Durham E-Theses

Keeping the Diseased: Plague workers, policy and the poor in early modern England and Scotland c. 1597-1666

ANDERSON, RACHEL,JOAN

How to cite:

Use policy

Keeping the Diseased: Plague workers, policy and the poor in early modern England and Scotland c. 1597-1666

Rachel Anderson

Thesis submitted for the degree of Doctor of Philosophy
Department of History, Durham University

December 2024

Table of Contents

Abstract

This thesis seeks to answer one fundamental question: how would our understanding of the plague change if we centred marginalised experiences? While scholars have long examined the plague's impact, highlighting its medical, economic, and political ramifications, we are yet to fully understand the social impact of the disease. However, outbreaks of plague provide a unique lens to explore society and social relations during times of crisis. By focusing on the experiences of those typically pushed to the margins of the historical record, such as women and the poor, we can observe how these groups navigated and responded to new forms of authority and crisis conditions.

Inspired by the social turn of the 1970s and 80s, as well as recent events during the Covid-19 pandemic, I hope to have written a history of the plague 'from below', one where the voices and experiences of ordinary people, women and the poor take centre stage. Within this broader investigation, my thesis explores several key areas: the experiences of nurses and other plague workers during epidemics, the extent of increased powers wielded by authorities, the responses of ordinary people and the poor to emergency measures, and the processes by which people rebuilt their lives post-epidemic.

Through these inquiries, my research aims to increase our understanding of early modern social relations during periods of immense upheaval. In short, my thesis uncovers new and compelling evidence to support Keith Wrightson's analysis that the plague did not divide early modern society as severely as we once thought. Rather than fracturing communities, my thesis reveals evidence of complex networks of care and solidarity. Neighbours, families and friends often rallied together to ensure the survival of their communities. These findings challenge the notion of social disintegration during crises, highlighting the resilience and strength of communal bonds in early modern society.

Statement of Copyright

Acknowledgements

First and foremost, I would like to thank my incredible supervisors Dr Adrian Green and Dr Julie Marfany whose support and advice not only made researching and writing a thesis during a global pandemic possible, but enjoyable. I have experienced a lot of what I now know to be 'imposter syndrome', and it is largely thanks to your thoughtful encouragement that I was able to complete this thesis.

This PhD was also made possible by the many exceptional teachers who encouraged me throughout my academic life. I'd like to single out Dr Michael Edwards, who took a chance on a small Geordie girl who loved History, as well as Dr Mary Laven and Dr Amy Erickson who became my role models at Cambridge. I would never have applied for an MA or a PhD if it hadn't been for your kind support, so I'd like to thank all three of you for your encouragement during my undergraduate studies.

I would also like to thank Dr Leona Skelton for the many hours she spent answering my questions and mentoring me on both a professional and a personal level. I have greatly enjoyed our conversations and our lunches, and you have been a great source of inspiration and strength throughout this journey. Thank you also to Dr Fergal Leonard and Dr Lily Chadwick. Our group chat has been a constant source of help, support, joy and much-needed comedic relief throughout my PhD. I couldn't have finished it without you.

I would also like to thank all my colleagues at Newcastle University Archives and Special Collections, especially the Thursday/Friday team, Rachel H, Elaine, Melanie, Jemma, Valentina, Mick, Graham and Ian as well as the outreach ladies, Lauren, Sara, Gillian and Jackie. You've all been so kind and encouraging throughout the final stages of my PhD when I needed it most, thank you.

This project was supported by a generous ESRC Doctoral Studentship courtesy of NINE DTP. I am grateful for the opportunity to have spent four years researching a topic that I remain genuinely passionate about. It has truly been the most rewarding experience of my life, and despite the obstacle of Covid, it has been an absolute dream come true.

I would also, of course, like to thank my wonderful friends and family for supporting me at every stage. I am exceedingly lucky to be surrounded by the kindest, most encouraging, warm, and loving people, all of whom have made this piece of work possible. Thank you to my Dad, Neil, my stepmother Mags, and my big brother Jonny for always being so supportive of me. Thank you to my incredible in-laws, Jill, Steve, Alex, Pete and Mac, for always being my biggest cheerleaders. I'd also like to mention Val, who sadly passed away before I finished this thesis, but I know would have been so pleased that I've made it to the finish line. Thank you also to my niece, Ivy, whose smiles, giggles, and general shenanigans have brought sunshine to even the cloudiest of days.

Thank you to the 62 girls, the female utopia. You all know how much I adore you, but I'm not sure if you know just how much I appreciate your friendship, and how much it has kept me going through the most difficult parts of this process. Every time we're together I feel like I can do or be anything, you're the best friends a girl could ask for. Gemma, Roisin, Sarah, you've been by my side through every stage of this journey, and you've never doubted for a second that I'd make it here, thank you for your fierce support during my deepest wobbles! Thank you to the Uno's gang, especially Charlotte and Briony, and to anyone else who has been forced to listen to me ramble on about the plague for the past four years. I truly couldn't have finished this without you all.

Finally, I would like to make two extra special mentions. The first goes to Amy Butterworth, who has not only peppered the past four years with much-needed breaks to heritage sites up and down the country - alongside the consumption of endless tea, cake, and Domino's pizza - but has utterly transformed my life for the better since we met at university in 2014. Thank you for making sure I didn't give up. Frodo wouldn't have got very far without Sam.

The last special mention goes to my wonderful husband, Joe, my favourite person in the world. Thank you for your continued support in everything I do, for taking care of me for the last 15(!) years, and for making our little life so wonderful. You, Finn and Toad are the best part of my day, every day, and the reason I keep going. I love you more than I can say, thank you for everything.

This thesis is dedicated to the memory of my mam, Freda Clamp.

You are loved and remembered.

Introduction

This thesis aims to recover lost or overlooked societal responses to outbreaks of plague. Ultimately, it seeks to answer one fundamental question: how would our understanding of the plague change if we centred marginalised experiences? While scholars have long examined the plague's impact, highlighting its medical, economic, and political ramifications, we are yet to fully understand the social impact of the disease. However, outbreaks of plague provide a unique lens to explore society and social relations during times of crisis. By focusing on the experiences of those typically pushed to the margins of the historical record, such as women and the poor, we can observe how these groups navigated and responded to new forms of authority and crisis conditions.

Many contemporary writers observed that outbreaks of plague placed immense stress on the bonds of social obligation.[1] In his account of the 1651 outbreak of plague in Barcelona, for example, the tanner Miquel Parets (1610-1661) stated that 'when anyone fell sick, he lost all touch with friends and relatives...for the plague was so evil and of such a bad sort that everyone fled'.[2] In his translation of Parets' account, James Amelang argues that Parets' writings depict 'the breakdown of the normal relations of friendship, neighbourhood, and family and kin obligations, which had previously united and bound the urban community'. Similarly, writing about the 1665-6 outbreak of plague in London in a letter to the diarist John Evelyn, Edward Phillips wrote of the 'terrible calamity & miserie that hath befallen' his native city and the 'deplorable occasion wch hath caus'd so universall a separation of friends'.[3] These tropes of social disintegration and societal collapse during outbreaks of plague have a long and enduring history. The fourteenth-century Italian author Giovanni Boccaccio, for example, included similar motifs in the introduction to *The Decameron*:

---

[1] Keith Wrightson, *Ralph Tailor's Summer: A Scrivener, His City and the Plague* (New Haven, 2011).
[2] James S. Amelang, 'Introduction: Popular Narrative and the Plague' in James S. Amelang (ed.), *A Journal of the Plague Year: The Diary of the Barcelona Tanner Miquel Parets 1651* (Oxford, 1991), pp. 17, 59.
[3] British Library (hereafter BL), Add MS 78317, f. 55. Edward Phillips was a contemporary author and tutor to John Evelyn's son.

> In the face of so much affliction and misery, all respect for the laws of God and man had virtually broken down and been extinguised in our city...It was not merely a question of one citizen avoiding another, and of people almost invariably neglecting their neighbours and rarely or never visiting their relatives...this scourge had implanted so great a terror in the hearts of men and women that brothers abandoned brothers, uncles their nephews, sisters their brothers, and in many cases wives deserted their husbands. But even worse, and almost incredible, was the fact that fathers and mothers refused to nurse and assist their own children, as though they did not belong to them'.[4]

In fact, as scholars such as Ruth McKay have shown, the trope can be traced as far back as Thucydides whose famous description of the collapse of Athenian society stated that 'the catastrophe was so overwhelming that men, not knowing what would happen next to them, became indifferent to every rule of religion or of law'.[5] Writers throughout the centuries appear to have modelled their own accounts on Thucydides' description of the outbreak of 430 BC meaning that, as Paul Slack has written, 'one can never be entirely sure about the extent to which chroniclers of epidemics concentrated on social dislocation...and similar phenomena simply because Thucydides and later writers down to Defoe taught them to look for them'.[6] This thesis explores alternative contemporary sources to re-evaluate the notion that plague inevitably caused social division or collapse. It finds that whilst the upper echelons of early modern society may have opted to flee both the disease and their communities, this was by no means the case for all.

The events of the past four years have rekindled interest in the study of epidemic diseases, raising critical questions about their enduring impact on society. They have been a period of both immense upheaval and deep reflection. For me, they have also served as a powerful reminder of the many ways in which the past is constantly erupting into our world. Like countless others, I watched in dismay as we, once again, repeated the patterns and prejudices from our shared past, including the search for scapegoats in moments of fear and the

---

[4] Giovanni Boccaccio, *The Decameron*, trans. G.H. McWilliam (London, 1972), pp. 52-4.

[5] Thucydides, *History of the Peloponnesian War,* trans. Rex Warner (London, 1972), pp. 115. Quoted in Ruth McKay, *Life in a Time of Pestilence: The Great Castilian Plague of 1596-1601* (Cambridge, 2019), p. 9.

[6] Paul Slack, 'Introduction', in Terrence Ranger and Paul Slack (eds.), *Epidemics and Ideas: Essays on the Historical Perception of Pestilence* (Cambridge, 1992), p. 9.

repeated abuses of power at the highest levels of leadership.[7] In the early days of the Covid-19 pandemic, we witnessed an outpouring of gratitude and respect as families stood at their doors banging pots and pans, celebrating healthcare workers as the heroes of the pandemic. Now, as I head towards completing this project, however, we have witnessed that admiration quickly fade, giving way to nurses' and doctors' strikes, before returning to the familiar silence and underappreciation of their work. The 'Forgotten Front Line' are now facing immense, largely unaddressed, consequences due to the substantial stress, anxiety and trauma caused by the pandemic.[8] The study of the social impact of disease has, therefore, never been more relevant. The increased attention on the contributions of essential workers both within the health sector and beyond is just one of the ways in which recent events have infused new and urgent meaning into the core themes and questions I am to address in this thesis. The pandemic has also focused attention on the effectiveness of the strategies and measures employed to prevent and control the spread of disease, on who gets to make these decisions and why, and on how we begin to recover and move on from this unprecedented chapter in our recent history. By studying the threat of epidemic disease in historical contexts, we can equip ourselves with the tools to better understand and respond to current and future public health challenges.

This thesis sits at the intersection of two main bodies of historical scholarship. The first is the movement many now refer to as the 'social turn'. Influenced by broader intellectual trends such as Marxism and the development of new influential fields of research like sociology and anthropology, the 'social turn' in historical scholarship refers to a shift in focus from political and elite histories to the study of social structures and the experiences of ordinary people. Unlike many of their predecessors, the social historians of the 1960s, 1970s and 1980s embraced histories of women, gender, class, race, sexuality and microhistories in order to write

---

[7] See, for example, my online article published on *The Conversation*, https://theconversation.com/coronavirus-and-the-black-death-spread-of-misinformation-and-xenophobia-shows-we-havent-learned-from-our-past-132802 and the BBC News 'Partygate' Timeline, https://www.bbc.co.uk/news/uk-politics-59952395.

[8] Elisa Fisher (et al.), 'Reflections from the "Forgotten Front Line": A qualitative study of factors affecting wellbeing among long-term care workers in New York City during the Covid-19 pandemic', *Geriatric Nursing* Vol. 42 Issue 6 (2021), pp. 1408-1414; Ursula Hersh, 'Underappreciated and Undervalued: Nurse Dissatisfaction and the COVID-19 Pandemic' in Joanne E. Howard (ed.) *Handbook of Research on Transforming Government, Nonprofits, and Healthcare in a Post-Pandemic Era* (Pennsylvania, 2022), pp. 234-272.

history 'from below'.[9] Since then, the discipline has continued to flourish, with historians remaining keen to explore the experiences and agency of ordinary people in past societies, paying increased attention to gender, race, global history and material culture.[10] The guiding principles of this 'new social history' were then, and largely remain, that ordinary people not only *have* a history that is worthy of study, but that they also have a role in *shaping* history more generally. These principles provide the foundation for my own research into the impact of plague.

