

# FEMALE EMPLOYEES IN THE MEDICAL SERVICES OF THE ORDER OF ST. JOHN IN MALTA

While the role of the male administrative and professional staffs in the running of the medical organisation of the Order of St. John has been amply studied by historians, the contributions by women engaged as employees in the same health services have not been accorded the recognition that they deserve. This paper attempts to focus attention on this aspect.

Women were employed in three branches of the medical services — at the Holy Infirmary, at the Hospital for Women and in the District Medical Service. The female employees in the three sections were as follows:

## HOLY INFIRMARY

(a) The *ospedaliera* (Hostpittaller) who had the duty of caring for the foundlings as soon as they were deposited inside the infirmary and removed from the revolving cot or *ruota*. She was especially charged to ensure that the prescribed lead counter bearing the seal of the Holy Infirmary was hung round the neck of each foundling. This counter served to identify the baby when the infant was eventually farmed out to a foster-mother.

The *ospedaliera* was also enjoined to exercise an over-all supervision over the wet-nurses (*balie*) and foster-mothers and to inspect the babies every Easter to ascertain that they were well looked after and nourished. When these foundlings were weaned they were returned to the *ospedaliera* who then brought them up in rooms in the infirmary and in the *camerata* building across the street until the girls were three years of age and the boys seven years old when they were transferred to other institutions (1).

For the best part of the seventeenth century the *ospedaliera* was recruited from members of the same family. Clemenza Borg had served in this capacity "all her life". She contracted the plague during the epidemic of 1675-76 while caring for patients but recovered. She was succeeded by Domenica Muscat whose son had married Anna, daughter of Clemenza. When Domenica, in turn, retired in 1696, Anna was appointed to the post having been judged to be quite familiar with the duties of *ospedaliera* as she had spent a good deal of time in the infirmary, presumably during the time that her mother Clemenza had been in office (2).

Towards the close of the 18th century the post was occupied, in 1783, by Teresa L'Hoste who was succeeded in 1796 by Maria Anna L'Hoste, a close relative of Teresa (3).

(b) The *sotto-ospedaliera* (Assistant Hospitaller) was the assistant of the *ospedaliera* whom she helped in the general care and management of the foundlings (4).

(c) The *balie della casa* (Hospital wet-nurses) were two in number. They resided in that part of the Holy Infirmary known as *Casa dei figlioli e figliole* (sic) (House for male and female infants). They were thus always available at all times to breast-feed the foundlings as soon as these were deposited within the premises of the infirmary and until foster-mothers were found for them. When these wet-nurses could not cope with all the breast-feeding that had to be provided, the infants were reared on goat's milk.

Before being taken on the staff of the infirmary, the wet-nurses were examined by hospital physicians to ensure that they were free of disease. During the time of their employment they were supervised by the *ospedaliera* to make certain that they were not failing in their tasks (5).

(d) The custom of engaging *balie di fuori* or *nutrici forastiere* (foster-mothers) was already established by 1574. They lived outside the hospital, hence their name of "outside" or "extra-mural" wet-nurses. The regulations drawn up in 1612 for the proper running of the infirmary refer to the manner in which these women were enjoined to bring up their charges, among which was the rule that required them to bring the infants periodically for inspection by the Grand Hospitaller at the infirmary.

They were selected for appointment by the Infirmary, the lay superintendent of the Infirmary. They were required to be "honest" Christians and persons of integrity (6).

(e) In accordance with "ancient usage", an "elderly and experienced" woman was engaged with the specific duty of medicating sufferers from ringworm (7); hence her designation as *donna per la tigna* (Woman for the ringworm) (8). She did not receive a salary but was paid only for every patient that was certified to be cured (not merely treated) by the Principal Surgeon and Principal Physician of the Infirmary. In July 1792 the post was given to a male barber-surgeon (*barberotto*) (9).

