was provided, according to the sources of De Vertot.⁶⁸ Further to De Vertot, this holy house of the Benedictine monks may be regarded as the cradle of the Order of St John. Later it served as a secure retreat for pilgrims, where Latin Christians were cared for, irrespective of their nation or condition. When stripped of their clothes by robbers, they were clothed again, the sick were seen to and “every kind of misery found in the charity of these Hospitallers, a new kind of mercy to relieve it.”⁶⁹

Origins of the hospice site, according to modern writers

Modern researchers largely consent with the first descriptions of the hospice, for instance, by William of Tyre (and quoted *ad verbatim* by De Vertot). Pringle writes that as early as 614 there was a monastery dedicated to St John the Baptist within Jerusalem.⁷⁰ The modest chapel or altar, *oratorium modicum* of this *xenodochium*, so write William



A battle scene showing a clash between Byzantine cavalry and Seljuk Turks

of Tyre, Jacques de Vitry,⁷¹ and William of Santo Stefano,⁷² held a dedication to St John the Almsgiver.

In the account of William of Santo Stefano appears an account of John, who while he was Archbishop of Almalfi (c.1070-1081/82), made a pilgrimage to Jerusalem. He was received by Amalfitans who a few years before had built two hospitals, one for men and one for women. According to Riley-Smith, the female hospital of St Mary of the Latins and its dependencies were probably built between 1063 and 1070. The lodging house annex hospice for the Amalfitans may have been in operation before, but the extension, catering for the international pilgrims and local poor, seems to have been in operation around 1063. In any case, the whole of the Amalfitan complex must have been finished before 1071, because of the invasion and occupation of Jerusalem by the Seljuks in that year. It would have been very doubtful whether the latter would have allowed the building of such a complex. De Vertot quotes in this respect William of Tyre who places the Seljuk invasion in 1065 and adds that the hospice had been in existence for hardly seventeen years before the Seljuks “cut the Egyptian garrison of the Caliph in pieces.” On the virtue of Tyre’s

writing, De Vertot had based the date of inception as 1048. As the date for the Seljuk invasion has now been established as 1071, the inception date can be corrected to 1054.⁷³

Recent excavations in 2012/3 by the Israel Antiquities Authorities have brought to light some of the structures of the hospital. According to the archaeologists the hospital, identified as the Hospital of St John, could cater for 2,000 patients in case of emergency. An earthquake in 1457 destroyed the building and it was reduced to rubble.⁷⁴ At present there is nothing left of these structures, except the Church of St John the Baptist. The Hospitaller complex at the Muristan area (Muristan being Persian for *hospital*) was demolished and the whole area quarried to provide building materials for the reconstruction of the walls of Jerusalem in the sixteenth century. On the Hospitaller site the Church of the Redeemer was built in 1893.⁷⁵

Treatment of pilgrims on the road

Pious Christians were drawn to assist fellow Christians arriving at Jerusalem. Muslim tolerance alternated with long periods of intolerance, to which the mostly Eastern Christian local population suffered most. There are many reports of gruesome incidents. To enter Jerusalem, pilgrims on foot needed to pay one gold piece each at the Jaffa Gate and it was also not unusual to witness a couple of hundred starved Christian pilgrims at the gates of Jerusalem begging for money, to be able to complete the last few hundred meters of their 3,000 or 4,000 km long trip, as Robert, Duke of Normandy, did in 1036. During a pilgrimage of 7,000 unarmed pilgrims from Germany in 1064-5, their leader, Bishop Gunther of Bamberg writes a letter home, describing their misfortunes of hunger, thirst, harassment by Hungarians, attacks by Bulgars and Cilicians, being driven away by Turks and insulted by Greeks and Constantinopolitans. On Good Friday 1065, hundreds were killed near Caesarea by a horde of Arabs.⁷⁶



A Byzantine soldier of the X-XII century

In view of forming identity of those engaged with the hospice, the general bad treatment of Christian pilgrims has set a certain tone regarding Muslims and Muslim rulers, general lawlessness, brutal

treatment and slavery committed by highwaymen and the population, who had a common dislike of Christians. The usual hospitality of providing shelter and food for Christian pilgrims were unknown customs in Muslim Palestine. Christian charity seemed not to have been a universal concept of reciprocal altruism able to cross the cultural divide from Europe to the east.