The second is the large body of scholarship relating to plague and other epidemic diseases. Much of this scholarship will be discussed in more detail throughout the thesis, but it is worth noting some of the most significant developments here by way of context and introduction. It would be remiss of me to not begin this short overview by mentioning Paul Slack's landmark study *The Impact of Plague* which remains one of the most wide-ranging and well-rounded histories of the disease in the field.[11] This large, empirical study covers an ambitious array of topics including the demographic, social, political and economic impact of plague. Plague was a complex phenomenon that remains relevant to so many different topics of historical inquiry because it is so deeply and intrinsically connected to so many different facets of human experience. It is for this reason that this thesis both is and is not a study about plague. Rather, it uses plague as a lens to analyse social relations during moments of crisis, examining how the disease impacted and disrupted existing societal structures and reshaped power dynamics and communal responses.

An important background to this analysis is, of course, an understanding of what plague was, and where it was active in this period. In this I am indebted to scholars of the epidemiological and demographic history of the disease such as Charles Creighton and J.F.D. Shrewsbury, who have contributed important survey works covering the geographical spread and incidence of plague, and historians such as O.J. Benedictow who have

---

[9] See, for example, E.P. Thompson, *The Making of the English Working Class* (London, 1963); Natalie Zemon Davis, *Society and Culture in Early Modern France* (California, 1975); Carlo Ginzburg, *The Cheese and the Worms: The Cosmos of a Sixteenth-Century Miller* (Oxfordshire, 1976); Laurence Stone, *The Family, Sex and Marriage in England 1500-1800* (New York, 1977); Keith Wrightson, *English Society: 1580-1680* (New Brunswick, New Jersey, 1982).
[10] See, for example, Natalie Zemon Davis*, Women on the Margins: Three Seventeenth-Century Lives* (Cambridge, Massachusetts, 1995); Dror Wahrman, *The Making of the Modern Self: Identity and Culture in Eighteenth-Century England* (New Haven, 2004).
[11] Paul Slack, *The Impact of Plague in Tudor and Stuart England* (London, 1985).

explored plague mortality and morbidity.[12] My research aims to fill a critical gap here by building the first comprehensive account of the transmission of plague in northern England and southern Scotland, moving away from the traditional emphasis on London and the southern counties that has typically dominated plague studies. The history of plague in Scotland, in particular, remains underexplored. Scholars like Karen Jillings have made strides in understanding the economic and political implications of the disease in Aberdeen, but there have been few works which address the questions of how the disease was transmitted elsewhere in Scotland.[13]

Upon this foundation, the thesis then explores the social interactions that facilitated transmission. It is here that I have been greatly influenced by the work of scholars who aim to uncover the social history of plague, those who seek to reconstruct the experiences of ordinary people and ask what the plague can tell us about social relations and early modern society. In this I am particularly indebted to the work of Keith Wrightson, whose monograph provided a foundation for my own research into the broader social impact of plague in the north of England, and later, Edinburgh.[14] Wrightson was one of the first scholars to challenge the idea that the plague inevitably led to social disintegration, uncovering evidence highlighting the strength of neighbourly bonds during the 1636 outbreak of plague in Newcastle. Other notable contributions in this area include Ann Carmichael's and John Henderson's works on plague and the poor in Florence.[15] Even now, plague remains a fertile area of historical investigation as evidenced by the numerous and wide-ranging recent PhD theses on the subject.[16] Despite all these advances in both social history and the history of epidemic disease, however, significant gaps remain. One of the most pressing is our limited understanding of lived experience of plague,

---

[12] Charles Creighton, *A History of Epidemics in Britain* (2 vols), (Cambridge, 1891-4); J.F.D. Shrewsbury, *A History of Bubonic Plague in the British Isles* (Cambridge, 1971); O.J. Benedictow 'Morbidity in Historical Plague Epidemics', *Population Studies*, 41 (1987), pp. 401-431.

[13] Karen Jillings, *An Urban History of the Plague: Socio-Economic, Political and Medical Impacts in a Scottish Community, 1500-1650* (Oxfordshire, 2018).

[14] Keith Wrightson, *Ralph Tailor's Summer: A Scrivener, His City and the Plague* (New Haven, 2011).

[15] Ann G. Carmichael, *Plague and the Poor in Renaissance Florence* (Cambridge, 1986); John Henderson, *Florence Under Siege: Surviving Plague in an Early Modern City* (New Haven, 2019).

[16] Marina Inì, *The System of Lazzaretti in the Early Modern Mediterranean*, Unpublished PhD thesis, University of Cambridge (2022); Aaron Columbus, *The Response to Plague and the Poor in the Suburbs of Early Modern London c. 1600-1650*, Unpublished PhD thesis, Birkbeck, University of London (2021); Claire Turner, *Sensing the Plague in Seventeenth-Century England*, Unpublished PhD Thesis, University of Leeds (2023); Lorna Giltrow-Shaw, *"This low built house will bring us to our ends": Plague Quarantine and Prophylactic Boundaries in Early Modern Drama and Culture, 1593-1636*, Unpublished PhD Thesis, The Shakespeare Institute, University of Birmingham (2024).

particularly outside of London and other major European cities. The records are fragmentary, much of the bodywork invisible, and the emotions and speech largely lost forever. My thesis aims to fill this gap by investigating the experiences of plague workers such as nurses, cleansers, buriers and enforcement officers, all of whom left traces upon the historical record. Here, my research intersects with and adds to discussions on gender and labour, particularly those which seek to define what 'counts' as medical and non-medical work in this period and those which are revaluating women's contribution to the labour market.[17] The last significant gap addressed here is the lack of scholarship on the aftermath of plagues. Whilst there has been work on the cultural memory of plague such as the work of Ann Carmichael, there has, again, been little work on the lived experience of life after a plague.[18] My research looks at the concerns of ordinary people following outbreaks of plague, assessing what practical interventions were required for them to rebuild their lives.

Ultimately, this thesis aims to uncover and re-evaluate a wide range of sources to better understand the daily nuts and bolts so often glossed over in histories of disease. As an ordinary person living through an outbreak of plague, who took care of you? Why did they choose to help? What services did they perform? What measures did your leaders put in place to manage the progress of the disease? What motivated these decisions, and how did you feel about the actions taken on your behalf? Would your experiences change depending on where you lived? And finally, when the disease had dissipated, how did you begin to rebuild your life? This thesis seeks to answer these questions and assess what this evidence can tell us about early modern societies in crisis.

Chronology

When most of us think of bubonic plague we likely think of either the pandemic that swept across Europe from 1346 to 1353, more commonly known as the Black Death, or the 1665-6 outbreak in London, often

---

[17] See, for example, Margaret Pelling, *Medical Conflicts in Early Modern London: Patronage, Physicians, and Irregular Practitioners, 1550-1640* (Oxford, 2003); Mary Fissell, 'Introduction: Women, health and healing in early modern Europe', *Bulletin for the History of Medicine* 82 (2008), pp. 1-17; Montserrat Cabré, 'Women or Healers? Household practices and the categories of health care in late medieval Iberia', *Bulletin for the History of Medicine* 82 (2008), pp. 18-15; Jane Whittle, 'A Critique of Approaches to 'Domestic Work': Women, Work and the Pre-Industrial Economy', *Past & Present,* volume 243, Issue 1 (2019), pp. 35-70.

[18] Ann G. Carmichael, 'The Last Past Plague: The Uses of Memory in Renaissance Epidemics', *Journal of the History of Medicine and Allied Sciences,* Volume 53, Issue 2 (1998), pp. 132-160.

referred to as the 'Great Plague'. However, the disease was present throughout the interim, and towns and cities across Europe experienced recurring outbreaks of varying levels of severity every decade or so. These lesser-known outbreaks continued to impact communities and few, if any, lives during this time would have been entirely unburdened by its consequences. The period 1597 - 1666 was chosen because these years represent a critical phase in the histories of England and Scotland. These years were defined by dramatic episodes of political upheaval, religious conflict, economic hardship and famine.[19] Against the backdrop of these tumultuous seven decades, bubonic plague remained a persistent and terrifying prospect for communities across England and Scotland. The study begins in the late sixteenth century when English authorities were beginning to codify and standardise approaches to public health and ends in the 1660s when the disease ultimately disappeared from our shores. This timeframe is restricted enough that it allows for a detailed exploration of the sources whilst still being long enough to observe shifts in attitudes and policies over time. Some of the chapters, such as chapter four which explores incidences of plague policy infringements, draw on evidence from earlier outbreaks to provide necessary context for the main years of study. Ultimately, however, this thesis observes how multiple generations of individuals lived with the recurring reality of the plague, adapting their lives, laws and communities to accommodate the constant threat.

Geographical Scope

The vast majority of existing scholarship on the topic relates to London.[20] This project, therefore, makes a significant contribution to the field by exploring the social impact of plague in areas far removed from the

---

[19] For an overview of the period including summaries of these events, see J.A. Sharpe, *Early Modern England: A Social History 1550-1760* (London, 1997).

[20] See, for example, F.P. Wilson, *The Plague in Shakespeare's London* (Oxford, 1927); Charles F. Mullett, *The Bubonic Plague and England: An Essay in the History of Preventative Medicine* (Lexington, 1956); Ole Peter Grell, 'Plague in Elizabethan and Stuart London: The Dutch Response', *Medical History,* Volume 34, Issue 4 (1990), pp. 424-439; J.A.I Champion (ed.), *Epidemic Disease in London* (1993); A.L. Moote and D. Moote, *The Great Plague: The Story of London's Most Deadly Year* (Baltimore, 2004); Patrick Wallis, 'Plagues, Morality and the Place of Medicine in Early Modern England', *The English Historical Review* Volume CXXI, Issue 490, (2006), pp. 1-24; K.L.S. Newman, 'Shutt up: Bubonic plague and quarantine in early modern England, *Journal of Social History* (2012), pp. 809-834; N. Cummins (et al.), 'Living standards and plague in London 1560-1665', *Economic History Review,* 69 (2016), pp. 3-34;. For more recent examples see Vanessa Harding, 'Plague in early modern London: chronologies, localities, and environments' in Lukas Engelmann (et al.), *Plague and the City* (Oxford, 2019); Aaron Columbus, 'To be had for a Pesthouse for the use of this parish': plague pesthouses in early Stuart London, c. 1600-1650', *Urban History,* Volume 51, Issue 1 (2022), pp. 125-145.

capital. It investigates how individuals experienced the disease in towns and cities across southern Scotland,

Lancashire, Yorkshire and the North East of England, with a particular focus on the large urban centres of York

and Edinburgh. The comparison between England and Scotland was initially born out of necessity. Having

originally decided to focus on the north of England alone, I later made the decision to include Edinburgh.

During lockdown, when access to archives was extremely limited, I was able to make use of the many digitised

resources relating to Edinburgh available online including town council minutes and kirk session records. This

allowed me to continue to work on the project when I was unable to physically access archival sources.

However, as the project progressed, it quickly became clear that the comparison between England and

Scotland was crucial to understanding the impact of plague outside of London, offering important insights into

how different urban centres navigated crises in the same period.

Although comparisons between England and Scotland are relatively rare in early modern scholarship, this is

certainly not the first study to take such an approach. Leona Skelton's *Sanitation in Urban Britain* (2015) made

use of a comparative, national methodology in order to observe how sanitation was managed in urban

settlements of different sizes, geographical locations, administrative frameworks and political contexts.[21] Like

the present study, Skelton's work explores a wide range of towns and cities but focuses on York and

Edinburgh for more detailed analysis. Melissa Hollander also successfully completed such a comparison in her

unpublished PhD thesis on sexual relationships in Edinburgh and York. As she argues, although any concept of

'Britain' in this period was very much in its embryonic stages, and Scotland remained 'as separate and distinct

from England as France or Spain in terms of social, political and religious ideology and practice', there

nevertheless remained a number of recognisable economic and political similarities between the north of

England and southern Scotland.[22] For example, Helen Dingwall estimates the population of Edinburgh residing

within the city walls to have been around 12,000, similar to Chris Galley's estimates of between 9000 to

---

[21] Leona Skelton, *Sanitation in Urban Britain, 1560-1700* (Abingdon, 2016).
[22] Melissa Hollander, *Sex in Two Cities: The Formation and Regulation of Sexual Relationships in Edinburgh and York, 1560 to 1625*, Unpublished PhD Thesis, University of York (2006), p. 7.

