

HISTORICAL RESEARCH ARTICLE

Nurses in the staff of the Coimbra University Hospitals, 1779-1797: particularities and implications

Enfermeiros entre os funcionários dos Hospitais da Universidade de Coimbra, 1779 a 1797: particularidades e implicações

Enfermeros entre el personal de los Hospitales de la Universidad de Coimbra, de 1779 a 1797: particularidades e implicaciones

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Abstract

Context: Resulting from the integration of small hospitals, the Coimbra University Hospitals were, at this time, an institution of significant size. At the end of the 18th century, during the Age of Enlightenment, hospitals were undergoing a process of transition to modernity.

Objectives: To describe the staff of the Coimbra University Hospitals in the last decades of the 18th century and analyze the evolution of the existing professions and compare their salaries and positions, while focusing on nurses.

Methodology: A historical analysis based on published sources, considering the contexts and long-lasting evolutionary lines while building an interpretative summary.

Results: Four professional groups were found and divided into treatment of the body - nurses, physicians, and surgeons; treatment of the soul - chaplains and sexton; support services - assistants, helpers, cooks, laundry maid, washerwoman, *despenseiro*; and security services - doorkeepers, guards, and *tronqueiro*.

Conclusion: It was possible to observe the presence of nurses during the transition between medieval continuity, with the continuance of bloodletting nurses and cook nurses, and the ascending differentiation of the delivery nurse and the descending differentiation of ward assistants.

Keywords: nursing history; hospitals; public assistance

Resumo

Contexto: Os Hospitais da Universidade de Coimbra resultam da concentração de pequenos hospitais e são, nesta época, uma instituição de dimensões significativas. Nos finais do século XVIII, em pleno iluminismo, os hospitais vivenciaram um processo de transição para a modernidade.

Objetivos: Descrever os funcionários que existiam nos Hospitais da Universidade de Coimbra nos finais do século XVIII. Analisar a evolução dos ofícios em presença e os seus posicionamentos relativos, com o foco nos enfermeiros.

Metodologia: Análise histórica, partindo de fontes publicadas, considerando os contextos e as linhas evolutivas de longa duração, construindo uma síntese interpretativa.

Resultados: Estamos em presença de quatro agrupamentos profissionais - cuidadores do corpo (enfermeiros, médicos e cirurgiões), cuidadores da alma (capelões e sacristãos), serviços de apoio (ajudantes, serventes, cozinheiros, roupeira, lavadeira, despenseiro), e Serviços de segurança (porteiros, guardas e tronqueiro).

Conclusão: Verificou-se a presença de enfermeiros num processo de transição entre linhas de continuidade medieval, com enfermeiros-sangradores e enfermeiros-cozinheiros, e a diferenciação ascendente com enfermeira dos partos e descendente com ajudantes das enfermarias.

Palavras-chave: história da enfermagem; hospitais; assistência pública

Resumen

Marco contextual: Los Hospitales de la Universidad de Coimbra son el resultado de la concentración de pequeños hospitales y son, en este momento, una institución de dimensiones significativas. A finales del siglo XVIII, en plena Ilustración, los hospitales experimentaron un proceso de transición a la modernidad.

Objetivos: Describir al personal que existía en los Hospitales de la Universidad de Coimbra a finales del siglo XVIII. Analizar la evolución de los oficios en presencia y sus posicionamientos relativos, centrándose en los enfermeros.

Metodología: Análisis histórico, a partir de fuentes publicadas, se consideraron los contextos y las líneas evolutivas de larga duración, y se construyó una síntesis interpretativa.

Resultados: Se encontraron cuatro grupos profesionales, cuidadores del cuerpo (enfermeros, médicos y cirujanos), cuidadores del alma (capellanes y sacristanes), servicios de apoyo (ayudantes, sirvientes, cocineros, guardarropa, lavandera, mayordomo) y servicios de seguridad (porteros, guardias y *tronqueiro* – guardia del albergue).