Pilgrims were always at risk, certainty also in Europe and most certainly in the Byzantine Empire. Sumption and Ure give many examples of robbers, angry farmers, malicious innkeepers, corrupt officials, greedy transport providers and the lot.⁷⁷ But in Palestine there was this extra flavour of maltreatment due to the differences of religion and even of the interpretation of religion between co-religionists. The region was usually in turmoil as Arab and Turkish tribes and gangs fought amongst each other or against the Byzantine Empire. Nonetheless, the Arab and Muslim authorities were conscious of the economic advantages of pilgrimage, although they had little grip over the myriad of tribes and kinsmen along the most important routes.

For this reason, the wealthier pilgrims travelled with an armed escort. For most pilgrims it was safer to travel by sea, although that was not without its dangers too. Cases are known that captains sold their cargo of pilgrims wholesale as slaves to Arabic trading partners. Venice was by far the most important and best equipped service provider for sea travel to the Holy Land. Nicole Chareyron provides a sample of people who had been on board of a vessel for five weeks, embarking at Venice. When they saw the coastline of the Holy Land, and on disembarking, the pilgrims were elated and shared the liturgical repertoire, united in a moment of fulfilment. Then harsh reality set in and shattered that moment of happiness hard and abrupt. The moment the pilgrims disembarked, the crew stood in line, cup in hand, expecting and soliciting gratuities. And at times there was open hostility when disembarking, making the anticipated entry into the Holy Land a wholly disappointing and scary business. The roads from the coast to Jerusalem were full of danger and many pilgrims were taken into slavery, raped, sodomised, robbed, or kept for ransom.⁷⁸

The troubles really started on landing at Jaffa, for instance, because the road from Jaffa to Jerusalem was extremely dangerous. Most pilgrims in the eleventh century grouped together and travelled in a band for self-defence reasons; only the foolhardy travelled alone or with a few companions. As can be noticed from the above examples, numbers and group size were no guarantee for safe arrival. Usually, pilgrims would wait until a nobleman and his retinue, or a bishop with many followers, started their voyage, and then the individual pilgrims attached themselves to the group.

A passage taken from Aldhouse-Green may give an insight into how easy it was to prey on Christian pilgrims. She writes that one could see a band of pilgrims coming from afar, raising dust on the road. Christian pilgrims were easy to recognise, their robes and emblems gave them away. The healthy, the lame and the sick all carried votive offerings, and had money for taxes and tolls. They yearned healing and spiritual nourishment, longing to reach the holy shrines of Jerusalem. They were not alone, many groups travelled from the harbour towards the city, some times in one large group, other times in smaller bands. It could get quite crowded in the high season. Between the groups one could observe smaller groups of people moving with difficulty, the wounded and the sick. Some of them did not walk on their feet but slowly travelled on their knees. The mortification of the flesh was seen as an insurance or assurance to receiving divine grace at the destination's shrines.⁷⁹

Gerard, the Institutor of the Hospital c. 1070-1099

Gerard, according to some sources indicated above, was regarded as a *vir probate conversationis* (transl. a man of approved conduct). Jacques de Vitry, quoted by De Vertot in his *Historia Hierosolymitana*, adds that a Gerard was a *vir quidam sanctae vitae & probate Religionis* (transl. a certain man of a pious life and of proper religious outlook). Gerard was not a Benedictine monk, but seemed to be an oblate and a lay member of the monastery.⁸⁰

Italian identity of Gerard

The actual identity of the founder is shrouded in mystery and not much is really known about him, but this did not hinder the Italians and later the French to make their claim on his origins. Unconfirmed sources attribute the Italian provenance of Gerard as Gerardo Sasso or Saxo di Scala, from that part of Amalfi which is referred to as Scala (of the monastery). The early identity is undoubtedly Amalfitan and the year 1070 is often accepted, but not confirmed by any documents, as the starting year of a young Gerard involved in managing the hospice.

It can be gleaned from later developments of the Hospital that Gerard, whomever he was, proved to be a very versatile administrator, with a piety-driven determination and endowed with intelligence and commercial insight, at first carrying out orders from the abbot and later developing himself to an independent manager of an independent hospital.

The start of his career could not have been an easy one. When the influential Amalfitan merchant Mauro died in 1071,⁸¹ it is thinkable that the Amalfitan influence gradually diminished and that the financing of the complex experienced difficulties. This probably was an impulse for the very enterprising Gerard to start looking for financing elsewhere and at the same time it gave him more room to manoeuvre.