#### CASSETTA DELLE DONNE or OSPEDALETTO (Women's Hospital)

(a) The *ospitaliera* (sic) was the lay official immediately responsible for the running of the hospital domestic affairs. She was also known as the *amministratrice* or *conservatrice* or *governatrice* or *maestra della casetta*. This governess resided on the premises and was in charge of the reception of patients against the presentation of a ticket of admission; she superintended the entrance of visitors and the closing of the hospital gates at night; she looked after the

use of the bed linen and after the cleanliness and comfort of the sick. She supervised the activities of the maid-nurses (*serve*) and also assisted the patients (10).

It appears that the first governess of the women's hospital was Prudentia, wife of Pasquale Grima, who after serving in this capacity for forty years was succeeded by her daughter-in-law Diana Grima, wife of Francesco, on 13 November 1674 (11).

At the beginning of the 18th century the incumbent was Maria Chicaci who, on reaching old age, was assisted by Maddalena Chicaci, her daughter-in-law. In 1718 Maddalena petitioned the Grand Master for her "future succession" to the post of governess for which she was strongly recommended by the Commissioners of the *casetta* who certified that "for many years" she had given her services gratis to the hospital and cared for the sick with "punctuality, fervour and charity" (12). Her petition was assented to by a decree of the Grand Master and confirmed in 1722 by which time she had served the hospital for twenty-two years (13).

Towards the mid-century the post was occupied by Graziella Bonet who appears to have risen to the top from the lower rungs as she was described as having been employed in the *casetta* for thirty-eight years in "various capacities" (14). Bonet was succeeded in March 1784 by Modesta Artau. Besides being a dependable person of "good character" she was also a woman "who knew how to exercise authority — which is precisely what is mostly required to keep the servants under control" (15).

(b) An *ostetrice* or midwife was on the staff of the Women's Hospital where a ward was reserved for expectant mothers. In 1782 the midwife in charge was Rosa Ciantar (16).

By 1802, the midwife was directed to sleep in the hospital during the night "to be ready to render help to parturient mothers at night" (17).

(c) The *bassa chirurgica* or *barberotta* carried out the functions of her male counterpart, the *barberotto*, at the Holy Infirmery. Base surgery consisted in the performance of blood-letting, the application of leeches, cataplasms, vesicants and cupping.

Towards 1765, the Bali Sigismondo Piccolomini, who was the President of the *casetta*, originated the idea of training the maid-nurses of the institution in the duties of *barberotto* so that by 1782 several of them "on leaving the hospital service were to be found scattered all over the island and were wanting to practise as *barberotti*". Among these women has gone on record a certain Teresa De Lucca who after seventeen years service at the *casetta* went to live in Nadur (Gozo). As there were no barber-surgeons in this village and the surrounding areas, she applied to the Grand Master to grant her permission "to practise base-surgery in the island of Gozo". Having been certified to be quite competent in this "branch of surgery" by the *protomedico* (Chief Govern-

ment Medical Officer) she was accorded the necessary licence on the 8 July 1782 (18). By the close of the century (1792) the post of barber-surgeon at the *casetta* was occupied by a male employee, Antonio Delicata (19).

(d) The food (*mancia*) for the women's hospital was cooked and prepared by the kitchen staff of the nearby Holy Infirmary and then conveyed across the street by slaves to the *casetta*; but on the staff of this institution there was a woman — *donna della mancia* — employed to serve the food after its arrival at the *casetta* and to warm it if necessary and also to keep in readiness a container with soup "for any patient who needed it at any time" (20).

In the last quarter of the 18th century, this employee was referred to as the "cook". After serving for eleven years as maid and thirteen years as cook, Teresa Vassallo asked to be allowed to retire on grounds of poor health in 1791. Her request was granted after the Commissioners of the *casetta* certified that she suffered from generalised tremors and had lost the sight of one eye while at work (21).

(e) Syphilis had been spreading in Europe since the close of the 15th century and by the 18th century it loomed large among the diseases that afflicted not only Europe but also Malta. Mercurial inunctions or anointing or smearing the skin with an ointment containing mercury or quicksilver was one of the orthodox remedies prescribed on the continent for this illness since the closing years of the 15th century.