Conclusión: Se verificó la presencia de enfermeros en un proceso de transición entre líneas de continuidad medieval, con enfermeros-sangradores y enfermeros-cocineros, y la diferenciación ascendente con el enfermero de partos y descendiente con los ayudantes de enfermería.

Palabras clave: historia de la enfermería; hospitales; asistencia pública



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Introduction

The 18th century in Portugal was characterized by several complex evolutionary lines in which influences from other European countries, like the French Revolution of 1789-99, became mixed with relevant overseas events, such as the flourishing of Brazil.

In Portugal, the population increased, the benefits of the discovery of gold in Brazil were reflected in commercial activity growth, agricultural development, and industrial implementation and, in the second half of the century, the Age of Enlightenment emerged with palpable effects. In these circumstances, national politics swayed between absolutism and enlightened despotism. Society was being transformed in favor of the middle class (*bourgeoisie*) and against the privileged. It was a century marked by disunity, diversity, and strong socio-economic and cultural changes (Ramos, 2001).

The second half of the 18th century began with the tragic Lisbon earthquake, in 1755, impacting the entire nation. The catastrophe strengthened the strong influence of the Marquis of Pombal, who implemented changes in the school system, reformed the Coimbra University, and placed the Church under the control of the Aristocracy, causing the loss of ecclesiastical privileges and profits.

The 18th century in Portugal was also characterized by the existence of “a monarchy, sometimes mildly despotic, sometimes enlightened, sometimes hybrid (or relatively reformist), afraid of and affected by the first ideological and military echoes of the French Revolution” (Ramos, 2001, p. 377).

In the second half of the 18th century, during the reign of King Joseph I (1750-1777), with the Marquis of Pombal as Prime Minister, the “State reformist and authoritarian intervention in multiple areas of society” was introduced in Portugal (Ramos, 2010, p. 377).

It is within this context, during the last decades of the 1800s, that the University of Coimbra Hospitals (HUC) operated as a school hospital adjacent to the University. In 1772, with the Marquis of Pombal's reform of the Coimbra University, “the set of scientific establishments, an essential part of the change, was added to the faculty system. The School Hospital, the Anatomical Theatre, the Pharmaceutical Dispensary were created . . .”. (Gouveia, 1993, p. 439).

In Coimbra, there were, at least since the Lower Middle Ages, several hospitals. Some even preceded the birth of Portugal, like the *Hospital de Milreu*, created between 1064 and 1093, running autonomously until 1526. Other hospitals appeared at the same time as the origins of Portugal, such as the *Hospital de S. Nicolau* (1144/1150 – 1504/1537), the *Hospital S. Lázaro* (1209/1210 – 1836), the *Hospital Santa Elisabete da Hungria* (1328/1333/1336 – 1559, when its facilities collapsed), or, in 1367, the *Hospital de Nossa Senhora da Vitória*.

The initiative of integrating the small hospitals and hostels existing in Coimbra into a single institution dates back to King Manuel I, in 1504. This initiative gave rise to the first regiment of the then called Royal Hospital on 22 October 1508, which was later expanded in 1510. King Manuel I “created a new urban layout in Coimbra with the establishment of the Royal Hospital . . .”. (Coelho, 1996, p. 225). According to Coelho, “Coimbra probably had, throughout the Middle Ages, been home to twenty-seven urban fraternities, thirteen hostels, fourteen hospitals, and a leprosarium of royal patronage” (Coelho,

1996, p. 227).

From nationality to the end of the 15th century, public assistance was provided in hostels intended for pilgrims, which frequently served as shelters and hospitals, in hospitals, since the beginning, located or not next to the hostels, in leprosaria, very numerous up to the 14th century, and in grocery stores, aimed at the protection of the honorable but impoverished people (Neto, 1989). Regarding the medieval hospital framework, we know that “people were treated at home, and hospitals, according to today's definition, did not exist” (Oliveira, 2015, p. 181). As referred to by Foucault, “until the 18th century, the ideal hospital's beneficiary is not the patient who needs healing, rather the poor one who is dying. Someone who should be provided with physical and spiritual care”. (Foucault, 1984, p. 100).