Another drive for independence for Gerard must have undoubtedly been the annexation of Amalfi by the Normans in 1073.⁸² Robert Guiscard had already ousted the last of the Byzantine forces from Italy, by taking Salerno and Bari on 16 April 1071, effectively relegating the phrase 'Byzantine Italy' to the past.⁸³ The 'most Byzantinized' Italians were now in Jerusalem without the protection of their former overlord. Nonetheless, Amalfi, although affected by the Norman overlordship, seemed to go about its business, but not as usual. Changing mercantile circumstances and the restrictions of their port and size played equal significant roles.⁸⁴ When Amalfi was incorporated by the Normans, their power, wealth and influence dwindled. Skinner reports that the wealthy merchant Pantaleo's

position was endangered when Amalfi surrendered to Robert Guiscard in 1073. Amalfi was now submitting to a new ruler who was not in favour of the Byzantine Empire, the longstanding partner of Amalfi.⁸⁵ What this all meant for Gerard was that he seriously needed to find other sources of patronage and income. This would require separation of identity and independence from the Amalfitans.

The Seljuk invasion of Jerusalem

A much bigger disaster was the occupation of Jerusalem by the Seljuk Turks after the Battle of Manzikert in Armenia. Consequently, they took over Jerusalem from the Fatimid Egyptians between 1071 and 1098,⁸⁶ after which Jerusalem shortly reverted to Egypt until June 1099, when the First Crusade ransacked Jerusalem. The Seljuk Turks were not quite as tolerant as the previous rulers, and De Vertot notes that there are no words sufficient to describe the cruelties committed by the Turks to the Egyptians. The inhabitants were treated slightly better, although a large number were butchered. The hospice was plundered and they would have destroyed the Church of the Holy Sepulchre too, if, so writes De Vertot, "these Barbarians, fierce and cruel in their nature...had not their avarice restrained their impiety." On the one hand, the Seljuks apparently did not want to lose the revenue from the Christian pilgrims, but on the other hand they loathed these Christians and thus they raised the tributes. This, so De Vertot complains, "gratified at once their avarice and their hatred to everything that bore the name of Christian." The pilgrims, having come so far, and having spent all their money, stripped of all their valuables and possessions by thieves and robbers, fatigued by hunger and misery, were not able to pay the higher tributes and died at the gates of Jerusalem. The Seljuks denied the dying even the pleasure of just seeing the Church of the Holy Sepulchre before expiring. Those who survived the ordeal and returned home, spread their indignation by means of grand and compelling narratives of suffering at the hands of the Barbarians and to suffer even more as long as the holy places were under the control of the infidels. De Vertot sees the atrocities at Jerusalem as the spark which sets off the Crusades. The Greeks were too weak to do anything against the Seljuk Turks, so someone had to come to the rescue.⁸⁷ Many contemporaries



A possible self-portrait of William of Tyre (c.1130-85) writing at his desk

saw the Crusades as a form of self-defence after 450 years of Muslim incursion into Europe.⁸⁸

William of Tyre, in Book X: 71-73, gives an account of the pilgrims' situation in Jerusalem in 1071, when the city was captured by the Seljuk Turks.

Numerous Greek and Latin pilgrims arrived at Jerusalem after the Seljuks took over, having survived many perils and ordeals. Their goal was to worship at the various holy sites of the city, however the gatekeepers refused them access until the payment of one gold piece per person had been made. For those who had run out of money, or were robbed along the way, meant that being barred from the city would lead to starvation and death. William of Tyre speaks of more than a thousand pilgrims caught in this situation. The citizens of Jerusalem (Tyre refers here to the Christian part of the population) tried to remedy the situation, even by burying the dead. But even those who finally managed to get into the city, their lives were in danger. The Christians tried to keep an eye on those wandering in the streets and visiting the shrines. The only relief available was at the Amalfitan monastery of St Mary of the Latins, with its pilgrims' hospital dedicated to St

John the Almoner. Here pilgrims were taken care off, with the expenses paid by the monastery or by the offerings made by wealthier pilgrims. It was estimated that only one in a thousand pilgrims was able to maintain himself.