12,000 in seventeenth-century York.[23] In addition, both York and Edinburgh were centres of political and

religious administration, with the Scottish Crown residing in Edinburgh and the King's Council in the North

established at York. The similarities and differences between these and other towns in northern England make

for an interesting and meaningful comparison. The result is a history of responses to plague that is defined as

much by local and regional variation as it is by central authorities. National plague orders might have reflected

the intentions of these authorities, but each administration implemented its own strategies to defend their

inhabitants against the disease. If we want to expand our knowledge of the impact of plague outside of

London, therefore, we must alter our approach, and consider multiple types of sources across multiple

regions. This approach raises an interesting, if ultimately unanswerable question: why does some evidence

exist in certain contexts while it remains absent in others? Why is it that certain events or phenomena were

deemed significant enough in some regions to be recorded, while in others they were either overlooked or

lost entirely? One of the key contributions of this thesis is the demonstration that geographical and

administrative differences play a significant role in the types of evidence that are available for study. By

comparing various regions, this study highlights the fact that no single type of evidence or documentation is

uniformly present across all places. It stresses the importance of considering local contexts when analysing

historical evidence, as different places will prioritise or record information differently.

Sources and Methodology

The project began as an enquiry specifically about plague nurses. However, over the course of the past four

years the thesis evolved into a much broader investigation. This was in part due to the fragmentary nature of

the sources. Having been encouraged by the presence of evidence relating to plague nursing in the probate

material collected by Durham University Library, I began consulting other archives in the hope of finding

similar examples. To that end I consulted over 600 wills in the Cumbria Archive Centre in Carlisle and a further

---

[23] Helen Dingwall, *Late Seventeenth-Century Edinburgh: A Demographic Study* (Aldershot, 1994), pp. 27, 39-40; Chris Galley, *The Demography of Early Modern Towns: York in the Sixteenth and Seventeenth Centuries* (Liverpool, 1988), pp. 5, 44. Dingwall also estimates that an additional 6,000 to 8,000 individuals could be found residing in the suburbs of Canongate, South Leith and St Cuthbert's.

sample of 300 in Lancashire Archives in Preston to no avail. The limited survival of source material relating to plague nurses meant that I simply could not undertake the kind of quantitative study that I had initially envisioned. However, during this search, it also became increasingly clear that in order to fully understand the role of nursing in plague outbreaks, and the significance of their contribution, I had to understand how their stories fit into broader responses to plague, alongside other temporary workers providing plague-related care as well as the households and communities that they served. Inspired by Carole Rawcliffe's pioneering work on public health strategies in medieval English towns and cities, this thesis therefore seeks to unite 'the impetus from above' with the 'response from below' in a single study.[24] The stress and anxiety caused by outbreaks of plague reveal a great deal about human behaviour, highlighting the priorities of local governments in times of crisis as well as the bonds that sustained individuals throughout. The methodological underpinning of this research, therefore, assumes that we cannot simply 'grab' the voices of the poor and marginalised without first contextualising their experiences. The actions of institutions and administrative structures matter even for histories written 'from below'. Nevertheless, there can be no doubt that this is a thesis about the ways in which ordinary people experienced and responded to outbreaks of plague.

Unfortunately, as Paul Slack has commented, 'the reactions of the common people to plague are the most difficult of all to reconstruct'.[25] As a result, I have made use of a wide range of sources in order to begin to piece together a history written from their perspective as much as possible. The sources used will be discussed in more detail throughout each chapter, but it will be worth including a brief summary here also. The main archives consulted were Durham University Library, Explore York Libraries and Archive, the Borthwick Institute for Archives in York, Lancashire Archives in Preston, Edinburgh City Archive and the National Records of Scotland. I also consulted a range of online materials via platforms like British Online Archives and Early English Books Online (EEBO). Unfortunately, for the vast majority of the period 2020-2024, Durham County Record Office was closed, partly due to Covid and then again as it prepared to move to its

---

[24] Carole Rawcliffe, *Urban Bodies: Communal Health in Late Medieval English Towns and Cities* (Woodbridge, 2013). The quoted phrases refer to chapter titles in the book.
[25] Slack, *Impact of Plague*, p. 284.

new home at The Story Durham, meaning that I was able to access only a handful of records there. In terms of the sources themselves, the one of the main sources consulted was administrative records like town council and corporation minutes. As W. J. MacLennan has argued, the 'great value' of these sources lies in their 'sense of immediacy'.[26] They provide information on the thoughts and decisions taken before an event, as well as the modification of these actions with further developments. We can see all these events unfold across an outbreak. They also include vignettes which allow us glimpses into the effects of plague on individuals and their families. Other sources consulted include court records including quarter sessions court orders, minutes, depositions and petitions, probate material such as wills and inventories as well as contemporary letters, diaries and printed literature. Together, these sources help to build a richer depiction of the social impact of plague and help me to access typically overlooked voices.

Thesis Structure

Chapter one traces outbreaks of plague throughout northern England and Southern Scotland, providing the first detailed account of when and where plague was active in these regions during the seventeenth century. Again, this chapter was originally researched and written during lockdown, when the closure of archives prevented access to primary material, and my funding body advised me to adapt my project. To that end, the chapter makes use of existing secondary material by connecting more recent, smaller case studies with older, broader survey studies alongside some additional primary material to build a clear, comprehensive account of the transmission of plague in northern England and southern Scotland. It plots the locations of plague outbreaks and proposes the likely points of entry and departure for the eight major outbreaks that swept across these regions during the late sixteenth and early seventeenth centuries. It examines the frequency and severity of these outbreaks and observes how these regions differed from one another and the rest of Britain. It is hoped that this introductory chapter will not only provide essential context for the rest of the study but

---

[26] W. J. MacLennan, 'The Eleven Plagues of Edinburgh', *Proceedings of the Royal College of Physicians of Edinburgh,* Volume 31, (2001), p. 256.

will also contribute fresh evidence to several outstanding fundamental questions relating to plague in this period. How and why was plague transmitted in the provinces? To what extent was plague an urban disease?

Chapter two outlines some of the policies put in place by English and Scottish authorities to control and prevent the spread of plague, comparing the two approaches. It also explores instances of plague policy transgressions in order to assess how far the will of government encroached upon the lives and liberties of individuals, and how these individuals responded to these new policies. With this evidence, I question Foucault's claim that plague led to a complete breakdown of social order.[27] Plague-related offences, I find, were largely motivated by the will to survive, to maintain social networks, and, to a lesser extent, to express dissatisfaction with the increased power and authority of civic officials. The transgressions, and the punishments they received, show that authorities were just as, if not more, concerned about maintaining public order, as they were about preserving public health. Overall, however, I argue that the dichotomy between anarchy on the one hand and complete social control on the other may be too reductive to accurately describe responses to plague in this period. Neither of these interpretations allows for one of the strongest and most enduring motivations behind early modern social interactions: the bonds of good neighbourliness. Many of the transgressions recorded in this chapter illustrate that even during outbreaks of plague, people fought to maintain good neighbourliness, contrary to the orders of authorities.

Chapter three explores the interconnected roles of cleansing, burial, distribution, and plague policy enforcement across northern England and Edinburgh, revealing how the plague policies outlined in chapter two were implemented on the ground. It outlines the roles and responsibilities of the individuals tasked with ensuring that their communities remained functional throughout outbreaks of plague, demonstrating how these roles could vary significantly from town to town. This chapter argues that multiple 'plague industries' existed across northern England and in Edinburgh, providing further evidence of the significant regional variations in plague responses. Additionally, it highlights the gendered dynamics of plague labour, illustrating

---

[27] Michel Foucault, *Abnormal: Lectures at the Collège de France 1974-1975*, ed. Valerio Marchetti and Antonella Salomoni (London and New York, 2003), p. 47.

that tasks completed by women and men were not valued equally. While male plague workers were frequently identified by specific occupational titles, women's contributions were described using active verbs, emphasising their actions over their roles. Women 'cleansed,' 'buried,' 'kept,' and 'cared,' while men were granted titles like 'cleanser' or 'burier' that lent their work greater legitimacy and respect. Men *are* whilst women *do*. This linguistic distinction reflects a broader societal undervaluation of female labour which appears to have continued into the emergency labour provided by plague workers. The chapter further examines these disparities through the lens of 'honourable' versus 'dishonourable' trades. It demonstrates that labour deemed dishonourable for women could, paradoxically, lead to upward social mobility for men who performed similar, and in some cases seemingly identical, work. Men who cleansed or buried plague victims were sometimes rewarded with pensions or titles, cementing their societal status, whereas women remained undervalued, even as their labour was crucial to community survival. Thus, this chapter reveals how gendered perceptions shaped the economic and social outcomes of plague work, reinforcing patriarchal structures even in times of crisis.

Lastly, the chapter examines the figure of the plague doctor, the ominous presence in a beak-shaped mask and a black cloak that has become so synonymous with the disease. It reveals that there is little evidence to suggest that such elaborate costumes were worn in Britain, or that physicians were actively involved in treating patients during outbreaks of plague. The overwhelming evidence suggests that most doctors fled. Instead, sufferers were far more likely to interact with individuals from these 'plague industries' like nurses or cleansers, and the chapter examines what we can reliably infer about the attire of those who stayed behind. It concludes by arguing that the protective clothing provided to plague workers, unlike the dramatic masks and cloaks we see depicted in European drawings, were less about shielding the wearer from the disease, and more about serving the needs of the community. Their clothing was designed to make plague workers more easily identifiable so that others could avoid close contact; it offered little protection to the wearer themselves.

Chapter four explores the role of plague nursing in early modern England. Inspired by the work of scholars such as Sheilagh Ogilvie, Maria Agren, Jane Whittle and Mark Hailwood, this chapter employs a 'verb-oriented' approach to primary material, looking for accidental or incidental references to plague nurses and their activities in northern England.[28] What little evidence does survive tells us not only that the practice of plague nursing happened outside of London, but also that it may have functioned quite differently in northern England. Unlike those in the capital, plague nurses in the north appear to have been hired directly by the infected household, with little intervention from parish authorities. The chapter also explores the themes of perception and professionalisation, asking who these individuals were and what their contemporaries thought about their contributions. In general, plague nurses are portrayed in contemporary printed literature as at best, incompetent, and at worst, dangerous. This chapter establishes that this negative portrayal is not necessarily reflected in the sources which describe the lived experience of nurses and those they served. Rather than objects of fear and disgust, plague nurses emerge from the records, in many cases, as trusted, diligent care workers, many of whom formed strong bonds with their patients. Lastly, this chapter finds evidence that the plague nursing was, to some extent, 'professionalised'. It finds that there were individuals who were specifically recognised for their expertise, skills, or willingness to perform these tasks, who were distinct from the general population.

Finally, chapter five explores life *after* the plague. This final chapter makes three main contributions. Firstly, it demonstrates the usefulness of petitions as sources for accessing responses to plague from a range of perspectives, many of which are typically under-represented such as women and the poor. Secondly, it contributes to the rapidly expanding interdisciplinary field of disaster studies by exploring and challenging the concept of 'resilience'. It argues that when analysing how early modern societies fostered resilience, we should not limit our analysis exclusively to the arrangements implemented by large institutions and governing

---

[28] See, for example, Sheilagh Ogilvie, *A Bitter Living: Women, Markets and Social Capital in Early Modern Germany* (Oxford, 2003); Maria Ågren, 'Making Her Turn Around: The Verb-Oriented Method, the Two-Supporter Model, and the Focus on Practice', *Early Modern Women* Volume 13, No. 1 (2018), pp. 144-152; Jane Whittle and Mark Hailwood, 'The gender division of labour in early modern England', *The Economic History Review* Volume 73, Issue 1 (2020), pp. 3-32.

bodies. Responses to plague were formed at a variety of levels. At the macro-level, we have the general

plague orders produced by central governments. More influential, however, were the administrative

responses implemented by local government. Lastly, at the micro level, we have community and individual

responses. This chapter argues that it is on this level that we find the most dominant form of welfare and

assistance. The usual forms of poor relief sanctioned by the crown were unable to cope with the extraordinary

demands of a plague outbreak. Resilience and recovery, in the first instance, were largely enabled at the

parish level by neighbours, friends and family members. It was only when these bonds were pushed to

breaking point that individuals would petition local authorities for assistance. The petitions discussed in this

chapter reveal the point at which community support was no longer sufficient and demonstrate a series of

unique needs and essential interventions made by the Court of Quarter Sessions. More importantly, however,

they also offer rare and valuable insight into the bonds that sustained early modern communities prior to

them seeking institutional assistance. And lastly, the final contribution of this chapter is to provide some

answers to the question 'when do epidemics end?'. The epidemiological 'end' of an epidemic, i.e., when the

disease itself has died out, does not necessarily coincide with its social 'end', i.e., when the disease ceases to

be a major factor shaping or influencing an individual's daily life. Recent developments within the field of

disaster studies have demonstrated that often disasters do not kill but still have long-lasting disruptive effects

on societies and institutions.[29] This chapter uses petitions to assess the ways in which plague continued to

impact the lives of ordinary people long after the disease had relinquished its grip upon a town.

