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Volume 37, Number 1, Winter 2014

URI: https://id.erudit.org/iderudit/1090803ar
DOI: https://doi.org/10.33137/rr.v37i1.21287

Cite this review
Crawshaw, Jane L. Stevens.

*Plague Hospitals: Public Health for the City in Early Modern Venice.*


In this carefully researched and engaging study, Jane L. Stevens Crawshaw offers a focused and multifaceted history of Venice’s two iconic lazaretti, or plague hospitals: formidable castle-like structures occupying their own islands in the Venetian lagoon. Contributing to a growing revisionist scholarship on medical institutions, Crawshaw balances traditional medical aspects of diagnosis and cure with civic, religious, and economic concerns in order to understand Venetian lazaretti in their specific local contexts. While the study is focused on Venice and its peninsular lands (with only a few comments on plague and its management in Venice’s Adriatic and Ionian colonies), Crawshaw enhances her discussion with comparisons with other plague hospitals in Italy and Western Europe.

Plague hospitals emerged throughout Europe in the fifteenth and sixteenth centuries as specialized institutions designed to separate the suspected “plague sick” from the uninfected in order to prevent the spread of the disease, to attempt to heal the sick, or else to serve as places where the sick could die and be buried at arm’s length from the healthy. They were also depots that quarantined goods, merchants, and travellers coming from suspected plague-ridden places. Crawshaw’s work differs from that of a previous generation of historians who, approaching these institutions through a Foucauldian lens, portrayed hospitals and lazaretti as jails, institutions of social repression where the state forcibly locked away the sick—usually the urban poor—and kept them out of sight until they died. Crawshaw problematizes these assumptions by carefully examining the day-to-day functioning of Venice’s plague hospitals and situating them within the web of *La Serenissima*’s institutional responses to social problems through charity, poor relief, and healthcare. Far from seeing Venetian lazaretti as “antechambers” or “charnel houses” of death, Crawshaw reveals the diverse ways the Venetian state and the administrators and staff of plagues hospitals attempted to intervene positively in the lives of the sick in order to cure them and alleviate their suffering, or else to isolate them and prevent plague from spreading. The aim, Crawshaw contends, was always to promote the physical and economic health of the city and its inhabitants. Approaching the subject...
from this perspective, Crawshaw offers a balanced and nuanced treatment of a complex institution operating in times of crisis and mass mortality.

The book is divided into six rich chapters, an introduction, conclusion, and epilogue. The first chapter, “First Impressions,” explores the architecture, design, and physical elements of the lazaretti, offering the reader what an early modern patient might have seen, smelled, and felt walking about the island institution a few kilometres from Venice. The second chapter introduces the plague sick and describes the means and mechanisms by which they came to the lazaretti for quarantine, cure, and (despite best efforts) almost inevitably death. Crawshaw shows that the social status, age, and gender of patients varied. While poor men, women, and children comprised the greatest number of patients, men active in commerce and trade as well as ambassadors and other foreign dignitaries often found themselves and their goods quarantined on the lazaretti islands, though in more comfortable surroundings. While Crawshaw argues that the generally assumed relationship between plague and the “viliified poor” (80) was not as set in the sixteenth century as it would be in the seventeenth, her findings do reveal that wealthier Venetians were not well represented in this institution; when suspected of plague, they were mostly quarantined in their own homes in the city. The third and fourth chapters introduce the hospitals’ staff: from the prior and prioress, who ran the institution, to the various medical practitioners who treated the sick; the chaplains and custodians; the disinfectors of goods; and the dead-body clearers (pizzigamorti). The fourth chapter also catalogues the various remedies and therapeutic interventions provided in the hospital. The fifth and most haunting chapter describes in vivid detail the rituals surrounding death in the hospital and provides mortality statistics. Here Crawshaw highlights the difficulties staff and administrators faced as they strove to offer patients a “good death” in line with Catholic burial practices. Plague corpses were considered dangerous; mass mortality meant that they had to be dealt with quickly and cheaply. With space always at a premium, corpses were generally laid in deep pits (up to four people deep) or were burned. Though potentially detrimental to the afterlives of the dead, these measures, Crawshaw argues, were adopted to benefit the living. The final chapter leaves the reader on a somewhat more optimistic note by discussing what happened when an epidemic ended and by speculating on the process of “Returning to the City” when one was healed. Though little documentation exists from which to recreate what life might have been like for a lazaretto survivor,
Crawshaw shows that some survivors were put to work within the city, where they contributed to public health by treating the sick and disinfecting goods; such initiatives were also meant to give employment to those whose lives had been disrupted by their stay on the island hospitals. In sum, Crawshaw shows that early modern Venetian public health policies that clustered the plague sick onto the lazaretti islands were not draconian attempts at socially repressing the sick poor but rather state policies aimed to balance contemporary medical and religious ideas about care and cure—with the imperatives of protecting the city and its all-important trade economy.

A stimulating case study of two hospitals in their specific medical, social, political, and economic contexts, this book should be read by all historians of medicine and epidemic disease in early modern Europe. It also significantly contributes to the historiography of early modern Venice by showing how economic, spiritual, and civic concerns shaped public health initiatives and state building. *Plague Hospitals* should serve as a model for how to research and write about complex and multifaceted institutions in relation to the specific social and political contexts in which they operated. The volume is handsomely constructed and enriched with high quality images of contemporary maps, architectural plans, photographs of objects, and archeological sites. This however means that *Plague Hospitals* is expensive; its $124.95 price tag will likely put it out of reach for most scholars.

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**Debbagi Baranova, Tatiana.**

À *coup de libelles* is the revised version of a doctoral thesis supervised by Denis Crouzet, who provides the book’s preface. Those familiar with Crouzet’s work on the culture of religious conflict in sixteenth-century France will recognize his influence in Tatiana Debbagi Baranova’s contribution. Like Crouzet, she