In the mid-18th century, there were three hospital institutions in Coimbra: the Royal Hospital, the *Hospital de S. Lázaro*, and the *Hospital da Convalescença*. According to Lopes (2000), the Royal Hospital and the *Hospital da Convalescença* operated in the same space, in the S. Bartolomeu Square, and the *Hospital de S. Lázaro*, outside the city's perimeter, in the urban periphery. The Royal Hospital is also known as the New Hospital, the *Hospital de D. Manuel*, the *Hospital da Cidade*, the *Hospital da Praça*, the *Hospital de S. Bartolomeu*, the *Hospital de Nossa Senhora da Conceição*, or the *Hospital da Conceição*. In 1512, King Manuel I entrusted the administration of the Royal Hospital to the *Misericórdia* of Coimbra. However, the *Misericórdia* never took possession of the hospital, and, in 1530, King John III handed the administration of the hospital over to the secular canons of S. João Evangelista, known as *Loios*.

They were in charge of the hospital until 1772, with a brief interval between 1741 and 1743. In 1769, the hospital's administration ceased to belong to the *Loios* congregation and, in 1772, the Marquis of Pombal ordered the seizure of all its assets and incomes, which were handed over to the Treasury Council of the University.

It is important to highlight the Marquis of Pombal's public health policy, as stated by his health administrator in a Royal Decree of 12 December 1776:

Public health has always been one of the first and most important topics for consideration by all enlightened nations of the political world, intending to establish, as they have established, the most immediate and most effective provisions for the preservation of their people in the greatest happiness, as each and every nation relies on this public health. (Royal Decree, 1776, p. 558)

On 15 April 1774, the Royal Hospital was definitively handed over to Coimbra University. In 1779, the premises of the Royal Hospital were transferred to *Colégio de Jesus*, in uptown Coimbra (Lopes, 2000).

Regarding the *Hospital da Convalescença*, although the previous intention was to create a hospital for convalescents, and testamentary donations were made for that purpose, this hospital was only fully established, separately from the Royal Hospital, in 1764.

As mentioned above, the *Hospital de S. Lázaro* was an old institution that remained in the same location, outside the city's perimeter, until 1836. However, a directive of 15 April 1774 laid out its integration into the HUC. In the city, there was also a hostel for beggars, located on the ground floor of the Royal Hospital, known as *Tronco* or *Hospital de Baixo*, which, after the second half

of the 18th century, came to be known as Old Hospital (Lopes, 2000).

Foucault affirmed that medieval hospitals were “a kind of mixed instrument of exclusion, assistance, and spiritual transformation” (Foucault, 1984, p. 100). Based on this assessment, Ferraz considers the evolution of hospitals up to the 19th century, stating that “these characteristics were maintained until the beginning of the 18th century, when a new hospital concept - the therapeutic hospital - emerged thanks to the advancement of medicine, even though this objective was only achieved in the 19th century (Ferraz, 2019, p. 159).

According to Foucault, “it is around 1780 that the idea is born that the hospital can and should be a healing instrument” (Foucault, 1984, p. 99), taking into account that “before the 18th century, the hospital was essentially an institution aimed at assisting the poor” (Foucault, 1984, p. 100).

The 18th century also brought an important milestone for the history of nursing in Portugal, meaning the emergence, in 1741, of the book “*Postilla Religiosa e Arte de Enfermeiros*”, a handbook for nurses, written by a nurse, Friar Santiago. Its relevance is due to the fact that it conveys a description of nursing in Portugal at the end of the first half of the 18th century (Santos, 2012). Santos states that “we continue activities in which the dependence on other professionals was high, despite the emergence of some autonomy in the implementation of these activities” (Santos, 2012, p. 276-7).

In the regulations of the Royal Hospital of Coimbra University, dating from 1779, Santos (2012) highlights that “a specific part was dedicated to nurses, unlike the previous one, which may allow considering once again the hospital’s dynamics, the valorization of nurses in the institutions, or their role in structural terms” (Santos, 2012, p. 280).