Through these inquiries, my research aims to increase our understanding of early modern social relations

during periods of immense upheaval. By shifting our focus to typically under-represented experiences, it

explores the processes of negotiation between authorities and individuals as they attempted to survive severe

outbreaks of plague and highlights the strength of existing friendships and social networks. When Edward

Phillips wrote of the 'deplorable occasion wch hath caus'd so universall a separation of friends', this

separation, I argue, was felt more by the upper classes who could afford to flee to their country estates, than

---

[29] See, for example, Bas van Bavel (et al.), *Disasters and History: The Vulnerability and Resilience of Past Societies* (Cambridge, 2020).

the ordinary people forced to endure infected towns and cities. Indeed, the London cleric Simon Patrick recorded in his diary that in the weeks before Christmas, 1666, his parish 'began to fill again, which had been a long time very empty', for 'none but the ordinary sort of people' had remained.[30] Clearly, then, the parish had not been empty, but had rather been empty of people of a certain status. This thesis shows that the day-to-day management of plague outbreaks depended on the efforts of hundreds of poor and ordinary people who remained in their towns and villages when others fled, many of whom had little choice but to provide essential maintenance to their neighbours and cleanse the homes of the infected, to help ensure order and adherence to the emergency plague measures and to safely bury the deceased. Additionally, many others who remained defied the orders of authorities by sitting with their dying friends, they took in their neighbours' orphaned children, they smuggled goods over city walls, and even, on occasion, socialised, drank, danced, and revelled throughout the night. In short, my thesis uncovers new and compelling evidence to support Keith Wrightson's analysis that the plague did not divide early modern society as severely as we once thought. Rather than fracturing communities, my thesis reveals evidence of complex networks of care and solidarity amongst ordinary people. Neighbours, families and friends often rallied together to ensure the survival of their communities and called upon the authorities to assist only when all other avenues were closed. These findings challenge the notion of social disintegration during crises, highlighting the resilience and strength of communal bonds in early modern society. In summary, this thesis illuminates the complexities of living through a plague, revealing the intertwined narratives of individual experiences, community responses, and institutional frameworks that defined these increasingly relevant chapters in early modern history.

---

[30] Alexander Taylor (ed.), *The Works of Symon Patrick, D.D. Sometime Bishop of Ely including his autobiography Vol IX*, (Oxford, 1858), p. 446.

Chapter One: The Transmission of Plague in Northern England and Southern Scotland

The origins, transmission and eventual disappearance of bubonic plague are topics which have both fascinated and puzzled historians for generations. Much work in recent years has focused on the transmission of the disease in continental Europe.[31] Comparatively little work has been undertaken on questions relating to the transmission of the disease between communities in England, particularly those away from London and surrounding southern counties which have traditionally been the focus of plague studies. There has been even less scholarship on the transmission of the disease in Scotland. However, as Keith Wrightson has argued, the threat of plague was 'one of the defining characteristics of the early modern world' and as such, it is important to understand both how and why it spread.[32] By connecting more recent, smaller case studies with older, broader survey studies alongside additional primary material, this chapter builds the first clear, comprehensive account of the transmission of plague in northern England and southern Scotland and observes how the disease interacted both between and within local communities.

This chapter plots the geographic locations of plague outbreaks and proposes the likely points of entry and departure for the nine major outbreaks that swept across these regions during the late sixteenth and seventeenth centuries. It examines the frequency and severity of these outbreaks and observes how these regions differed from both one another and the rest of Britain. This will not only provide essential context for the rest of the study but will also contribute fresh evidence to several outstanding fundamental questions relating to plague in this period. For example, how and why was plague transmitted? To what extent was plague an urban disease?

---

[31] See for example Katharine R. Dean, 'The epidemiology of plague in Europe: Inferring transmission dynamics from historical data', Unpublished PhD thesis, Centre for Ecological and Evolutionary Synthesis, Department of Biosciences, University of Oslo (2019); Ricci P. H. Yue (et al.), 'Trade routes and plague transmission in pre-industrial Europe', *Scientific Reports* 7, (2017); Ann G. Carmichael, 'Plague persistence in western Europe: A hypothesis', *The Medieval Globe: Vol 1,* No. 1, Article 8 (2014), pp. 157-191.
[32] Keith Wrightson, *Ralph Tailor's Summer*, p. 6.

In many ways, the outbreaks studied in this chapter conform to the patterns suggested by modern epidemiological plague studies. They began in ports and major towns, followed main routes of communication to other urban centres and from there to smaller communities, occasionally reaching some of the more isolated villages. In his study of plague in central Europe during this period, Edward A. Eckert observed the existence of 'self-generating and repetitive flows and cycles of plague' thereby establishing what R. Pollitzer later termed an 'area-wide endemicity'.[33] This endemicity, he argues, broke down in the early seventeenth century when distinct gaps between epidemic cycles can be observed. Evidence from the north of England and southern Scotland supports Eckert's view that the area-wide endemicity had indeed broken down by the early seventeenth century. Plague rarely smouldered in the intervening years between major outbreaks but rather was reintroduced every decade or so.

Additionally, this study demonstrates that, contrary to previous belief, plague was not necessarily predominantly an urban disease. Andrew Appleby has argued convincingly that towns and cities provided the optimum setting for plague to flourish by affording food and shelter to large colonies of flea-carrying rats.[34] However, with new epidemiological studies emphasising the role of human ectoparasites in the transmission of plague, it is important to consider possible methods of transmission beyond the activity of flea-carrying rodents. The focused geographical scope allows this chapter to observe the transmission of the disease in the often-overlooked rural villages outside of major urban centres. It finds that certain characteristics of urban towns may have helped the disease to enter the region, but communication networks between large urban centres, small market towns and rural hamlets meant that the disease frequently reached even the most isolated of villages. This was particularly true in times of famine when individuals were forced to travel long distances in search of food or during times of war when large armies covered significant ground, spreading the disease as they went.

---

[33] Edward A. Eckert, *The Structure of Plagues and Pestilences in Early Modern Europe*. Central Europe 1560-1640 (Basel, 1996), p. 1; R. Pollitzer, *Plague*, WHO Monograph Series No . 22, Geneva, World Health Organization, (1954), p. 498.

[34] A. Appleby, 'Disease or Famine? Mortality in Cumberland and Westmorland 1580-1640', *The Economic History Review,* Vol. 26, No. 3 (1973), p. 403.

Of course, the individuals and communities who are the subject of the rest of this thesis did not understand the biological parameters of how or why the plague was transmitted as we do now. Contemporary explanations ranged from the will of God and the influence of the heavens to infected clothing, bad air, and poor humoral balance. Why, then, should we be concerned with the biological transmission of the disease here? What follows initially came into being out of necessity due to the Covid-19 pandemic, out of a need to adapt my project to allow me to continue working without access to archives, but it nevertheless provides an important foundation for the rest of the thesis. Before I could begin to understand how the disease was experienced, I needed to know exactly when and where the disease struck. This chronological and geographical mapping of the plague's outbreaks allows for a more precise analysis of its impact on the population and society. How often did plague strike? Would people remember previous outbreaks? Would their parents or grandparents? How far did the incidence of plague influence the lives of early modern people? This chapter helps us to consider these questions, setting the stage for a deeper exploration of the human experience during these crises elsewhere in the thesis.

1.1 What is 'the plague'?

To begin, it is necessary to provide a brief description of the disease which forms the basis of this study. In 1894, the bacterium responsible for plague was identified as Yersinia *pestis*, so-called after the physician who made the discovery, Alexandre Yersin.[35] It is primarily a disease of rodents, especially rats, who pass on the disease to fleas which feed on the blood of the infected rodent. It is initially transmitted to humans when the infected fleas abandon their dead or dying animal host in search of nourishment on live humans. From the initial infection, the incubation period of the disease is estimated to be between one and six days.[36] From this point, the characteristic 'tokens' begin to appear on the body. A blister forms at the site of the original fleabite and swellings appear in the lymphatic glands in the groin, armpits or neck. These swellings, more commonly

---

[35] L. Bradley, 'Some Medical Aspects of Plague' in *The Plague Reconsidered* (Local Population Studies Supplement, 1977), p. 12.

[36] J. N. Biraben, 'Current medical and epidemiological views on plague', in *The Plague Reconsidered,* p. 27.

known as 'buboes' are what give bubonic plague its name. The sufferer's temperature rises to around 40° and they experience headaches, vomiting, pain and delirium before finally sinking into a coma.[37] Historically, fatality rates varied from epidemic to epidemic, but the World Health Organisation estimate a case-fatality rate of between 30 per cent to 100 per cent if the disease is left untreated.[38] A second, acute, form of the disease known as septicaemic plague occurs when the bacteria invade the bloodstream. It has an extremely high case-fatality rate meaning the sufferer will often succumb to the disease before the tell-tale buboes have had time to develop.[39] Finally, in its pneumonic form, the disease spreads through the inhalation of droplets coughed, sneezed or spoken by the infected. The incubation period is short, usually between one and three days, and the symptoms often differ from the disease's bubonic form, with a cough and bloody sputum being most common. Like septicaemic plague, this form of the disease was virtually always fatal.[40]

It is important to distinguish plague epidemics from those caused by other diseases or famine. Crisis levels of mortality alone do not necessarily indicate that the disease was prevalent. Although there can rarely be absolute certainty, there are methods which can increase the accuracy of identification. Firstly, contemporary references and notations in burial registers provide evidence that plague was present. The terms 'plague', 'pl.', 'p' or 'pest' are commonly found in parish records. Some historians have questioned the accuracy and reliability of contemporary observers. For example, Charles Mullet argued that plague in the seventeenth century was often 'a generic word, no more precise than fever or flu'.[41] J. F. Shrewsbury similarly observed the tendency of contemporaries to conflate plague with other epidemic diseases, particularly Typhus fever.[42] However, as Christopher Morris has shown, even some of the earliest treatises on plague differentiate between epidemic diseases. In 1348, for example, Jacme D'Agramont of Lerida carefully distinguished between plague on the one hand and smallpox, measles, anthrax and goitre on the other.[43] By the later

---

[37] Paul Slack, *The Impact of Plague in Tudor and Stuart England* (Oxford, 1990), p. 8.
[38] https://www.who.int/news-room/fact-sheets/detail/plague. Date accessed 18 June 2024.
[39] Bradley, 'Some medical aspects of plague', p. 13.
[40] Slack, *Impact of* Plague, p. 9.
[41] Charles F. Mullet, *The Bubonic Plague and England: An Essay in the History of Preventive Medicine* (Lexington, 1956), p. 4.
[42] J. F. D. Shrewsbury, A History of Bubonic Plague in the British Isles (Cambridge, 1970), pp. 104, 124-5, 161-4, 171, 173, 183, 188, 198, 221-2, 232, 235, 239, 281, 286, 293, 295, 299, 315-6, 333, 360, 370, 387, 401, 407, 425-6, and 535.
[43] Christopher Morris, 'Plague in Britain', in *The Plague Reconsidered*, p. 42.

sixteenth century, the term 'plague' was also increasingly used with the definitive article to describe a specific

disease. For example, Paul Slack uncovered an instance where the disease was described as 'much like the

plague but…not the plague' in 1580s Shropshire, and in Surrey in 1626, high mortality was attributed not to

'the plague', but a 'disease somewhat akin to it'.[44] The highly distinctive symptoms, rapid rate of infection,

and the fear and alarm associated with the disease likely made it easily identifiable to contemporaries.

Secondly, plague has a distinct seasonal pattern, especially in its bubonic form. These patterns have been

explored in detail by Susan Scott and Christopher Duncan in their research on the Cumbrian outbreak of

1597/8. Using evidence from historical outbreaks, they divide the seasonal characteristics of plague into two

'types'.[45] A type (i) epidemic is the standard epidemic pattern observed throughout the period 1348-1666. It

appeared in the spring, typically in March or April but sometimes in May, and due to the disease's long

incubation period, it developed slowly. It reached its peak in July to August followed by a decline throughout

the autumn with the last plague deaths occurring in November or December. Bubonic plague thrives best in a

warm, humid climate which allows fleas to breed and flourish.[46] The typical duration of a type (i) epidemic was

between eight or nine months. A variation of a type (i) epidemic had its peak in winter although this seems to

have been recorded only during the Black Death and a few outbreaks in the provinces thereafter. Also

included in this category are isolated, small-scale outbreaks in late spring or summer which were confined to

one or two households or a small hamlet. A type (ii) epidemic began with the arrival of the disease in late

August or September, most likely introduced by an individual from a locality in the midst of a type (i) epidemic

summer peak. The afflicted area saw a small autumnal peak of plague burials, but the spread of the infection

was dramatically reduced by the cold weather in December. The epidemic broke out again in spring with a

slow build-up and major summer peak consistent with type (i) epidemics. The typical duration of a type (ii)

epidemic was fourteen months. These patterns make it easier to identify the presence of plague even when

parish burial registers fail to record it explicitly. This chapter therefore relies on both contemporary

---

[44] Slack, *Impact of Plague,* p. 65.