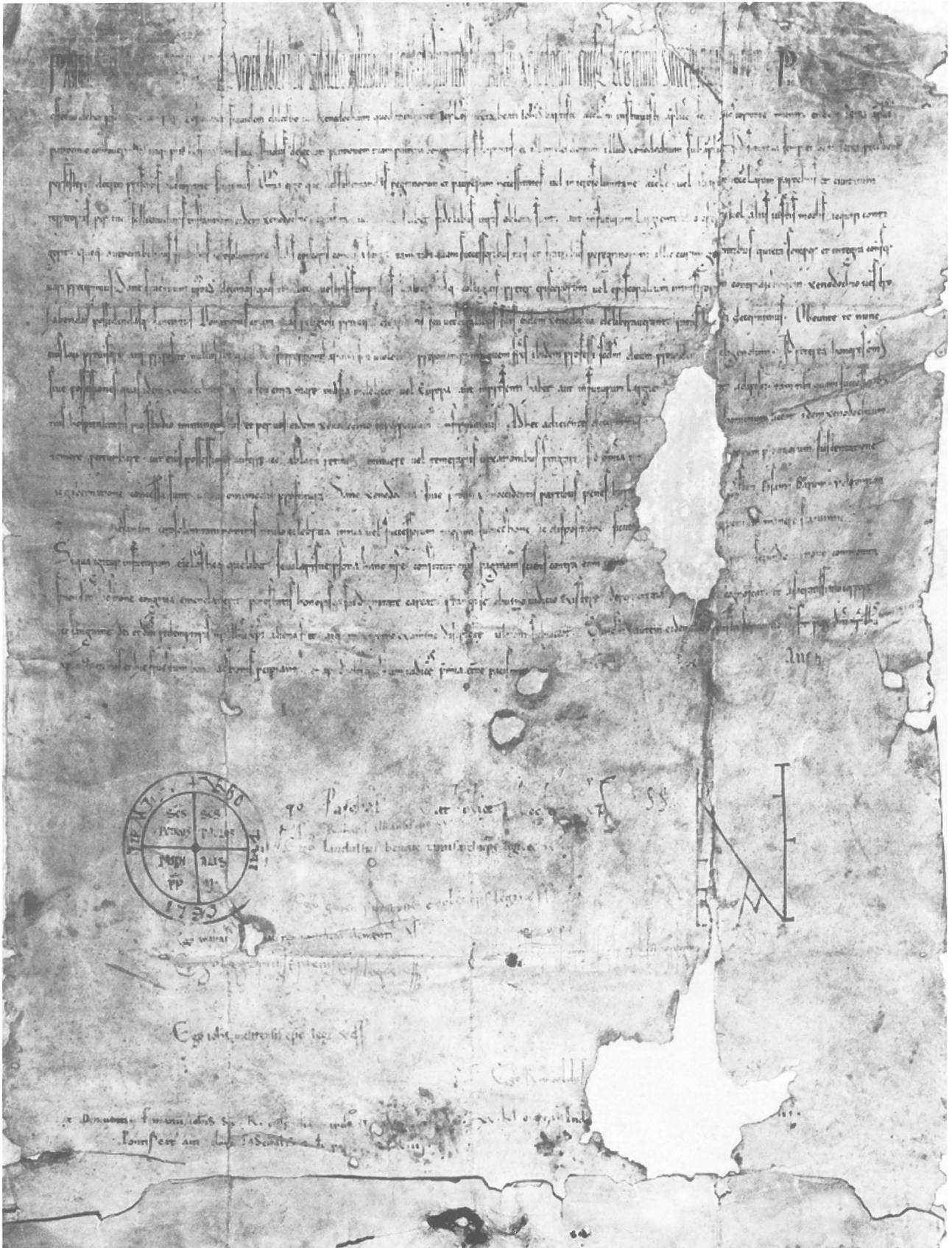
With the 1071 Seljuk invasion of Jerusalem, pilgrimage to the Holy Land was once again halted for the masses. This event brought to an end what was probably the most valued Western Christian pilgrimage route.⁸⁹ Pilgrimage continued, but only for the wealthier patrons, due to the high cost of travel and to enter Jerusalem.

How did the Amalfitan hospices survive in Jerusalem during this period? Most probably, the historical trading relationship with the Muslim world had some weight in the matter, as it had been a mutually respectful and profitable undertaking. More than that, the Amalfitans had been allies of the Muslims for over 150 years. Besides, before the First Crusades arrived in 1099, the Shi'it rulers of Jerusalem were the in-betweens for alms donated to the hospital. Those alms were probably collected from pilgrims at the gates of Jerusalem, as gifts, which the town officials collected themselves and passed on, undoubtedly after skimming their 'commission'. Another reason given why the hospital survived is that it admitted also many non-Christians for care, to accommodate the Seljuk regime. Another source says that the Church of the Holy Sepulchre and the Hospice could continue by paying taxes to the city rulers.⁹⁰