This study aims to describe the staff of the Coimbra University Hospitals in the last quarter of the 18th century, particularly from 1779 to 1797, and to analyze the evolution of these occupations and compare their salaries and positions while focusing on nurses.

Methodology

A historical, descriptive study was carried out to analyze and interpret sources published in the staff summary tables of the Coimbra University Hospitals (*Hospital da Conceição* /Royal Hospital, and *Hospital de S. Lázaro*), in 1779, 1786, and from 1790 to 1797. Contextualization of the analysis produced regarding the slow emergence and transformation of the nursing occupation in a profession, according to a structural perspective, was complemented with the necessary contextual analysis of health occupations and professions, with special focus on male and female nurses, as well as of the evolution of health institutions and care policies at the time.

The sources used were published by Lopes (2000) and refer to the HUC staff, in three groups: *Hospital da Conceição* and *Hospital de S. Lázaro*, in 1779; HUC staff (Royal Hospital and *Hospital de S. Lázaro*), in 1786; and Royal Hospital and *Hospital de S. Lázaro*, from 1790 to 1797. The staff summary tables provided by these sources were redesigned to facilitate the assessment of the staff and their salaries and evolution, the relative comparisons of salaries and tasks performed, highlighting hierarchical

positioning, and checking for continuity elements from the medieval past and signs of modernity. An interpretative text was formulated with the necessary conclusions.

Results and Discussion

The empirical evidence provided by the sources allows, first, considering that the HUC were a large institution for their time. The analysis of the staff typology reveals a structured level of organization, which differentiated the positions attributed to the different employees.

Not by coincidence, the data from this hospital is the result of a previous policy of hospital centralization, more than two and a half centuries old. In 1508, in Coimbra, King Manuel I implemented the hospital centralization with the inauguration of the Royal Hospital, which integrated several small hospitals. King John II initiated this centralizing movement after receiving the *Injunctum nobis* papal bull in 1486. This bull authorized him to standardize and concentrate the hospitals throughout the country (Rossa, 2001).

This movement also took place a little earlier in Lisbon (1492-1504), with the incorporation of small hospitals into the *Hospital de Todos os Santos*, thus “integrating assistance into a new dimension, the state dimension, with a mission beyond religious intents” (Ferraz, 2019, p. 167). There was some distance from the modern 19th-century hospitals whose organization was the result of public health theories, together with the differentiation of functions and employees, which later evolved to today’s very significant hyper-specialization.

For instance, some lack of function differentiation was observed, particularly between the male nurse and the bloodletter, and also between female nurses who were also cooks at the *Hospital de S. Lázaro*, in 1779.

Nevertheless, there is evidence of specialized jobs, like the significant presence of the delivery nurse, in 1791, at the Royal Hospital. This fact precludes the professional development of nursing that, as it is known, was slow and secular. In Portugal, this movement was only concluded by the end of the 20th century, with the approval of the nursing practice regulation, the creation of its professional and regulatory body – the *Ordem dos Enfermeiros*, and higher education in nursing.

From 1779 to 1797, the existing staff included nurses, professional nurses in the broadest sociological sense of the term. The concept of the professional nurse, in the strict sense of the term, associated with the concept of nursing as a profession, is something that is only accurately mentioned in texts and documents chronologically closer to our time. It is not that nurses did not exist, the fact is that the term *nursing* while referring to the professional group, was only disseminated and started to appear, without reserves, in documents dating from the late 19th, and particularly, early 20th centuries (Queirós, Almeida-Filho, Monteiro, Santos, & Peres, 2017).

Thus, nurses already existed before nursing appeared as an organized, professional group. There is a reference to nurses, for example, in the ward - *domus infirmorum* - of the Santa Cruz Monastery of Coimbra and in its *Hospital de São Nicolau*, with the position of *infirmarius*. Here, the ward dates from the second half of the 12th century, but the clear reference to *infirmarius* certainly came a little later (Silva, 2015).