[45] Susan Scott and Christopher Duncan, *Biology of Plagues: Evidence from Historical Populations* (Cambridge, 2009), p. 148.

[46] Slack, *Impact of Plague,* p. 7.

identification in burial registers and other primary sources, as well as evidence of plague's distinctive seasonal pattern in order to ascertain when the disease was present in a particular area.

1.2 1597-1598

The outbreak that swept through southern Scotland and northern England from 1597-1598 had a devastating impact upon local communities and, as a result, it is unusually well documented. In his study of Cumberland and Westmorland, Appleby referred to the crisis mortality during these years as two separate but related crises. The first, in 1597, he argued, was a crisis of starvation. The second, in 1598, was the result of an outbreak of plague. This combination of famine and plague also applies to towns and cities elsewhere in northern England. In January 1597, in a letter of complaint to Lord Burghley, Dr William James, Dean of Durham wrote that the 'decay of tillage' and the 'dispeopling of villages' was 'nowhere so dangerous as in northern parts'. Here, he observed:

> 'want and waste have crept into Northumberland, Westmoreland, & Cumberland; many have to come 60 miles from Carlisle to Durham to buy bread, and sometimes for miles there will be no inhabitant. In the bishopric of Durham, 500 ploughs have decayed in a few years, and corn has to be fetched from Newcastle, whereby the plague is spread in northern counties...tenants cannot pay their rents; then whole families are turned out, and poor borough towns are pestered with four or five families under one roof'.[47]

On 26 May 1597, the dean again complained that there was great dearth in Durham. He reported that some days five hundred horses were at Newcastle to purchase imported bread despite the fact that both Newcastle and Gateshead were dangerously infected with the plague.[48] In Newcastle, reports circulated of 'sundry starving and dying in our streets and in the fields for lack of bread', many 'having not tasted bread in twenty

---

[47] The National Archives (hereafter TNA), SP 12/262, f. 17. Complaint of Dr Wm. James, Dean of Durham to Lord Burghley, January 1597.

[48] TNA, SP 12/263, f. 74. Dr W. James, Dean of Durham to Lord Burghley, 26 May, 1597.

days'.[49] The city's corporation records of September and October 1597 similarly confirm that twenty-five 'poore folks…died for want in the streets' and were buried at the city's expense.[50] Although bubonic plague is not necessarily aggravated by malnutrition, there may have been indirect environmental and behavioural links between dearth and the disease which help to explain why this particular outbreak was both so severe and so widespread throughout northern England. For example, the migration of individuals and vagrants who travelled in search of work or charity or the shipment of foreign corn may have contributed to the spread of the disease.[51]

Paul Slack suggests that the disease likely entered the north of England from Scotland.[52] However, evidence indicates that plague was present in the north of England several months before reports reached Edinburgh of the disease. Creighton suggests that the disease erupted at Richmond in the autumn of 1597, a claim which Shrewsbury describes as 'questionable' on the grounds that the plague was potentially active in the nearby Cumbrian parishes of St Bees and Gosforth in 1596.[53] However, Shrewsbury then fails to offer an alternative point of entry. Scott and Duncan state that the plague 'apparently began at Newcastle upon Tyne', entering the region via the port at Newcastle before moving south down the eastern coastal corridor to infect Durham and Darlington. However, they also state that it may have come from Scotland, citing the Inveresk outbreak in June.[54] We have already seen that in May 1597, the Dean of Durham reported that both Newcastle and Gateshead were 'dangerously infected' with the plague. Also in May, the St Nicholas parish register recorded that 'The greate visitation in Durham did begin this yeare at this time'.[55] Interestingly, the same outbreak is described in the St Giles parish register as the 'second' outbreak, with the 'first' occurring in August 1589,

---

[49] H Sanderson to Sir Robert Cecil, 11 July 1597, in *Calendar of the Manuscripts of the Most Hon. The Marquis of Salisbury Preserved at Hatfield House, Hertfordshire*, Part VII, Historical Manuscripts Commission, (London, 1899), p. 296.

[50] Moses Aaron Richardson (ed.), *Reprints of rare tracts & imprints of antient manuscripts, &c. chiefly illustrative of the history of the northern counties, and printed at the press of M.A. Richardson, Newcastle* (Newcastle, 1844), p. 44.

[51] For more discussions on the indirect links between famine and disease, see John D. Post, 'Famine, Mortality, and Epidemic Disease in the Process of Modernization', *The Economic History Review*, Vol. 29, No. 1 (1976), pp. 14-37 and Andrew B. Appleby, 'Famine, Mortality and Epidemic Disease: A Comment', *The Economic History Review*, Vol. 30, No. 3 (1977), pp. 508-512.

[52] Slack, *Impact of Plague*, p. 74.

[53] Charles Creighton, *A History of Epidemics in Britain* (Cambridge, 1894), p. 359; J.F.D. Shrewsbury, *A History of Bubonic Plague in the British Isles* (Cambridge, 1970), p. 254.

[54] Scott and Duncan, *Biology of Plagues*, p. 181.

[55] Durham County Record Office, (hereafter DCRO), EP/Du.SN 1/2, f. 98r.

highlighting the way separate outbreaks could be linked in the memories of those who survived them, and the ways in which the recording of outbreaks in parish registers contributed to this memory.[56] By 20th June, Jennet Curry, an inhabitant of Houghton-le-Spring in County Durham nuncupatively declared her will 'beinge visited & infected with the plague', suggesting that the disease had already become well-established there.[57] It seems likely, therefore, that the disease was imported into Newcastle in the spring of 1597, possibly via the port as Scott and Duncan suggest, likely as a result of increased imports due to famine. Increased movement, again due to the food shortages, may have then helped the disease to radiate upwards towards the border and into Scotland, down to North Yorkshire and west into Cumberland and Westmorland where it took hold in the late summer and early autumn. We currently have no mortality figures for the disease in Newcastle, but in Durham, up to 27 October, Creighton estimated that the plague burials were as follows:

Elvet	More than 400
St Nicholas	200
St Margaret's	60
St Giles's	60
St Mary's, North Bailey	60

Table 3: Durham parish plague burials, 1597. Data taken from Creighton's *History of Epidemic Disease in Britain*, p. 359.

Shrewsbury maintained that these figures are vastly underestimated, partly because they provide the number of plague deaths only up to 27 October and partly because many victims were undoubtedly buried on the moor and elsewhere and thus do not feature in these totals. He suggests a more accurate estimate of the death rate during this outbreak would be between one quarter and one third of Durham's population.[58] More recent research by Scott and Duncan suggests that we can add at least a further eighty-two burials to Creighton's totals with relative confidence. These burials are recorded in the registers of St Mary-le-Bow during the period July to October 1597. However, unlike the entries recorded by Creighton, the Mary-le-Bow

---

[56] DCRO, EP/Su.SG 1, f. 43r.
[57] Durham University Library (hereafter DUL), DPRI/1/1597/C15/1.
[58] Shrewsbury, *A History of Bubonic Plague*, p. 254.

entries are not marked with a 'P' for plague. Scott and Duncan reason that these figures are suggestive of an infectious disease when compared with the burial rates recorded in the preceding and following months. However, they also concede that in only two families is more than one person recorded to have died, a pattern which is at odds with the high household mortality rate associated with plague epidemics.[59]

From the likely origin point of Newcastle, the disease radiated in every direction. It was not until later in the summer of 1597 that reports of plague emerged across the border. The first reference to the disease in Edinburgh's town council minutes appeared on 29th June 1597. Reports of the pestilence in 'Inneresk' [Inveresk] reached the council who then ordered that officers inform their local baillies of infected households. Next, the council attempted to contain the disease and assist those already affected by banning all goods, save coal, from entering the city and distributing 100 marks 'for the poor, infected or isolated' there. Assistance was also sent to the sick in Dalkeith and Musselburgh, and inhabitants from the small village of Newbattle, roughly 7 miles from Edinburgh, were prohibited from entering the town until further order. By the 5th of August, however, the council were increasingly concerned about the progress of the disease. Reports had reached Edinburgh that plague had 'greitly spred in the sowth parts' including Dolphinton (27 miles southwest of Edinburgh), and Ednam, Sprouston and Linton near the border, leading the council to forbid anyone to enter the town from affected areas without permission on pain of death. Three days later the council received word that the disease had broken out in Leith. In an attempt to stop the disease from reaching the city, it was ordered that no one was to enter the city with woven baskets, herring, fruit, flour, clothes, wood or any other items to sell under pain of banishment. The council also ordered the erection of a wooden lodge to house the infected if necessary. Despite these efforts at prevention, by 19th August the disease had reached the city of Edinburgh itself. Magistrates made arrangements to feed and isolate infected

---

[59] Scott and Duncan, *Biology of Plagues*, p. 183. Whittles and Didelot have observed that an infectious individual in the same household is almost 100 times more likely to transmit the disease to a susceptible host compared with an infectious individual living elsewhere in a village. See Lilith K Whittles and Xavier Didelot, 'Epidemiological analysis of the Eyam plague outbreak of 1665-1666', *Proceedings of the Royal Society B: Biological Sciences*, Vol. 283, Issue 1830 (2016). See also Angela E. Evans and Charles Morris Evans, 'Plague - a disease of children and servants? A study of the parish records of St Peter upon Cornhill, London from 1580 to 1605', *Continuity and Change*, Volume 32, Issue 2 (2019), pp. 183-208.

individuals at the town's expense, and cleansers were appointed to rid the town of infection. We can assume a high level of mortality from the proclamation of 22 August which stated that 'in respect the littill roume in thair commoun buriall', those who died of plague were not to be buried in a coffin. Overall, the outbreak in southern Scotland was severe but short-lived, and by 9 November the council were acknowledging the services of James Henrysoun, surgeon, 'during the late pestilence'.[60]

This contrasts to the progress of the disease south of the border, which lingered throughout the colder months. From Durham, it appears to have spread through the rural villages of Auckland towards Darlington and entered the Eden Valley via Richmond.[61] By 4th of September, the 'Visitation' had reached the parish of Auckland St Andrews where the death of its first victim, George Bellerby of Coundon, was recorded in the burial register as having died 'of the plague'. J. C. Howe calculated that over the following four months, twenty-three men, thirty-five women and sixteen children died in an epidemic which saw the usual burial rate increase four-fold. Howe also offers an explanation for the rapid transmission of the disease in a rural environment such as Coundon. By drawing attention to the fact that eight of the 'visited' families in the village had intermarried and seven were connected by god-parents, Howe suggests that 'there would be no closed doors or quarantine in such a close-knit community', thereby allowing the disease to spread freely. In addition, of the thirty-three victims in the village, fifteen were adolescent or adult females whose 'attempts to alleviate the sick and dying', Howe argues, 'may well have resulted in the ultimate sacrifice and the unwitting spread of the disease among their own families'.[62]

The plague was also active during this time in Cumberland and Westmorland. According to William Wallis, then vicar of Penrith, the first victim of plague in the Penrith was 'a foreigner' named Andrew Hodgson. Records this specific were not unusual. An entry in the Hawkshead parish register, for example, states that on

---

[60] *Extracts from the Records of the Burgh of Edinburgh,* Vol. VI, 1589 to 1603 (Edinburgh, 1927) (hereafter ERBE VI), p. 192, 193, 194, 196, 202.

[61] Creighton, *A History of Epidemics in Britain*, p. 359.

[62] J.C. Howe, 'Survivors of the plague', *Journal of the Northumberland and Durham Family History Society,* Vol. 17, No. 4 (1992), p. 98.