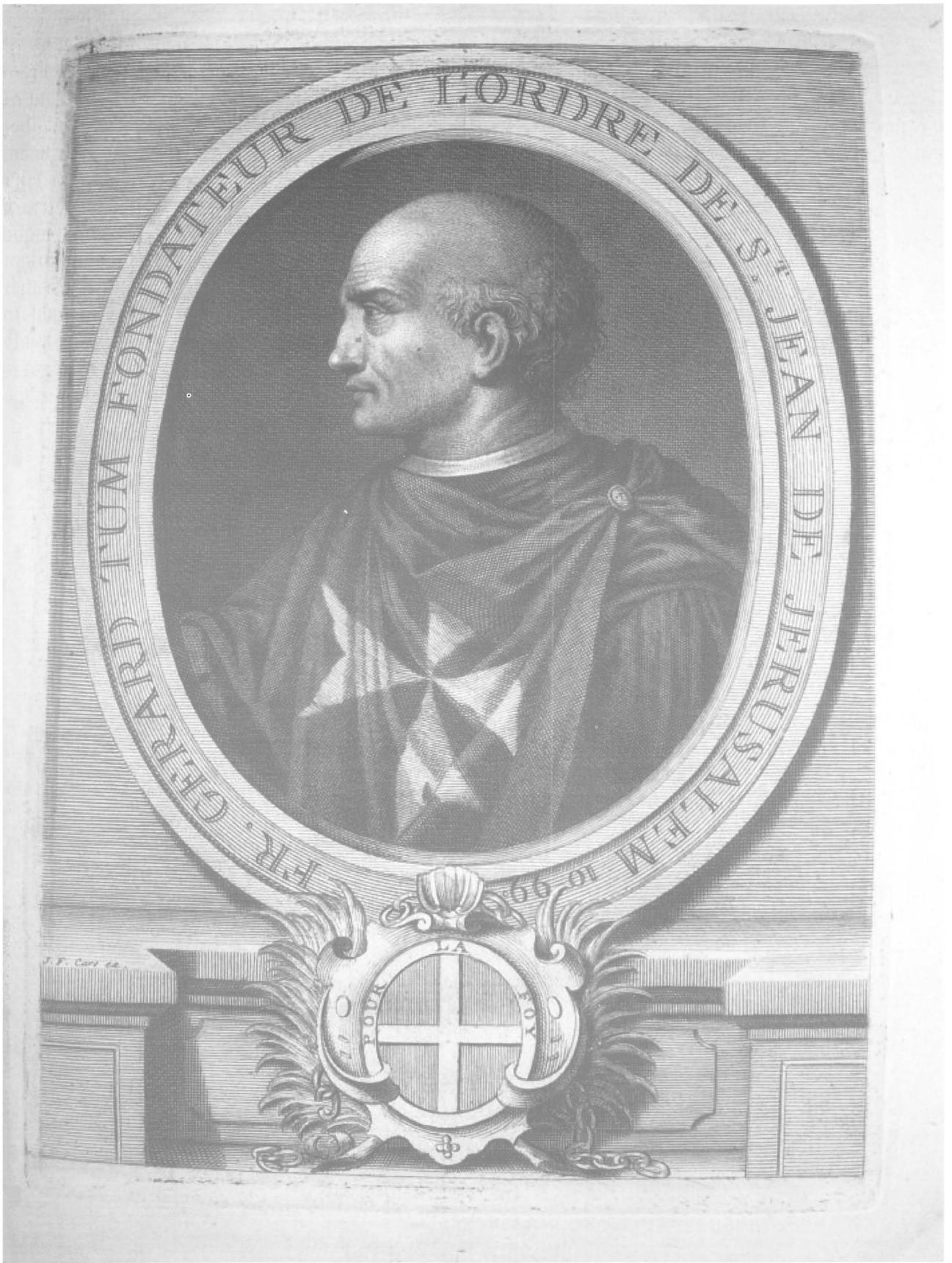
Adaptation of the Benedictine Rule

John, the visiting Amalfitan Archbishop noted that the Benedictine monks at St Mary's lived a life closely to that of a religious life, but not quite *vitam religiosam fere instituerant*. This was understandable, since those engaged in charity could not live a full contemplative life as those religious within the monastery. The *fratres conversi* were the lay brothers who lived according to a modified religious Rule, relieving the choir monks from too many distractions.⁹¹

By the eleventh century, various monks felt that the Rule of St Benedict, which had been the standard



The Papal Bull *Pie Postulatio Voluntatis* of 15th February 1113 which confirmed the foundation of the Order of St John, born as a hospitaller order in the Holy Land