In this sense, Carvalho states: “In any case, we can confirm

that the *infirmarius* appeared as a monastic occupation, with the respective tasks laid out in writing, at the Cluny monastery, between 1070 and 1080". (Carvalho, 2016, p. 71). Another reference to nurses was found in documents dating from the 13th century, such as the "*Plas G. ramiris infirmarios fratri rudericus*" (Souto Cabo, 2003, p. 80), dating from 1257, or the "*Garsia. móogo enfermeiro*" (Souto Cabo, 2003, p. 132), dating from 1260, or in the "*Johã perez enfermeiro*" (Souto Cabo, 2003, p. 327), dating from 1268, or even in the "*Maria. fonso enfermeira*." (Souto Cabo, 2003, p. 336), dating from 1269.

The analysis of the staff in the three groups, in the last two decades of the 18th century, allowed noting the presence of four staff groups and one singularity. First, a clinical group, to use a contemporary term, or caregivers of the body, composed of physicians, surgeons, male and female nurses, a delivery nurse, and ward assistants of both genders. Second, the group of the soul healers, including chaplains and sextons. Third, a group composed of employees of the support and logistics services, whose purpose was to provide amenities in the hospital, and which included male and female helpers, the *despenseiro* (storeroom keeper), who sometimes was also purchaser, his assistant, male and female cooks, and their assistants, the laundry maid, and the washerwoman. The fourth group included the security staff, such as the door guard, portresses, doormen, and the *tronqueiro* (hostel's guard; as mentioned in the introduction, it refers to the so-called *Hospital de Baixo*).

Being the HUC a school hospital, the singularity refers to the *contínuo das aulas* (administrative responsible for keeping attendance and order in classes). In a provision of 21 October 1772, the Marquis of Pombal ordered the seizure of all the assets and incomes belonging to the Royal Hospital and its handover to the Treasury Council of Coimbra University. In April 1774, the Royal Hospital was definitively handed over to the University (Lopes, 2000). The teaching component in 1779 is reflected in the presence of the *contínuo das aulas*, corresponding to today's bedel. In accordance to Foucault's modern hospital characterization criteria (1984), which included the physician's progressive incorporation into the hospital staff list and the teaching of medicine in the hospital, it can be observed that, at that time, the Coimbra University Hospitals were going through a phase of transition from the medieval hospital to the modern hospital, as they still did not have in-house physicians but were already teaching medicine within the hospital premises.

There was a larger staff concentration in the *Hospital da Conceição* and the Royal Hospital, the center of this hospital complex, than in the *Hospital de S. Lázaro*, an establishment differentiated both in space and function since it provided treatment and accommodation for people with Hansen's disease. Their dimensions are different, one is central, and the other peripheral, and the number of people allocated to each job is also different, as well as the various occupations.

Another analysis aspect worth mentioning is the presence of employees of both genders in some positions. However, this does not apply to the physician, the surgeon, the chaplain, the sexton, and the *despenseiro*/purchaser, which, as expected, remained male jobs. Women's access to the medical and surgical professions only occurred in the late 19th century, as was the case, in Portugal, of Elisa Augusta da Conceição Andrade. Born in Lisbon, Elisa attended the Polytechnic School of Lisbon in which she

enrolled in 1880, at the age of 25, and completed the degree in 1889, becoming the first Portuguese female physician (Cabral, 2016).

Also in the Iberian Peninsula, Andalusia, but in a different cultural environment, no longer Christian but Muslim, women's access to the medical profession became possible well before the last two decades of the 18th century. Between the 10th and 15th centuries, there were different forms of accessing education in health. Two particular cases of women physicians (Arabic: *tabiba*) are known that entered the profession by following their families' tradition (Espina-Jerez, Domínguez-Isabel, Gómez-Cantarino, Queirós, & Bouzas-Mosquera, 2019). Umm cAmr bint Abi Marwān Ibn Zuhr (557/1162), daughter of the famous Ibn Zuhr (Avenzoar), assisted minors and women of the Almóada court, although she was also consulted for female gynecological issues. Two centuries later, there is also evidence of Umm al-Hasan al-Tañāliyya (14th century), who was trained in medicine by her father and recognized by the vizier and physician Ibn al-Jatib (713-776/1313-1374; Olmo & Vidal, 2012).