18 November 1557, a 'pestilent sickness' was 'brought into the parish' by 'one George Barwicke'.[63] Hodgson's

death is reported in the parish register on 22 September 1597 accompanied by the phrase 'Here begonne the

plague (God's punishment in Perith)'. 'All those that are noted with the P', Wallis continues, 'dyed of the

infection, and those noted with F were buried on the fell'.[64] At first the disease in Penrith was confined to a

few families, most of which were swept away within a few days. Scott and Duncan have completed a family

reconstitution from parish registers to describe the course of the plague in Penrith. It was an explosive

epidemic that spread rapidly within families, killing some forty per cent of the population. According to their

research, the plague spread from the northeast via Richmond and exploded in the Eden valley, appearing

almost simultaneously in Penrith, Kendal and Carlisle.[65] The severity and intensity of this particular outbreak

was recorded in a Latin inscription detailing the number of plague victims on the wall of the chancel of Penrith

Church. During some restorations a portion of the inscription in the chancel has been covered up, but copies

have been published.[66] The inscription is as follows:

A.D. MDXCVIII

Ex gravi peste, quod regionibus hisce incubuit, obierunt apud

Penrith 2260

Kendal 2500

Richmond 2200

Carlisle 1196

Posteri

Avertite vos et vivite. Ezek. Xviii., 32

The inscription is undated, and Barnes has noted that there has been much speculation regarding the

numbers listed.[67] In total, only 583 deaths are recorded in the Penrith parish register, accounting for only a

fraction of the Penrith deaths listed above. In his *History of Penrith*, however, James Walker argued that the

---

[63] John Charles Cox (ed.), *The Parish Registers of England* (London, 1910), p. 168.
[64] Henry Barnes, *Visitations of the Plague in Cumberland and Westmorland* (Kendal, 1890), p. 172.
[65] S. Scott, C. J. Duncan and S. R. Duncan, 'The plague in Penrith, Cumbria, 1597/8: its causes, biology and consequences', *Annals of Human Biology,* Volume 23, Issue 1 (1996), pp. 1-21.
[66] Barnes, *Visitations of the Plague,* p. 173.
[67] Ibid. Barnes notes that the figures are likely taken from an early eighteenth-century inscription. In this earlier transcription the order of the towns is altered, and Penrith is credited with six additional deaths for a total of 2266.

numbers included in the inscription may reflect an aggregate of other parishes in the neighbourhood, suggesting that the disease reached beyond the boundaries of the town centre. Similarly, William Whellan suggested that the numbers found in the register may represent only those who were buried in the churchyard or schoolhouse yard and does not account for those buried in designated plague burial sites or pesthouses.[68] Regardless, the inscription demonstrates how the afterlife of this outbreak was scorched into the memory of this small town.

From Penrith, the disease reached the city of Carlisle. The exact date of the plague's appearance in Carlisle is unknown, but a series of plague orders designed 'ffor the avoydinge of further infection' was published by the city's corporation on 3 November 1597 suggesting that the disease reached the town approximately two months after it had reached Penrith.[69] By the end of the month, the plague had certainly spread beyond the town centre and into the surrounding areas. In a letter to Lord Scrope, then Warden of the Middle March, on 25 November 1597, Henry Leigh observed that the 'sickness continues in the suberbes and disperced places of the cetie as before'.[70] The Council of North, then sitting at York, offered support in a letter dated 30 November 1597. The letter was addressed to 'our very loving Frends the Maior and Alderman of the Cyttye of Carleslie'. The principal cause of the outbreak was stated to 'proceed from the Lord's wrathe powred downe for sinne', but responsibility for the disease's spread was placed firmly upon the people. The disease was 'the more dispersed by the recourse of people from towns and places infected unto suche as are free from the same and also by carryeinge of goods from place to place'.[71]

With the exception of the inscription above, there are no records of the numbers of those who died of plague at Carlisle. With an estimated population of 1,300 in 1597, the 1,196 deaths ascribed to the town is likely too

---

[68] William Whellan, *A History and Topography of the Counties of Cumberland and Westmorland with Furness and Cartmel, in Lancashire, comprising their ancient and modern history, a general view of their physical character, trade, commerce, manufactures, agricultural condition, statistics, etc. etc.* (London, 1860), p. 596.
[69] Carlisle Archive Centre (hereafter CAC), Mounsey-Heysham MSS. Vol. 1 – D/MH/10/7/1.
[70] TNA, SP 59/36 f. 126.
[71] J. Hughes, 'The plague in Carlisle 1597/98', *Transactions of the Cumberland and Westmorland Antiquarian and Archaeological Society,* 71 (1971), p. 55.

high for the city alone and must, as suggested earlier, include rural parishes related to the town. One piece of evidence which helps to illustrate the severity of the town's mortality rate can be found in the form of a list created on 20 December 1597 of the city's householders which offers an indication as to which families were at least visited by the plague. Of the 323 householders listed, 242 are noted as having been 'visited'. Figures against many of the names may also indicate the number of deaths within each household. If this assumption is correct, it would give a total of 149 deaths, with one house having fifteen deaths ascribed to it.[72] Finally, on December 13, 1598, the Penrith parish register stated 'Here endeth the Visitation', over a year after the disease had ceased in Edinburgh.[73]

Slack has argued that the high levels of mortality were the result of crises of subsistence, rather than epidemic disease. 'It is certain', he writes, 'that plague played only a minor role in these years'.[74] For the north of England, however, evidence of plague burials combined with a characteristic seasonal pattern demonstrates that this was not the case. Just as Appleby had observed for Cumberland and Westmorland, the 1597-1598 plague across the north of England was characterised by these two separate but related crises. The populace was undoubtedly weakened by famine, but the high levels of mortality in this period were the result of the devastating plague that swept across the region. Inhabitants were forced to travel long journeys for food, often into regions where the disease was prevalent. They would then transport this disease back to their hometown where it could be transmitted to even the most remote of villages. In Scotland, Edinburgh's populace experienced a brief but severe summer of infection. It is possible that their quick response and implementation of quarantine measures prevented the spread of disease beyond the initial infections.

---

[72] CAC, Mounsey-Heysham MSS. Vol. 1 – D/MH/10/7/1.
[73] Barnes, *Visitations of the Plague*, p. 172.
[74] Slack, *Impact of Plague*, p. 74.

1.3 1602

After a brief intermission, plague resurfaced in highland Scotland in 1600. Shrewsbury traces its passage the following autumn through various places in the 'West country' and the town of Craill, although he attributes the likely cause of this epidemic to be typhus fever, rather than plague.[75] Unfortunately, he does not offer much in the way of explanation for this assessment, and contemporaries certainly believed that the plague was responsible for the increased mortality, employing traditional measures such as isolation of the infected and restricting trade and travel with affected towns and villages. By December 1601 the disease had reached Glasgow and it had spread to Edinburgh by 5 February 1602. The inhabitants of Wardlow's Close, where the outbreak began, were quarantined and maintained at the town's expense and two cleansers were recruited. A few days later the bailies of Leith were ordered to close up all entrances to the town, and to guard the ports.[76] Later that month, the infection had risen to the point where plague lodges were built on the Sciennes, an additional four watchmen were appointed, and a statute was released ordering all infected persons to be removed to the lodges by daylight when the road was quietest, not, as formerly, by night.[77]

By April 1602, the town was considered safe again, and we can see the characteristic payments to individuals for their services during 'this laitt visitatioun of the pestilence'. The 'officeris' were granted forty pounds for their efforts during the outbreak, a pension of ten pounds was granted to William Ur for his unspecified services and the above-mentioned James Henrysoun, the local surgeon, was permitted an increase of forty pounds in his pension. Evidence that the threat had long ceased can be seen in an entry on 21 May, when the council granted permission to Cuthbert Wyseman, only son to Androw Wyseman, 'sponge maker', and Jonet Galloway, both of whom had died of plague, to reclaim goods pertaining to his mother and father.[78] The unusual chronology of the outbreak in Edinburgh, commencing in February and ending in spring without a peak in summer, could imply, as Shrewsbury suggested, that something other than bubonic plague was at

---

[75] Shrewsbury, *A History of Bubonic Plague,* p. 286.
[76] ERBE, VI, p. 301.
[77] Ibid., p. 302.
[78] Ibid., pp. 305-6.

work here. However, it could also indicate that the disease was endemic in the opening years of the seventeenth century in Scotland, and records will only allow us to trace when the mortality was severe enough to necessitate state intervention. Either way, I have included it here as contemporaries certainly believed that the plague was responsible.

1.4 1603-1604

The plague of 1603-1604 encompassed large parts of England and Scotland. London was severely affected in 1603. In the provinces, various measures to contain the disease were implemented in Oxford, Cambridge, Stamford, Canterbury, Exeter, Winchester, Colchester, Ipswich and Norwich. As Creighton observed, there are 'few parts of England from which evidence of plague does not come in the years immediately following the great plague of London in 1603'.[79] The widespread nature of the outbreak makes it difficult to suggest a clear point of entry, with many areas across England and Scotland seemingly being simultaneously affected. The earliest reference to the plague in the Edinburgh town council minutes appears on 18 March 1603, when fear of the disease in Dantzig caused the council to check incoming ships for signs of infection. However, the records then fall silent until 21 September, when two men, Niniane McMorane and George Hereott were ordered to make a collection for the sick in Prestonpans and North Berwick. By 22 October, as 'the infectioun of pestilence is lyke to incres' the council ordered that cleansers be appointed and provided with livery, the city's inhabitants were prohibited from giving their clothes to 'common weschers' and travel to the Sciennes was restricted.[80] The disease was already present in London, with the earliest references there occurring early in March 1603. According to F. P. Wilson, the death of Elizabeth I initially diverted attention away from the disease, although it was certainly present.[81] It therefore seems unlikely that the disease arrived in England from Scotland, although this was certainly the belief of some contemporary writers who accused James I and his retinue of transporting the disease from Edinburgh to London.[82]

---

[79] Creighton, *A History of Epidemics in Britain*, pp. 496-7, 499.
[80] ERBE VI, p. 318, 321. The Sciennes was used as an area for quarantine.
[81] F.P. Wilson, *Plague in Shakespeare's London,* (Oxford, 1927), p. 88.
[82] Although denied by Graunt, (see John Graunt, *Natural and Political Observations…upon the Bills of Mortality* (London, 1662), the link between the transition of monarchs and outbreaks of plague appears to be well-established in contemporary writings. See, for

Unfortunately, we have no surviving records that suggest how or where the disease entered the north of England. The authorities at York, however, saw threats from both ends of the country. On 8 July 1603, upon hearing that the plague 'doth greatly increase' in both London and Newcastle upon Tyne, the corporation implemented strict watches to prevent travellers or merchandise from entering York from either city without licence. The city gates were to be kept locked at night, and the keys were to remain with 'some suffycent man dwelling nere vnto the said barrs'.[83] These measures may have bought them some time, and on 14 February 1604 the council even began to lift some trading restrictions. Trade with London was once again permitted providing that wares were not brought directly from houses that were known to be infected. This optimism was short-lived, however, and by April, the disease was once again closing in upon the city of York. The city's corporation records show the great lengths to which the town went in an attempt to prevent the disease's entry. A 'viewer and clenser' were sought from Newcastle, plague lodges were erected outside the walls and a number of other public health measures, including the killing of cats and dogs, were enacted. The exchange of goods with Hull, London and Newcastle was also prohibited.[84] These efforts seem to have been ineffective, however, as the council reported on 5 May that there were infected houses in five parishes within the city walls.[85] Plague burials were specifically identified in the central parish of All Saints Pavement. An early death occurred there on 19 April, followed by a group of four between 7 and 10 May, another on 2 June and three on 11 June. From 6 July onwards plague burials began to occur on almost a daily basis.[86] As is typical of a type (i) epidemic, the disease spread rapidly throughout the summer. The parish register of St Olave recorded that during the following months, 'people dyed so fast that they could not be well nombred'.[87] By November 1604,

---

example, the pamphlet 'London Trumpet Sounding into the Countrey' in Thomas Brewer's *A Dialogue betwixt a Citizen, and a poor Countrey-man* (London, 1636).

[83] Explore York Libraries and Archives (hereafter EYLA), Y/COU/1/1/32, f. 279r, f. 279v.

[84] EYLA, Y/COU/1/1/32, ff. 323v-329v.

[85] Their efforts were likely hindered by the significant number of traders who continued to trade with affected areas. One merchant, William Morton, was even caught transporting his goods over the city walls in an attempt to avoid detection. See EYLA, Y/COU/1/1/32, f. 290r.

[86] Chris Galley, *The Demography of Early Modern Towns: York in the Sixteenth and Seventeenth Centuries* (Liverpool, 1998), p. 80.