From Geraldo to Gérard – the founder of the Order

model for monastic life for the last five centuries, no longer satisfied the demands of a rapidly changing society, with its increasing urbanisation, growing literacy, and shifts in distribution of wealth and power. This led in some cases to a more progressive approach, while also the opposite occurred. Some reforms aimed at restoring observance of the Benedictine Rule to its original purity, trimming away later additions. There also developed groups of clerics (or ‘canons’) living in communities in a more rigorously ascetic lifestyle than the Rule of St Benedict prescribed, following the set of ancient texts known as the ‘Rule of St Augustine’.⁹²

Gerard not only adapted the Benedictine Rule to the harsh reality of his day, he started formulating rules specific for the changing circumstances and the challenges of that particular environment in Jerusalem and Palestine. Benedictine Rule organises the life within a monastery. What Gerard needed was a Rule which would cover their actions in the hospital as nurses and outside the home base too. Gerard was clearly blessed with what we would call today as lateral thinking. He stepped out of the monastery and went into the world and raised funds for the hospital in Jerusalem, organised a network of hospitals leading to Jerusalem, in the vein of a similar system leading from Europe to Santiago. The networking of Gerard should probably be understood as giving directional structure to a number of these hospices and charitable houses and bringing them within the Hospitaller franchise as dependencies.

From Geraldo to Gérard: losing the Amalfitan and gaining a French identity

After the annexation of Amalfi by the Normans in 1073,⁹³ and after the First Crusade, the French influence over the hospice in Jerusalem and pilgrimage to the Eternal City increased dramatically. The arrival of the mainly French crusaders in 1099 brought more French influence to the detriment of the Amalfitans, who disappeared from the picture. Geraldo, the Italian or Amalfitan was thus soon forgotten, as was his Amalfitan identity, and appeared now as Gerard, a Frenchman from the Provence. De Vertot mentions Gerard for the first time in his text at this point, as the

administrator of the hospital of St John, as a Frenchman. In the French version of the history of the Hospital, Gerard becomes Frère Gérard or Frère Pierre-Gérard de Martigues, born on the island of Martigues in the Provence (c. 1046-3 – September 1120). Whatever his provenance may have been, in the end this was claimed by what would later become the Langue of Provence. This designed turn of fortune meant that later the Tongue or Langue of Provence would become the most important langue of the Order because they provided or rather produced in hindsight the founder of the Hospital. In order to confirm the Provencal superiority, the body of Gérard was translated to the city of Manosque in the Provence, where the relic was kept until the French Revolution.