Gender differentiation in spiritual jobs, such as chaplains or sextons, was not expectable. Whether predictable or not, the *despenseiro*, who sometimes was also the purchaser, was always a man. These three jobs were considered hierarchically superior and, as such, *as it would be expected* at the time, were only performed by men.

It is also important to mention the incorporation of the religious component of spiritual care, performed by chaplains and sextons, and the incorporation of healthcare jobs for physical treatment reflected in the presence of male and female nurses, and ward assistants. This duality of body/soul treatment has persisted since the Middle Ages, being that the incorporation in the hospital's structure of physicians and surgeons occurred after this period. Since the High Middle Ages, taking care of the body and soul was connected, understood, and expressed within the care institutions. On the subject of religious nurses in hospitals, Lopes states that "before the 19th century, there were no hospital nurses of religious orders or congregations in Portugal, the friar nurses in hospitals were residual" (Lopes, 2019, p. 155).

Physicians and surgeons would be on call, living nearby the hospital, but were not incorporated in the hospital staff structure, working on a non-exclusive basis. Only in modern hospitals, in the late 18th century and early 19th century, "the figure of the hospital physician, previously non-existent" (Foucault, 1984, p. 109) appears. In greater detail, it can be observed that there are no records of the medical staff list in the central hospitals (Conceição/Royal), precisely for the reasons stated above. Were there no physicians in the central hospitals, Conceição and Royal? Of course, there were, but they were not in-house. In this sense, the medieval tradition remained at this time, as "hospitals and wards were not a place for regular medical practice until the end of the Middle Ages. Only very rarely would a physician find himself in a place like this" (Silva, 2015, p. 110).

However, the surgeon position is present in the staff list (in 1779 and 1790/1797) but, following the same train of thought, the surgeons would also be differentiated, being of a lower status than physicians and, therefore, incorporated into the hospital's staff structure. It is possible to observe the presence of nurses and ward assistants who also studied surgery, while male nurses were also blood-letters, and female nurses, in the case of the *Hospital de S.*

Lázaro, also worked as cooks. It is also possible to observe the large, but not unusual, number of employees in the support and security services, which can be, due to their diversification, considered as an indicator of modernity. For the spiritual treatment of the soul, there are two chaplains and a sexton present in the three staff groups analyzed, but only in the *Conceição/Royal Hospitals*. In *S. Lázaro's*, there is no record of these functions. Being a smaller institution, more similar to a hostel than to a hospital, it provided spiritual care using other resources. As for male and female nurses, they are gender-differentiated in the three periods under analysis at the *Conceição/Royal Hospitals*, but in *S. Lázaro's*, there was no record of nurses in 1786. In the *Conceição/Royal Hospitals*, there were two male nurses in the first two periods and three in the third period, and two female nurses during the three periods. This presence of nurses has the following particularities:

in 1779, in the *Hospital da Conceição*, the two male nurses were also surgeons; on this date and in this hospital, there was also a male ward assistant and a female ward assistant who were also surgeons. In 1786, the HUC staff list included an assistant, but there was not any reference to the specific location or position. Interestingly, in *S. Lázaro*, in 1779, the male nurse also worked as a bloodletter, and the female nurse was also a cook, a position that she repeated in 1790/97. The fact that, in 1791, there was a place at the HUC for a delivery nurse is significant. Regarding general positions, the presence of helpers is mentioned, in variable number, in the three groups, but with the following particularities: in *Lazareto*, there is the only record of female helpers, and, in the *Conceição/Royal Hospitals*, there were female and male helpers, also in variable number (Table 1).

