



Course Syllabus: Greece, Rome, and the Mediterranean World—
Addendum for Graduate students
College of Humanities and Social Sciences
History 3233/5233 Section 101
Fall 2023 TH 9:30 am – 10:50 am

Additional Reading Materials

In addition to the undergraduate required reading materials, graduate students will need to purchase or procure (via Moffett Library or ILL) three books: One on the Greeks, one on the Romans, and one on a peripheral society (including but not limited to the Phoenicians, Myceneans, Minoans, Etruscans, Sassanids, Persians, Israelites). The reviews are due at the same time as the undergraduate papers. There is a sample review attached to this addendum. Please follow the formatting.

Requirements and Grading

Graduate students should refer to the main syllabus for any questions regarding the class, class schedule, and course structure. Graduate students, however, need to follow this addendum regarding requirements and grading. Grades for graduate students will be based on attendance/participation/discussion, three book reviews, the midterm project, and a final paper (graduate students must write a final paper).

Table 1: Points allocated to each assignment:

Assignments	Points
Review One	150
Review Two	150
Review Three	150
Midterm Project	200
Final Paper	200
Attendance/Discussion/Participation	150
Total Points	1000

Table 2: Total points for final grade.

Grade	Points
A	900
B	800 to 899
C	700 to 799
D	600 to 699
F	Less than 600

Sample Review

Name: Tiffany A. Ziegler
Review One: Sample Review

Davis, Adam J. *The Medieval Economy of Salvation: Charity, Commerce, and the Rise of the Hospital*. Ithaca and London: Cornell University Press, 2019.¹

The principle aim² of Adam J. Davis' *The Medieval Economy of Salvation: Charity: Commerce, and the Rise of the Hospital* is to “cast new light on the nature of religious charity during Europe’s first great age of commerce” (5).³ Throughout the twelfth and thirteenth century, hospitals and leper houses appeared all over Europe during the ‘hospital revolution’; their intention was to care for the poor, sick, and vulnerable. Townspeople, merchants, aristocrats, and ecclesiastics supported these institutions by making donations—in the form of money, lands, rents, and more. Such transactions did not, however, change the nature of the medieval gift; in fact, Davis argues that “far from eroding the power of the gift, the new commercial economy infused charitable giving and service with new social and religious meaning and a heightened expectation of reward” (5). Hospitals, in short, provide a window into the all-encompassing lives of medieval urban society, and Davis’ study shows how—through the lens of the hospital, its donors, its personnel, and its inmates—relationships in religion, economics, and society evolved in twelfth and thirteenth century France.

Davis situates his study of the hospital movement within medieval Champagne in order to better understand the transactional efforts that entwined charity and the

¹ Book reviews should start with a full bibliographic citation at the beginning.

² In the first paragraph, be sure to include what the book is trying to prove—what is the argument? What is the thesis?

³ This is the one time when I will allow you to use parenthetical citations. As long as you only use the book you are reviewing, cite with the page number in parentheses. If you bring in outside sources, you will need to use footnotes. It might be wise to bring in sources as comparisons!

commercial economy.⁴ Champagne, an epicenter of European trade, was a hub for international trade fairs and local markets. The fairs generated capital and attracted people, many of whom required accommodations. Hospitals, which catered to the travelers, as well as the sick and the poor, quickly appeared in the region. These hospitals were later subsidized through the funds generated by the markets and fairs: direct revenues were often sent to the hospital, while indirectly, “commercial prosperity [...] made pious bequests possible” (7). Although Davis has produced a case study on the hospitals of Champagne, he also makes it clear that the “hospital movement in Champagne was clearly connected to a broader pan-European religious culture of charity” (4).

The rise of the hospital movement was tied to more than simple economics, though. In fact, hospitals arose because people made *pious* donations to the institutions. Davis asks the question of why—why did people choose to give to regional urban hospitals? Several reasons are posited throughout the book, including but not limited to, a rise in Eucharistic piety, preoccupation with Purgatory, and the increase of a confessional society. The most obvious reason was tied to the increased fairs and markets: the greater the economic activity in an area, the greater the need for repositories of charity, like hospitals, which could provide an “antidote to the vice of avarice” (9). Through charity and alms, one often found salvation (chapter one), and in return, this created a ‘charitable landscape’ (chapter two) where hospital patrons, protectors, and founders contributed to the new spiritual economy, where hospital workers “lived a life of self-renunciation and service,” and where hospitals became involved in the “larger pattern of social and economic exchange” (114). Part of what made the charitable landscape so fruitful was a democratization of charity that lend itself to involvement by a variety of social classes (chapter three). By giving a donation

⁴ The main body paragraphs should be used to **describe** the book, not make judgments, comments, or criticisms. Save those for the end.

to a hospital, a donor participated in redemptive almsgiving, while the alms in turn had the potential to produce spiritual and soteriological benefits (139). Other benefits also emerged from the mixing of charity and economy. For example, relationships formed between the hospital and the donors, and donors often thanked the hospital for the “kindness and courtesies” (151).

Through the generous donations and institutionalized charity, hospitals grew into businesses that needed to manage properties carefully. The institutions were dependent on good relations with local inhabitants to do so (186), which meant a careful navigation of the social and economic landscape (chapter four) and expert service on the part of hospital personnel (chapter five). As a result, a “hospital’s social and religious roles were inextricably tied to its economic power” (186). All efforts on behalf of the hospital donors and personnel, however, were done in service to the poor, the recipients of charity (chapter six). Finally, Davis argues that, despite what one might presume, the sick poor were not passive recipients of charity and the economy of salvation. Although the medieval sick poor had few options available to them, they were in no way forced into a hospital; they made a conscience choice to enter the institution, and in doing so, completed the “triangular system of exchange involving hospital workers, benefactors, and God” (242).

The Medieval Economy of Salvation is not only a great book but an important one.⁵ Building on the works and ideas of Lester Little, Sharon Farmer, and Miri Rubins to name a few, Davis’ manuscript brings to light a neglected topic of medieval hospitals to show not only how important the institutions were but also how embedded they were within the medieval social system. With the hospital revolution, medieval hospitals emerged and soon

⁵ In your final paragraph (or paragraphs) you **should** make clear statements about the book—did it achieve what it said it would? Did the author prove his/her/their points? Was it easy to read? Was it accessible? If it was problematic, what was problematic about it? Did you learn something? What did it contribute to the greater field of study?

after became pillars of culture. Medieval hospitals represent the best of society via humanitarian efforts, as well as embody the underlying elements of what makes us human: a need to make a profit in an ever-growing profit economy and then make recompense for the soul for doing. These actions, as Davis has shown, nurtured the economy of salvation through religious and charitable exchange. The exchange system in turn bound all levels of society together in a “social and spiritual web of mutual need, dependency, and assistance” (275). The result was that hospitals, especially in Champagne and presumably throughout all of Europe, were a microcosm of medieval society. The notion is simple yet profound, and it is weighted in the evidence. Hopefully this study opens the scholarly world to the merit of medieval hospitals as microcosms of society.⁶

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⁶ Aim for 3-4 pages total, with about half being descriptive—what the book is about—and half being analysis: what the book did well/did not do well.