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- 1 René Aubert de Vertot, a.k.a Abbé de Vertot was born on 25 November 1655 at the Château de Bennetot at Caux, Normandie, and died on 15 June 1735 at Paris.
R.A. de Vertot, *Histoire des chevaliers hospitaliers de Saint-Jean de Jérusalem 1726*. Facsimile of the 1728 English edition: *The History of the Knights Hospitallers of St John of Jerusalem, styled afterwards the Knights of Rhodes and at present the Knights of Malta* (Malta, 1989). Two volumes.
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- 3 Ibid., 18.
- 4 H.J.A. Sire, *The Knights of Malta* (New Haven & London, 1996), 3.
- 5 De Vertot, Vol. I, Book 1, 7.
- 6 G.G. Buttigieg, 'The early Hospital at Jerusalem c. 1080-1187,' *Journal of Monastic Military Orders* 3 (2010), 95-106.
- 7 R. Kaviani, N. Salehi, A. Zaki Berahim Ibrahim, M. Roslan Mohd Nor, F. Ahmad Faisal Abdul Hamid, N. Hj Hamzah & A. Yusof, 'The Significance of the *Bayt Al-Hikma* (House of Wisdom) in the Early Abbasid Caliphate (132 A.H.-218 A.H.)', *Middle-east Journal of Scientific Research* 11/9 (2012), 1276.
- 8 R. Hiestand, 'Die Anfänge der Johanniter', in J. Fleckenstein & M. Hellmann (eds), *Die geistlichen Ritterorden Europas* (Sigmaringen, 1980), 31-80.
- 9 J.W. Brodman, *Charity and Religion in Medieval Europe* (Washington D.C., 2009), 10.
- 10 R. Gryson (ed.), *Biblia Sacra; iuxta Vulgatam Versionem* (Stuttgart, 1994).
- 11 Brodman, 5.
- 12 Ibid., 12, 42.
- 13 J. Sumption, *The Age of Pilgrimage. The Medieval Journey to God* (Mahway, N.J., 2003), 280-3.
- 14 W. Melczer, *Codex Calixtius: The Pilgrims' Guide to Santiago de Compostela* (New York, 1993), 54-5.
- 15 Ibid., 132-3.
- 16 Ibid.
- 17 Ure, 18-9.
- 18 M.T. Clark, *Augustine of Hippo* (Mahwah, N.J., 1984), 482.
- 19 T. Fry (ed.), *The Rule of St Benedict in English* (New York, 1998), xv-xviii. Benedict lived in uncertain times. The central Roman administration had collapsed in 476 during Gothic invasions and Italy was largely in the hands of the Goths. The Byzantine Emperor Justinian I, tried to invade Italy and take it back; the result was a twenty-year civil war. Thomas Fry tells us that Benedict studied at that time in Rome and did not like the paganism of the Goths. He decided to withdraw from the world and live in a cave and to write his Rule.
- 20 M.D. D'Aronco, 'The Benedictine Rule and the Care of the Sick: the Plan of St Gall and Anglo-Saxon England', in B.S. Bowers (ed.), *The Medieval Hospital and Medical Practice* (Aldershot, 2007), 236.
- 21 Ibid., 235-52.
- 22 A. Marr, *Tools for Peace, The spiritual Craft of St Benedict and Rene Girard* (Lincoln, N.E., 2007). n.p.
- 23 W.R. Cook & R.B. Herzman, *The Medieval Worldview* (New York, 2004), 136-7.
- 24 Marr, n.p.
- 25 Ibid.
- 26 Buttigieg, 95-106.
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- 29 A. Nasser Kaadan & M. Angrini, 'To What Extent Was Montpellier, the Oldest Surviving Medical School in Europe, Inspired by Islamic Medicine?', *International Society for the History of Islamic Medicine*, 12-13, 23-24-25-26 (2013-2014), n.p.
- 30 H.G. Koenigsberger, *Medieval Europe 400-1500, A History of Europe* (New York, 1994), 50-2.
- 31 A. Janse, *Ridderschap in Holland: Portret van een Adellijke Elite in de Late Middeleeuwen* (Hilversum, 2001), 21-9.
- 32 J. Huizinga *Herfsttij der Middeleeuwen* (Groningen, 1985 [1919]), 60-8.
- 33 Janse.
- 34 Huizinga, 60-8.
- 35 Janse.
- 36 W. Montgomery Wyatt, *The Influence of Islam on Medieval Europe* (Edinburgh, 1987), 50.
- 37 Koenigsberger, 185.
- 38 De Vertot, 'ex libro decimo octavo Historiae Willelmi Tyriensis Archiepiscopi Cap 4. p. 933' (Vol. I, Book 1, proof 1), 1-3.
- 39 R.P. Bergman, 'Byzantine Influence and Private Patronage in a Newly Discovered Medieval Church in Amalfi: S. Michele Arcangelo in Pogerola', *Journal of the Society of Architectural Historians* 50/4 (1991), 421-45.
- 40 B.M. Kreutz, *Before the Normans: Southern Italy in the Ninth and Tenth Centuries* (Philadelphia, 1991), 160-4.
- 41 Bergman, 427-29.
- 42 Skinner, 218-9. At his life's end, Mauro entered the community of Monte Casino. He and his son Pantaleo had paid for a new set of bronze doors for a rebuilt church at the monastery of Monte Casino (p. 105).