Table 1
Staff from the Coimbra University Hospitals (*Hospital da Conceição, Royal Hospital, and Hospital de S. Lázaro*)

	1779		1786		1790-1797	
	Conceição	S. Lázaro	Royal H.	S. Lázaro	Royal H.	S. Lázaro
Male Nurses	2 (a)	1 (b)	2	1	3	1
Female Nurses	2	1 (c)	2		2	1 (c)
Delivery Nurses					1 (1791)	
Ward Assistant ♂ (d)	1 (a)		(1)			
Ward Assistant ♀ (d)	1 (a)					
Male Helper	variable		variable		3	
Female Helper	variable	variable	4	variable	2-3	1
Surgeon	x1				1	
Physician				1		1
Chaplain	2		2		2	
Sexton	1		1		1	
xDoorman	x2					
Portress	1		1		1	
<i>Contínuo das aulas</i>	1		1		1	
Door Guard			1		1	
<i>Tronqueiro</i>				1		
<i>Dispenseiro/Purchaser</i>	1		x1 (e)		1	
<i>Assistant of dispenseiro</i>	1		1			
Male Cook	1		1		1	1
Female Cookx				1		
Cook's Assistant	1		1		1	
Laundry Maidx	1		1		1	
Washerwoman					3	1

Note. (a) = is also a surgical student; (b) = is also a bloodletter; (c) = is also a cook; (d) = can perform nurse's tasks; (e) = *dispenseiro* that is also a purchaser. Source: Reconfiguration, by the authors, of the published tables in "Pobreza, assistência e controlo social em Coimbra (1750-1850)", by Lopes, 2000. (2 vols.). Viseu, Portugal: Palimage (pp. 649, 650, 651).

When examining the table with the salaries for the various occupations, it is important, on the one hand, to understand the hierarchy of values that hypothetically reflect social importance, and, on the other hand, to know if there was a change in the hierarchy over the three periods as well as progress in the salaries. The analysis will focus on salaries with a food allowance

and those without. Regarding the hierarchy, from the highest salaries to the lowest, it can be observed that chaplains have the highest salaries, followed by surgeons. The physicians' wages seem, at first glance, lower, but one should take into account that they were not incorporated into the hospital's structure and worked on a non-exclusive, *on-call basis*.

Records show that the *despenseiro* and the *contínuo das aulas* earned high salaries, which corroborates their position mentioned above in the hierarchical scale. It is also possible to observe the high wages of the assistant of *despenseiro* when comparing it with other assistants. Considering the significant salary of the *contínuo das aulas*, it is clear that this was a prestigious job.

Using as reference the salaries of the male nurses, it should be noted that occupations such as the doorman, door guard, and male cook received slightly higher wages. As for salaries lower than the nurses', there were only the ward assistants, helpers, and the washerwoman's salaries. A horizontal analysis shows that, from 1790 to 1797, there was a significant increase in salaries for virtually all occupations, when compared with the two previous periods.

In these three periods, there were no changes to each occupation regarding the salaries earned. The positions are still an indicator of the inexistence of social mobility, which is natural in a time interval of about 20 years.

As a general rule, the salaries in the *Hospital de S. Lázaro* are higher than those in the *Conceição/Royal Hospitals*,

but this consideration should take into account that all salaries in *S. Lázaro* were without a food allowance. In the *Conceição/Royal Hospitals*, only the *contínuo das aulas'* salary, in 1779, and the chaplains' salaries, in 1786 and 1790-1797, included no food allowance. The lowest-paid positions were held, in 1790-1797, by the female helpers, the washerwoman, and the portress of the Royal Hospital. Female ward assistants and helpers earned less than their male equivalents, while the difference between female nurses and the female cook is less clear than between men with the same jobs (Table 2).