Facilities for this type of treatment were provided at the *casetta*. The regulations of 1725 speak of a "man" on the staff of the hospital for "the mercurial inunctions and for carrying out all that was needed" (22), but in later years a woman — known as *spalmante* or *spalmiatora* — was engaged solely for the application of mercurial anointing. This form of treatment was not without risks to the health of both patient and anointer as poisoning from excessive absorption of mercury was known to occur. Writing in 1773, the surgeon of the Holy Infirmary, Michelangelo Grima, was advocating the use of a decoction of the sarsaparilla plant instead of mercurial therapy (23).

The mercurial treatment was carried out twice a year, i.e. in May at the beginning of spring and in September, at the beginning of autumn (1776) (24). A ward, dedicated to St. Francis Xavier, was reserved exclusively for patients with venereal diseases.

During the second half of the 17th and the best part of the 18th centuries, the post of *spalmante* was filled by women belonging to three generations from the same family. Anna Maria Alessi was on the staff from 1749 to 1786. She had succeeded her mother Aloisia Chetcuti who had retired after forty-six years service and who, in turn, had replaced her mother Gabriella who had been employed for the same period of time before her.

Anna Maria Alessi had outlived her usefulness by the time she had reached her fifty-fifth year of age in 1786 when her service was terminated because

"she no longer remained capable of administering the mercurial inunctions, so much so that her patients were never completely cured and they had to return to hospital for further treatment after a short time". Anna had hoped that, at least, the post would be offered to her daughter aged thirteen years whom she had been training for the job; but she was disappointed when the post was given to Dora Spiteri who had been highly recommended by the Chief Government Physician (25).

(f) Another very popular anti-syphilitic remedy, apart from mercurial anointing, was the vapour or steam or sweat bath. This consisted in heating the patient to make her sweat in the so-called "sweat wards" which by the mid-16th century formed an important part of the European hospital complex. In Malta these wards were located at the back of the hospital building away from the other wards as it was feared that the "bad air" emanating from them was harmful to patients suffering from other illnesses. The arrangement consisted of a chamber in which a log fire was lighted to heat an overlying room where the patient was placed (26). The woman in charge was the *stufarola* (steam bath attendant).

The regulations of the Holy Infirmary of 1725 speak of a male steam bath attendant — the *stufarolo* — as being responsible for the sweat baths at the *casetta* (27), but by 1765 he had been replaced by a woman to carry out this treatment at the *casetta* (28).

(g) The duties of the *spezialotta* (woman to administer medicines) are not specified in the regulations of the *casetta* drawn up in 1776 but they must have been the same as those of the *spezialotto* of the Holy Infirmary which consisted in accompanying the physicians and surgeons on their ward rounds and administering the powders, oils, tinctures and other medicaments either during the rounds or at the times prescribed by the physician. The *spezialotta* belonged to the category of the *serve* or maid-nurses for she is sometimes referred to in contemporary documents as *serva e spezialotta* (29). From 1751 to 1791 the post was occupied by Giovanna Bonet who retired on grounds of ill health at the age of sixty (30).

The regulations of 1802, the first to be issued during British rule, refer to two *spezialotte* one of whom was to carry the *cassettina* or small box containing the medicines "which are usually given to the sick during the visits of the physician such as cordials, preparations of opium and quinine, anodyne spirits and others which the Senior Physician orders to be placed in the small box" (31).

It is of interest to note that among the hospital silver that has survived from the *casetta* there is a spoon of the period 1802-9 with the word *spezialotta* engraved on the back of the handle (32).

(h) The earliest known *serva* (servant or maid-nurse) employed to look after

the patients at the *casetta* was Ortensia Grima who received her appointment from the Grand Master on 18 January, 1655 (33).

By 1776 there were four such employees. Besides nursing duties they also performed domestic chores. In fact their tasks were laid down as "making the beds and doing everything that was required for the service of the sick" (34). The regulations of 1802 were more specific with regard to their duties though the number of employees was left to the discretion of the administrators of the *casetta*. The duties comprised keeping the beds clean, washing the plates and cups, serving the sick at meal times, attending the physician and the surgeon during the ward round to receive nursing instructions from them, calling the resident priest for moribund patients and laying out and sewing up the bodies of the dead in preparation for burial. They were not allowed to leave the ward unless they arranged for some one to replace them during their absence and were enjoined to keep the lamps lighted during the whole night (35).