- 43 Kreutz, 160.
- 44 Ibid., Ch. 5.
- 45 H.J. Nicholson, *The Knights Hospitaller* (Woodbridge, UK & Rochester, NY, 2003), 2.
- 46 J. Riley-Smith, *The Knights Hospitaller in the Levant, c. 1070-1309* (Houndsmills, 2012), 16.
- 47 Sire, 3.
- 48 Kreutz, 165.
- 49 De Vertot, (Vol. I, Book 1), 7.
- 50 Sire, 3.
- 51 Sumption, 234, 280-1.
- 52 De Vertot, (Vol. I, Book 1), 7.
- 53 J. Riley-Smith, *The Knights of St. John in Jerusalem and Cyprus, 1050-1310* (London, 1976), 34-7; T. Miller, 'The Knights of St. John and the Hospitals of the Latin West', *Speculum*, 53/4, (1978), 727-8; Skinner; Sire, 3-4; Nicholson, 1-4.
- 54 J. Burgtorf, *The Central Convent of Hospitallers and Templars* (Leiden, 2008), 31, quoting John of Würzburg's *Description of the Holy Land* (London, 1890), 133.
- 55 Buttigieg, 95-106.
- 56 De Vertot, (Vol. I Book 1, Proof 1), 1-3.
- 57 A.J. Boas, *Jerusalem in the Time of the Crusades. Society, Landscape and Art in the Holy City under Frankish Rule* (London, 2001), 83.
- 58 D. Pringle, 'The Layout of the Jerusalem Hospital', in J. Upton-Ward (ed.), *The Military Orders. Vol. 4: On Land and by Sea* (Aldershot, 2008), 94.
- 59 De Vertot, (Vol. I, Book I, Proof 1), 1-3.
- 60 William of Tyre, *A History of Deeds Done Beyond the Sea* (New York, 1943), 1138-44.
- 61 De Vertot, (Vol. I, Book I), 7.
- 62 D.G. Duchesne, 'The Changing Position of the Serving Brothers and their Caritative Functions in the Order of St John in Jerusalem and Acre, ca. 1070-1291' (unpublished M. Phil thesis, University of Sydney, 2008), 40-6.
- 63 Buttigieg, 95-106.
- 64 Ibid.
- 65 <http://www.sci-news.com/archaeology/science-building-hospitaller-knights-israel-01285.html> [Accessed 8.viii.2013].
- 66 De Vertot, (Vol. I, Book 1, Proofs), 4.
- 67 De Vertot, 'ex Historia Hierosolymitana Jacobi Vitriaci Cap. 74' (Vol. I, Book I), 1-2.
- 68 De Vertot, 'ex libro decimo octavo Historiae Willelmi Tyriensis Archiepiscopi Cap 4. p. 933' (Vol. I, Book I), 1-3.
- 69 De Vertot, (Vol. I, Book I), 8.
- 70 Pringle, (2008), 90-110.
- 71 De Vertot, (Vol. I, Book 1), 4, reproducing part of 'ex Historia Hierosolymitana Jacoby Vitriaci, Cap. 74.' & loci apud Dominum protectorum beatum Joannem Eleemons devotissime venerantes & ipsum dominum & advocatum suum confitentes.'
- 72 D. Pringle, *The Churches of the Crusader Kingdom of Jerusalem. A Corpus. Volume III The City of Jerusalem* (Cambridge, 1993), 193. Pringle, confirms the description of the site by William of Tyre and gives a summary of the development of the site. According to the research of Pringle (quoting from Vincent and Abel. *Jérusalem. Recherches de topographie, d'archéologie et d'histoire. Tome Second: Jérusalem Nouvelle. tome 1 – Fascicule 1 Texte et Planches, & idem. tome 2 – Fascicule 1 and 2* (1914) 385, 643), there was at the site where later the hospital of the Order would arise, a church dedicated to St John the Baptist, including his relics, which church was built between 386 and 388 on the Mount of Olives, outside the city walls, by a Latin priest by the name of Innocent. Inside the city wall, however, there was the monastery of St John, which was the stage of a mass killing of over 4,000 people during the Persian sack of Jerusalem in 614 (Pringle quotes here Strategios XXIII. 31 CSCO.CCIII.52). The Byzantine influence was of great importance to the Amalfitans. If one compares Pringle's plan of the hospital with Bergman's Amalfitan churches (p. 436), the building of the hospice of St John seems to have been a very Byzantine affair, as confirmed by Avni.
- 73 De Vertot, (Vol. I Book 1), 8.
- 74 <http://www.sci-news.com/archaeology/science-building-hospitaller-knights-israel-01285.html> [Accessed 8.viii.2013].
- 75 Burgtorf, 27.
- 76 Sumption, 256-8.
- 77 Ibid. 256-98; Ure.
- 78 N. Chareyron, *Pilgrimage to Jerusalem in the Middle Ages* (New York, 2005), 130-5.
- 79 M. Aldhouse-Green, 'On the road', *British Archaeology*, 52 (2000), <http://www.archaeologyuk.org/ba/ba52/ba52feat.html> [Accessed 26.viii.2012].
- 80 De Vertot, (Vol. I Book 1, Proofs), 4.
- 81 Skinner, 219.
- 82 Ibid., 218-9.
- 83 J.J. Norwich, *Byzantium, the Decline and Fall* (London, 1991), 2.
- 84 Kreutz, 268-77. Eventually, Amalfi succumbed to Roger II in 1131.

- 85 Skinner, 218.
- 86 C. Catherwood, *Making War in the name of God* (New York, 2007), 27.
- 87 De Vertot, 9.
- 88 T.F. Madden, *The New Concise History of the Crusades* (Lanham, 2006), 5.
- 89 Ure, 20.
- 90 Riley-Smith (2012), 19-20.
- 91 Ibid.
- 92 P. Horden, 'A Non-Natural Environment', in Bowers (ed.), 133-46.
- 93 Skinner, 219.