In a 2019 publication, when analyzing these staff members, Lopes highlights that:

In the small *Hospital de S. Lázaro*, both the male nurse and the female nurse perform their job together with another activity; the male nurses of the Royal Hospital could combine their job with the learning of surgery, and this benefit was extended to the female nurses; finally, these male nurses earned less than the doormen, the sexton, the male cook and his assistant, the laundry maid, and even less than the female nurses. (Lopes, 2019, p. 163)

Table 2

Salaries paid in réis to the staff of the Coimbra University Hospitals (*Hospital da Conceição, Royal Hospital, and Hospital de S. Lázaro*)

	1779		1786		1790-1797	
	Conceição	S. Lázaro	Royal H.	S. Lázaro	Royal H.	S. Lázaro
Male Nurses	60/d (a)	120/d (b)	60/d	120/d	80/d	180-200/d
Female Nurses	80/d	120/d (b)	80/d		80/d	140/d
Delivery Nurses					80/d	
Ward Assistant ♂	80/d					
Ward Assistant ♀	60/d					
Male Helper	50/d		50/d		50/d	
Female Helper	40/d	80/d	40/d	80/d	40/d	100-120/d
Surgeon	60000/year 164/d				15000/year 410/d	
Physician				20000/year 55/d		20000/year 55d 24000/year 66/d
Chaplain	60000/year 164/d + 120/mass In 1/2 year		150000/year 410/d		1º: 150000/year, 410/d +120/mass 2º: 100000/year 273/d	
Sexton	100/d		60/d		60/d	
Doorman	100/d					
Portress	80/d		80/d		40/d	
<i>Contínuo das aulas</i>	200/d		200/d		200-300/d	
Door Guard			100/d		100/d	
<i>Tronqueiro</i>				1500 (c)		
<i>Despenseiro/Purchaser</i>	240/d		240/d		300/d	

Assistant of despenseiro	120/d	120/d		
Male Cook	100/d	100/d	100/d	140-160/d
Female Cook			120/d	
Cook's Assistant	80/d	80/d	80/d	
Laundry Maid	80/d	80/d	100/d	
Washerwoman			1400/month 47/d	1400/month 47/d

Note. (a) = is also a surgical student; (b) = is also a bloodletter ♂ or a female cook ♀; (c) = together with 12 *alqueires* of corn and 2 *alqueires* of olive oil/year.

○ = no food allowance included. Source: Reconfiguration, by the authors, of the tables published in “Pobreza, assistência e controlo social em Coimbra (1750-1850)”, by Lopes, 2000. (2 vols.). Viseu, Portugal: Palimage (pp. 649, 650, 651).

The analysis of the staff lists of the Coimbra University Hospitals (*Hospital da Conceição*, Royal Hospital, and *Hospital de S. Lázaro*) and their salaries allows establishing professional intergroup comparisons and observing the evolution of the various functions and professions. This informational cross-sectional study of the two final decades of the 18th century, regarding the reality of a care institution, of significant size and adjacent to Coimbra University, located in the heart of the city, when considered as a longitudinal study, also contributes to the description and understanding of the century-long configuration of assistance occupations and professions, as well as of the changes in hospital structures. The scarce presence of nurses became a significant presence in these periods, both female and male, with interesting levels of structuring, including the ascending differentiation of the “delivery nurse” and the descending differentiation of the ward assistants.

Conclusion

The analysis of the positions and salaries allows drawing some conclusions. The fact is that this is a centralized hospital organization resulting from the aggregation of various hospitals, situated in different locations – urban and peripheral areas – that shows a level of structuring reflected by its diversified number of professions and occupations. The staff list allows for its characterization into four groups: the professionals concerned with the treatment of the body; the healers of the soul; services/amenities providers; and security. A particular position was also identified, that of the *contínuo das aulas*.

It can be concluded that there is the continuity of medieval features, expressed in the presence of male bloodletter nurses and female cook nurses and the inexistence of in-house physicians, together with the continuance of a care program focused on the body and the soul. Nevertheless, the dawn of modernity is observed, materialized through nurse differentiation, with the emergence of delivery nurses and ward assistants. The presence, in the three staff groups, of in-house nurses, ward assistants, and the differentiated position of the delivery nurse in both hospitals indicates the structuring of the nursing profession.

Author contributions

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