[87] Borthwick Institute for Archives (hereafter BIA), PR/Y/OL/2.

the disease had run its course in York. The city annals compiled in 1639 placed the death toll at 3,512.[88] A

more recent estimation is provided by David Palliser who, based on a survey of surviving parish registers,

maintains that 2,512 people or approximately thirty per cent of the city's population were carried off by

plague in 1604.[89] Regardless, each total represents a significant proportion of the town was carried off by

plague in these years, making it one of the deadliest outbreaks that the city had ever witnessed. York certainly

experienced a higher level of mortality than other major cities in Britain during these years, perhaps because

those cities had experienced plague much more recently, allowing survivors to build up some level of

resistance. Until this outbreak, York had been free from plague since 1560. No previous outbreaks are

mentioned in the corporation minutes or reflected in probate or burial figures in any year between 1560 and

1603.[90]

The plague reappeared later in 1604 in Durham by which time the colder winter months had resulted in a

lower rate of infection.[91] Nonetheless, the disease lingered on. As is typical for a type (ii) epidemic, the burial

register of St Giles's parish records eighteen plague deaths between the beginning of September 1604 and

January 1605.[92] The parish of St Nicholas recorded 20 plague deaths from 8 August to 2 December, where it

was noted that at least half the deceased were removed to plague lodges.[93] However, unlike the previous

spring, the disease did not explode once again with the appearance of warmer weather. After noting the

death of Ann Oude, wife of Christopher, on 30 January 1605, the St Giles parish register includes the note 'and

so the plague ceased'.[94]

---

[88] Galley, *The Demography of Early Modern Towns*, p. 78. See also Francis Drake, *Eboracum*, (London, 1736), p. 131. Drake wrote that at York, '3512 persons died of the plague, a number that 'would make a great gap in its present inhabitants'. The author then also provided a short account of the 1604 outbreak: 'The markets were all cried down, the lord president's court adjourned to Ripon and Durham, many of the citizens left their houses. The infected were sent to Hob-more and Horsefair, where booths were erected for them of boards. The minster and minster-yard were close shut up'.
[89] D. M. Palliser, *Tudor York* (Oxford, 1979), p. 125.
[90] D. M. Palliser, 'Epidemics in Tudor York', *Northern History*, Vol. 8 (1973), p. 52.
[91] Scott and Duncan, *Biology of Plagues*, p. 228.
[92] DCRO, EP/DU.SG 1.
[93] DCRO, EP/Du.SN 1, p. 346.
[94] DCRO, EP/Du.SG 1, p. 60.

Meanwhile, in Scotland, authorities had been attempting to control the spread of the disease from the autumn of 1603, having only had a brief respite from the smaller outbreak of 1601-2. The Privy Council issued an order prohibiting English passengers arriving on ships due to the presence of plague in the country.[95] By 22 October 1603, the Burgh Council released a series of measures as 'the infectioun of pestilence is lyke to incres'. They provided livery for cleansers and prohibited inhabitants from sending clothes to 'commoun weschers' and visiting the sick who were enclosed in the pesthouses. On 23 November, 100 merks was given to plague victims in Prestonpans and by the end of November 1603, the disease was encroaching on the city's suburbs. On 30 November, the council ordered the bailies of Leith to prohibit the infected in Restalrig from erecting plague lodges on Leith Links.[96]

The Edinburgh records are then quiet until the following spring, when a proclamation stated that infected persons should not leave their homes without licence from the bailie of the quarter, and that the master of the house was responsible for reporting any cases of sickness. In May 1604, Parliament moved to Perth and the court sessions were prorogued 'because of the plague in Edinburgh'.[97] On 11 July 1604, the council acknowledged the increasing levels of those sick and poor, and the substantial sum of one or two thousand pounds was to be borrowed at interest to cover the expenses. The following month, the council once again acknowledged the rapid daily increase of infected poor within the town, and the inability of the 'Common Good' to accommodate the increasing expenses. Consequently, they re-allocated funds originally set aside for 'Geneva', for the relief of those affected.[98] It is unclear if this sum was in addition to or instead of the previous loan. It is clear, however, that an enormous sum was needed to combat the disease. The treasurer's accounts show that the expenses for the pestilence for the years 1603-5 amounted to £5,229, 16s and 10d.[99] By 21 December 1604, the outbreak was referred to as 'the laiitt pestilence' suggesting that the authorities believed

---

[95] David Masson (ed.), *The Register of the Privy Council of Scotland* (hereafter RPCS), Volume VII (Edinburgh, 1885), p. 2.
[96] ERBE, VI, p. 323, 324.
[97] RPCS, VII, p. 4.
[98] ERBE, VII, p. 3, 4, 5-6.
[99] Ibid., p. 11.

the worst to be over.[100] However, the plague returned to Edinburgh in the spring of 1605 when its recurrence

caused the meeting of the Session to be prorogued to 1st December, and precautions were taken to ensure

that no person entered the city without a certificate of departure from a place that was free from the

disease.[101] In August, the burgh ordered the bailies of Leith to enclose their town 'with faill and devett' to

preserve themselves from vagabonds 'in the tyme of this infection'.[102] There is no further mention of the

disease until 13 June 1606, when Parliament was once again removed to Perth due to the plague 'being raging

at Edinburgh'.[103] Later, on 1 October, due to rising infection levels, the council re-issued a proclamation

stating that the bailies were to be informed of any new cases of pestilence, and no one was to leave an

infected household without permission.[104]

Edinburgh at the start of the seventeenth century appears to be the exception to the rule that plague rarely

lingered in intervening years. Unlike the outbreaks in northern England which appear to have clearer entry

and exit points, the plague seems to have smouldered on during the winter months in Edinburgh and the

surrounding areas, re-appearing with warmer weather in varying levels of severity from the years 1600 to

1606. Another potential complication lies in the intervening years between 1604 and 1606 in Newcastle. The

Newcastle Corporation minutes have long been believed to be entirely lost, but towards the end of writing up

this chapter I stumbled upon a handful of plague-related references in a volume of miscellaneous tracts

relating to the northern counties, held in Newcastle University Library Special Collections and Archives. The

introduction to the volume states that it has faithfully reproduced an unnamed manuscript held by the Duke

of Northumberland. As these records, to the best of my knowledge, have not been published elsewhere, I felt

it would be worth repeating them here in full:

- October 1606: Paid for the 3 weekes charges to the infected folkes, 36s.

---

[100] Ibid., p. 8.
[101] Shrewsbury, *A History of Bubonic Plague*, p. 288.
[102] ERBE, VII, p. 14.
[103] RPCS, VII, p. 214.
[104] ERBE, VII, p. 24.

- January 1607: Payd for the charges of infected folkes for 3 weekes as per bill appeareth, for flesh 8s. 6d.; for bread 4s. 6d.; for fishe 18d.; for drinke 18d.; for colles 2s. 3d; for grotes, 9d.; for sope 8d.; for strawe 4s. Soma is 20s.
- In this month money appears to have been paid weekly to the marshals and constables of the different wards for the relief of persons infected.[105]

The reference to 'infected folkes' suggests that these quotes do indeed refer to an outbreak of plague, as opposed to another disease. Unfortunately, for now, I have been unable to track down this mysterious manuscript, though I believe there is a strong chance it will still be held in the collections at Alnwick Castle. If, in future, I am able to verify these quotes, it may alter this interpretation slightly by showing that either there was another, smaller, outbreak in Newcastle in 1606, or that the outbreak of 1604 had not fully dissipated for several years.

1.5 1609-1610

The years 1609 and 1610 witnessed several severe outbreaks of plague across England, although none were reported in Scotland. Shrewsbury has maintained that not all outbreaks during these years can be attributed to plague, but rather amounted to a combination of plague, typhus fever and smallpox.[106] In the North of England, however, the disease's distinct seasonal pattern reveals that the higher mortality rates during this year were more likely the result of an outbreak of plague, rather than another epidemic disease. In Newcastle, 20 plague burials were registered in the parish of All Saints in 1609, and further 160 between April and December 1610. Relatively speaking, these numbers are lower than we have seen in previous outbreaks. George Bouchier Richardson believed these modest numbers to be the result of decreasing population. He argued that the 'ravages of former years had left but few to die'.[107] It is not clear how or when the disease entered Newcastle during these years. If, however, the quotes in *Collectanea curiosa* are to be believed, this may be because the disease never left the city. Scott and Duncan state that the epidemic does not appear to

---

[105] Moses Aaron Richardson, *Reprints of Rare Tracts & Imprints of Antient Manuscripts &c. Chiefly Illustrative of the History of the Northern Counties,* Vol. III (Newcastle, 1849), p. 47.
[106] Shrewsbury, *A History of Bubonic Plague*, p. 299.
[107] George Bouchier Richardson, *Plague and pestilence in the north of England: a chronological account of the epidemic diseases which have vested the north of England from the earliest period* (1852), p. 23.

have spread southwards along the northeast corridor, as it had done in previous years.[108] However, it did travel as far as Lamesley, a small village outside of Gateshead, where seventy-eight deaths 'of the pestilence' are recorded in the parish register.[109]

1.6 1625

Following the outbreak of 1609-1610, the disease was absent from most places in Britain. It was re-introduced in the summer of 1625 establishing what Creighton has termed the 'next great plague-period'.[110] The disease was present in the spring of 1625 in London, although there appears to have been some disagreement over the exact nature of the infection. On 23 April 1625, in a letter to Sir Dudley Carleton, John Chamberlain stated that 'the physicians do in a manner agree that this sickness is not directly the plague, as not leaving any sore, or any such like accident, but only contagious in blood or kindred'.[111] However, not all contemporaries were equally as convinced. The Reverend Joseph Mead, for example, wrote to his kinsmen Sir Martin Stuteville on July 9, 1625, listing the city's weekly burial totals, detailing how many of those were attributed specifically to plague. He also warns his recipient that 'it grows very dangerous on both sides to continue an intercourse of letters, not knowing what hands they pass through, before they come to those to whom they are sent'. [112] It seems likely that Mead's concern was for contamination, rather than privacy, as the rest of the letter goes on to outline more details about the plague's progress. 'It is true', he wrote, 'that the plague was broken out in the pantry, the king's baker's son dying thereof on Sunday; and another, a woman, then sick, and send away and died yesterday. The bread was all given away'. [113]

---

[108] Scott and Duncan, *Biology of Plagues,* pp. 239-240.
[109] Bouchier Richardson, *Plague and Pestilence*, p. 23.
[110] Creighton*, A History of Epidemics in Britain*, p. 501.
[111] Thomas Birch, *The Court and Times of Charles the First: Containing a Series of Historical and Confidential Letters* (London, 1849), p. 15. Chamberlain was a gentleman and a prolific letter writer and Sir Dudley Carleton would later become Secretary of State. The letters between Chamberlain and Carleton are now considered an essential source on patronage networks. See Norman Egbert McClure (ed.), *The Letters of John Chamberlain* (Philadelphia, 1939).
[112] Birch, *The Court and Times of Charles I,* pp. 41-42.
[113] Ibid*.,* pp. 41-42.

Concomitant with the plague in London, the disease was prevalent in the North Riding of Yorkshire (the city of

York itself escaped), in Gateshead, Barnard Castle, Whickham (a single household), Sunderland and

Newcastle.[114] The absence of the disease from the city of York may have been the result of an early warning

from the Privy Council and the quick implementation of plague policies by the Bishop of York. In a letter

addressed to the bishop on 5 August 1625, members of the Privy Council, themselves forced to flee to Oxford

due to the rapidly increasing rate of infection in London, demanded that preventative action be taken in the

provinces. Churchwardens were to be informed that infected parishes were to 'abstaine from assembling

together in the churches for celebration of the Fast' and were instead required to observe this ritual privately

in their homes. Parishes free of the infection were also prohibited from admitting outsiders for fear of further

spreading the disease.[115]

Fear of the disease crept into Lancashire, the region having only recently recovered from a prolonged

outbreak of typhus.[116] John Bridgeman, Bishop of Chester wrote in his ledger in August 1625 that he had sent

instructions to the Mayor to be observed 'now in this dangerous time of the plague', namely that a watch

should be set and no one should be permitted to enter who would not willingly swear an oath that he was

free from infection. Searchers were appointed, and the signs of inns were taken down to deter travellers. The

following month, on 13 September 1625, Bridgeman gave another order to the churchwardens of Wigan,

instructing them that no one should be buried in Wigan church during the time of the infection. His entry also

demonstrates the difficulty of keeping track of the disease's progress:

> '…for the infection is now in Mary Bibby's house and two of her children are dead of it and a third
> now had the sores running on him, yet her sister and two of her children are escaped out and wander
> the country one Grimshaw (who is to marry her) has also gone out of that house and is lodged in
> Haigh, so it is not uncertain what places in the Parish are free from infection'. [117]

---

114 Scott and Duncan, *Biology of Plagues*, pp. 240-243.
115 R. Sharpe France, *A history of the plague in Lancashire, Transactions of the Historic Society of Lancashire and Cheshire*, (Liverpool, 1938), p. 56.
116 See Sharpe France, *A history of the plague in Lancashire*, pp. 50-55.
117 Wigan and Leigh Archives (hereafter WL), DDZ A13/1 Bishop Bridgeman Ledger 1614 – 1642, f. 182r, 182v.