In the 18th century there was no pension scheme for employees and each one on reaching old age or on becoming medically unfit to continue with her work submitted a petition to the Grand Master for financial relief. Thus in February 1774 Giovanna Bonet retired on grounds of ill health because, at the age of 45 years and after having been on the staff for 25 years, "she was no longer able to move her fingers". She asked to be given "a subsidy, by way of charity, of ten *grani* and two small loaves a day as was usually given to similar employees". Another such request is recorded from Generosa Isouard when she retired at 50 years of age. Giuseppa Debono was granted a "bed (at the *casetta*) and meals, including two small loaves" following her retirement after "many years" of service in the hospital but in March 1783 she asked to be accorded a third loaf as she could not appease her hunger with the amount of bread she was already receiving (36). In the same year another attendant, Anna Bontempo, retired on becoming infirm at the age of 70 years; in 1792 Liberata Vella, after 14 years as a servant and 18 months as portress, had to leave the service on grounds of ill health which the Commissioners of the *casetta* attributed to her work (37).

(i) In addition to the members of the staff already considered, the *casetta* had a portress and three washerwomen on the list of its employees towards the close of the 18th century (38).

#### DISTRICT MEDICAL SERVICE

The *pitanziere* (alms-givers) were four elderly women employed to succour the indigent women who lay sick in their own homes. They visited the patients daily and brought them the medicaments and the food ordered by the doctor, financial relief and items of bedding. They were assigned one each to Valletta, Senglea, Bormla and Birgu. They were helped by four female "assistants" who carried the bread (39).

The *pitanziere* also distributed money to poor "decrepit" and physically disabled handicapped women (40).

The period covered by the rule of the Order of St. John over the Maltese Islands is notable for the dominance of the male element among the officials responsible for the management of its medical services. In those sectors, however, where the sick were women, female employees played a prominent role in the scheme of the medical organisation as for instance in the running of the Women's Hospital or *casetta*, in ensuring the nursing and welfare of abandoned infants at the Holy Infirmary and in the domiciliary care of sick women.

While, in general, the women employees were engaged in a subordinate role, a few of them rose to occupy posts of responsibility and competence both in an administrative and a professional capacity such as the *ospedaliera*, the *governatrice* of the *casetta*, the *barberotta*, the *ostetrica* and the *pitanziere*. These employees must be distinguished from the women folk-healers of the 17th and 18th centuries who pretended to treat the sick by such means as fumigation, recitations of incantations and sorcery (41).

It is of interest to note that there was a certain degree of "specialisation" in the hierarchy of the female hospital staff in the sense that they were engaged for specific roles which were not interchangeable, except in the servant category. Thus, besides the employees referred to above, there were others with distinct functions and titles such as the *donna della mancia*, the *spezialotta*, the *spalmante* and the *donna per la tigna*.

We know nothing of the educational background of these women for, though references are frequent in contemporary documents regarding the moral qualities required of them, there is no hint concerning their scholastic attainments. In this respect we must remember that the modern concept of the various branches of nursing had not yet emerged by the end of the 18th century so that it may not be unreasonable to believe that they received no professional training — with the exception of the *barberotta* — and, very likely, not even any schooling at all. We know that during the time of the Order the education of women had been neglected (42) to such an extent that when in 1773 Dr. A. Cren suggested giving a course of instruction for midwives his request was turned down because in the view of the Chief Government Physician the midwives, though licensed by the state and by the church, were so ignorant that they could derive no profit from such instruction (43). Yet in spite of their being unlettered and not highly skilled, these female employees appear to have been dedicated women and to have performed their tasks to the best of their abilities. They were well thought of by the state administrators,

so much so that they were retained in employment until they were due for retirement or had become medically unfit for further service. In fact there was only one instance where the woman had her service terminated because she was no longer capable of applying the mercurial inunctions; but even in this case she had served for thirty-seven years and very likely she had lost her former efficiency due to ill health from the toxic effects of the mercury which her skin may have absorbed during such a long period of exposure to this dangerous metal (44).

There is no doubt that these women with their ministrations made a notable contribution to the nation's health, as then understood, and to the welfare of the sick poor within the framework of the medical organisation of the Order of St. John. Indeed were it not for their services, generations of sick women and unwanted infants would have suffered and died from disease without any one at hand to minister to their needs and to provide their comforts. It is, besides, on the basis of the work of these women employees that progress in the standard of care and nursing of the sick evolved in subsequent years to reach our present high levels of professional nursing and midwifery in our islands.

1. Arch. 272, fol. 56t; Arch. 1714, fols. 33-36t, National Library of Malta (NLM).
2. Arch. 1186, fol. 40, NLM.
3. Arch. 6431, fol. 99, NLM.
4. Arch. 272, fol. 56t, NLM.
5. Arch. 272, fol. 56t; Arch. 306, fol. 105, NLM.
6. *Ibidem*.
7. Ms. 377, fol. 15; Arch. 1713, p.7, NLM.
8. The word *tigna* has been incorrectly translated by W.K.R. Bedford and reproduced by E. Hume as "scurvy". See Bedford, *The Regulations of the Old Hospital of the Knights of St. John at Valletta*, Edinburgh & London 1882, p.11; Hume, *Medical Works of the Knights Hospitallers of St. John of Jerusalem*, Baltimore 1940, p. 142.
9. Arch. 660, fol. 280, NLM.
10. Arch. 1194, fol. 268t, NLM.
11. Arch. 484, fol. 267, NLM.
12. Arch. 1186, fol. 251, NLM.
13. Arch. 1187, fol. 14, NLM.
14. Arch. 1194, fol. 305, NLM.
15. Arch. 1194, fol. 269, NLM.
16. Arch. 1194, fol. 220; Ms. 377, fol. 47, NLM.
17. *Piano per il regolamento dell'ospedale di Malta*. Malta 1802, p.15.
18. Arch. 1194, fols. 133 & 177; Arch. 6430, fol. 61, NLM.
19. Arch. 1196, fol. 308, NLM.
20. W.K.R. Bedford, *op. cit.*, p.35.
21. Arch. 1196, fol. 213, NLM.
22. Arch. 1713, p. 17, NLM.
23. M.A. Grima, *Della medicina traumatica*, Florence 1773, p. 61.



24. Ms. 377, fol. 47, NLM.
25. Arch. 1194, fol. 202; Arch. 1195, fol. 93-100, NLM.
26. P. Cassar, *Medical History of Malta*, London 1965, p.232.
27. Bedford, *op. cit.*, p. 39.
28. Arch. 272 fol. 51; Arch 1713, p. 19, NLM.
29. Arch. 1196, fol. 78, NLM.
30. *Ibidem.*
31. *Piano per il regolamento etc.*, pp.10 and 15.
32. V.F. Denaro, *The Silver Smiths of Malta*, Florence 1972, p.33.
33. Arch. 118, fol. 299, NLM.
34. Ms. 377, fol. 43, NLM.
35. *Piano per il regolamento etc.*, p.15.
36. Arch. 1194, fols. 120, 216 & 217, NLM.
37. Arch. 1194, fol. 186; Arch. 1197, fol. 32, NLM.
38. *Piano per il regolamento etc.*, p.15.
39. Ms 377, fols. 36-8, NLM.
40. Arch. 239, 8 September 1777; Arch. 272, fol. 52, NLM.
41. P. Cassar, "Healing by Sorcery in 17th and 18th Century Malta", *The St. Luke's Hospital Gazette*, 1976, 79-88.
42. P. Cassar, "Women in Malta", *Scientia*, 1975/77, No. 38, 19.
43. P. Cassar, *Medical History of Malta*, London 1965, p. 412
44. W.R. Bett, *The History and Conquest of Common Diseases*, Norman (Oklahoma), 1954, p. 184.