Wigan was not the only town in Lancashire that was fearful that the disease would travel from the south. In October 1625, the Court Leet of Manchester ordered that watch and ward was kept and cabins were constructed on Collyhurst Common.[118] Additionally, fearing the 'great perell of theis contagious tymes' and the consequent 'miseries whereunto the poore inhabitants of this towne are like to exposed if Almightie god doe send the plague of pestilence', the court appointed twelve individuals to assist the constables and enquire about the people and goods which had come into any house. They were also charged with seeing that all able-bodied persons were supplied with work, and no one was permitted to be idle or loitering about the town.[119]

Despite these concerns, however, the mortality in Lancashire does not appear to have been particularly high, perhaps due in part to the quick response and implantation of preventive measures by authorities. The disease did, however, take hold in the northeast of England, possibly imported from London. Writing on 3 May 1626, Sir William Bellasis, sheriff of Durham, informed the bishop that the 'sicknesse' was 'dangerously disperst and dayly increasing in Newcastle'.[120] Plague lodges were erected at Bensham outside of Gateshead where 89 plague burials are reported.[121] A rate of 2*s* in the pound was also levied with the consent of the Justices of the Peace, for the relief of the 'sike folke of Bensham'.[122] Richardson described this outbreak as a 'comparatively mild attack', but it appears to have had a significant impact on contemporaries. The city's puritan lecturer Robert Jennison wrote of the 1625 outbreak, 'the plague is begun, and renued, after such

---

[118] J. P. Earwaker, *The Constables Accounts of the Manor of Manchester from the Year 1612 to the Year 1647, and for the Year 1743 to the Year 1776* (Manchester, 1891), p. 152. In September 1625, payments were made to a carpenter, for timber, thatch, draw and nails 'for the Cabbins'. Eight individuals suspected of being infected were then sent to the cabins, and payments were made for their meat and 'other necessaryes'.

[119] *The Court Leet Records of the Manor of Manchester, from the year 1552 to the year 1686, and from the year 1731 to the year 1846*, Vol. III, (Manchester, 1886), pp. 101-2.

[120] Bouchier Richardson, *Plague and Pestilence*, pp. 25-26.

[121] Scott and Duncan, *Biology of Plagues,* p. 243.

[122] F.W.D. Manders, *A History of Gateshead,* (Gateshead, 1973), p. 176.

havock as it hath formerly, not many years ago, especially in the Mother citie, but never the like with us to

that it is like to doe now'.[123]

1.7 1631

In November 1630, the Preston parish registers record the commencement of one of the most severe

outbreaks of plague in the region, stating 'heare begineth the Visitation of Almighty God, the plague'.[124] It is

unclear how or where the disease entered the north of England in the 1630s. One eye-witness account

written by George Postlethwaite, then parish clerk of Dalton, stated that the disease was brought to the town

by a 'miserable, accursed, abandoned, vile fugitive named Lancaster with his wife' who had travelled to the

parish from London. The 'shafts of death', he wrote, were enclosed amongst the garments and precious

jewels the couple had brought with them.[125] London had experienced small outbreaks earlier in 1630 and it is

therefore plausible that the disease could have travelled to the north of England from the capital.[126] It appears

that the disease may already have been present elsewhere in Lancashire, however, as Bishop Bridgeman was

already weighing up the economic needs of the town against the need to defend his inhabitants from the

infection:

> 'It hath pleased God to visit diverse places in this country of Lancashire so dangerously with the
> plague of pestilence as I have of times seriously considered with myself whether it more better for the
> common good to hold my fair at Wigan this Ascension Day now following or to forbid it. Some of you
> lately represented to me the necessesity of the people who are at this time to buy and sell cattle and
> by a disappointment of this fair may be much predjuiced. But on the other side when I consider that
> the safety of their persons is much to be preferred before any commodity of their estates, and that

---

[123] Bouchier Richardson, *Plague and Pestilence*, p. 25; Robert Jennison, *Newcastle's Call, to her neighbour and sister townes and cities throughout the land, to take warning by her sins and sorrowes. Lest this overflowing scourge of pestilence reach even unto them also. As also a direction, how to discover such sins as are the procurers of Gods judgments by divers methods* (London, 1637), p. 23.

[124] R. Sharpe France, *History of the Plague in Lancashire*, p. 60.

[125] George Postlethwaite, *Lugubrious Lines on the destructive and violent Plague which raged in Dalton, and spread with rapid fury in the seventh year of the reign of King Charles the First and the year of our Lord 1631*, Barrow Archive and Local Studies Centre, BDB 16/L/1476.

[126] Creighton estimates that 1,317 deaths can be attributed to plague in London during this year. See Creighton, A History of Epidemics in Britain, p. 527.

the extraordinary confluence of men from all parts to such a fair may bring some infection to the town, I thought it fitter to forbid their meeting than endanger the inhabitants'.[127]

The disease appears to have progressed slowly over the colder months, reaching its height in July and August 1631 before quickly dissipating. In Preston, 1,000 burials were registered between 8 November 1630 and 4 November 1631.[128] In November 1631, the register reads simply 'Plague ceased'.[129] The Manchester Constable accounts tell a slightly different story. They show that rumours of the plague did not reach Cheshire in the summer of 1631. On 25 June, the constables hired a horse for a man named Steven Gee 'to goe to warrington to bringe word whether itt were Infected'. By July, a large sum of £1 was paid to eight individuals 'to cause them to retorne whence they Came' as they were suspected of arriving from 'Some infected place'. Despite these efforts, by October, we begin to see the expenses indicative of a severe outbreak. An emergency tax was levied, and regular payments are disbursed to individuals 'at the Cabbins' erected on Collyhurst Common. The payments to the cabins continue throughout December, and on 28 January 1632, a payment is made to Robert Langlye for 'rent of ye house for that that came from ye Cabbines', possibly indicating that the authorities were using the dwelling as an interim quarantine space, opting to send those who had recovered at the pesthouse there before permitting them to return home. [130]

The disease followed much the same pattern in Yorkshire. A characteristic type (ii) epidemic, it progressed slowly for some months and reached its peak in July and August 1631. According to a letter written on 22 September, the plague spread from Lancashire to Yorkshire in the summer of 1631. It was brought into the suburbs of York 'by a lewd woman from Armin' and the writer stated that 'in that street are since dead some four score persons'. At that time, the disease had not yet breached the city walls, bar two houses, the inhabitants of which were moved to pesthouses.[131] Scott and Duncan have argued convincingly that the 1631

---

[127] WL, D.DZA/13/1, ff. 230r-v.

[128] Shrewsbury, *A History of Bubonic Plague*, p. 362.

[129] R. Sharpe France, *History of the Plague in Lancashire*, p. 60.

[130] J.P. Earwaker (ed.), *Constables Accounts*, p. 260, 270, 273, 275, 276, 277, 280.

[131] Thomas Viscount Wentworth, Lord President of the North, to Sec. Dorchester (September 22, York) in John Bruce (ed.), *Calendar of State Papers, Domestic Series, of the reign of Charles I, 1631-1633* (London, 1862), p. 151.

outbreak of plague in York can be seen as an example of successful public health measures against infectious disease.[132] From initial reports of infection, the disease was effectively controlled and confined almost entirely to one parish. The Council minutes for 29 August 1631 recorded that some persons in St Lawrence churchyard 'were visited with the infection of the plague'. Six watchmen were set to keep people away from the churchyard, all beggars and wanderers were removed from the city, a plague lodge was erected, and the parish was isolated from the rest of the city, but by 30 August there were '16 dead thereof in St Lawrence Churchyard and one in St Margaret's parish'. Robert Hemsworth, then Mayor of York, wrote to his alderman ordering them to return to the city to assist with the outbreak.[133] Rigorous measures were then put in place. Public fairs were closed, 'watches were well kept', passage from Lincolnshire by water was restricted as much as possible and 'the visited persons provided for with necessaries and drugs'.[134] Special attention was given to ensure that St Lawrence parish remained isolated and watch was 'sett at the end of St Nicholas forthwith to keepe out strangers and to keepe in the inhabitants without Walmgate Bar'. The orders were not suspended until March 1632, long after the threat had disappeared.[135] The outbreaks of the early 1630s, therefore, varied in severity by region: Lancashire and Cheshire experienced severe but short-lived outbreaks, with high levels of mortality. In contrast, York's prompt public health measures appear to have effectively contained the disease, and there are no records of the disease reaching the northeast of England or Edinburgh during these years.

1.8 1636

Contemporaries believed that the outbreak of 1636 was introduced from the Low Countries. As early as October 1635 the Privy Council in Scotland had forbidden ships from the Low Countries from landing without licence.[136] The following spring, in May 1636, the Burgh Council fined three men for landing at Newhaven on a ship from the Low Countries, and a skipper, Patrik Angus, was fined twenty pounds for bringing a sick boy

---

[132] Scott and Duncan, *Biology of Plagues*, p. 245.
[133] EYLA, York Corporation House Books Y/COU/1/1/35, f. 114v.
[134] Thomas Viscount Wentworth, Lord President of the North, to Sec. Dorchester (September 22, York) in Bruce (ed.), *Calendar of State Papers, Domestic, 1631-1633*, p. 151.
[135] EYLA, York Corporation House Books Y/COU/1/1/35, f. 163v.
[136] RPCS, VI, pp. 124-5.

ashore.[137] Even Newcastle's puritan lecturer Robert Jenison commented that news had reached Newcastle of

'how it raged in Holland and in other parts beyond the seas'.[138] The outbreak of plague that struck the city of

Newcastle in 1636 is the subject of a micro study by Keith Wrightson. According to Wrightson, several

outbreaks occurred in 1635 in Hull and Yarmouth, but plague was not evident in London until early May 1636,

by which time it was already erupting at Newcastle, suggesting that the disease likely reached the east coast

ports independently from abroad.[139] Jenison stated that the plague 'arrived our Port' of North Shields in

October 1635, where it 'made its abode there a while'.[140] Thereafter, Wrightson argues, the plague seems to

have lain dormant throughout the winter before erupting in Newcastle the following summer. Word quickly

reached Edinburgh, where on 25 May 1636 the 'imminent dainger of pestilence' was reported to be 'drawing

near unto the borders of this realme'. Consequently, authorities and local ports were closed.[141] Later, in

November, a Captain Alexander Hird was fined twenty-seven pounds for docking his ship at the harbour at

Leith before coming ashore himself despite having travelled from 'suspect plaices'.[142] This quick and sustained

response appears to have been effective in preventing the plague's spread over the border as there is no

further mention of the disease in Edinburgh until their most severe outbreak of 1644-1645.

The outbreak of 1636, then, appears to have been relatively confined to the north east of England. There is no

evidence that it reached York, and although authorities in Lancashire employed a series of preventative

measures, parishes there do not appear to have experienced the high mortality rates that afflicted those in

the north east.[143] In 1636, 515 were killed at Gateshead at a time when the population was believed to be not

much higher than 3000. The outbreak was so severe there that plague lodges were re-erected at Bensham.[144]

---

[137] ERBE, VIII, p. 176.

[138] Jenison, *Newcastle's Call*, p. 2.

[139] Keith Wrightson, *Ralph Tailor's Summer: A Scrivener, His City and the Plague,* (New Haven, 2011), p. 11.

[140] Jenison, *Newcastle's Call*, p. 4.

[141] ERBE, VIII, p. 178.

[142] ERBE, VIII, p. 184.

[143] Justices at the July 1636 Quarter Sessions in Preston, 'in regard of the apparent dangers that the country is now exposed unto' ordered that constables restrain and remove vagrants and set diligent watches on pain of a ten pounds fine. On 5 October 1636, the Justices at Preston ordered that a watch be set at the home of Nicholas Hargreaves, as it was reported that Nicholas had received his daughter into his home who had travelled to the town from London with 'certen clothes packed upp in a bundell or truncke, much dreaded to bee infectious'. R. Sharp-France, 'A History of the Plague in Lancashire', *Transactions of the Historical Society of Lancashire and Cheshire* Volume 90 (1938), pp. 84-5.

[144] F.W.D. Manders, *A History of Gateshead*, p. 176.

In Newcastle, Wrightson demonstrates that the death rate continued to climb in June and July 1636, peaked in the seven weeks between 23 July and 10 September, before subsiding slowly in September and October.[145]

1.9 1644-1645

The 1644-45 outbreak in Scotland was the nation's most severe since the Black Death of the mid-fourteenth century. In 1644, during the Civil Wars, Tynemouth Castle was besieged by Scottish Covenanting forces.[146] During the siege, in a letter written on 19 October 1644, it was reported that 'the Plague is so hot in Tinmouth Castle, that divers of the Commanders there have left it'.[147] But how and when did it arrive there? Plague had been present in the south of England, in London and Cambridge, since 1643, but there are no reports of the disease reaching the north of England until the autumn of 1644.[148] Both Shrewsbury and Scott and Duncan state that the epidemic was likely a maritime importation via the port of Tynemouth.[149] This seems likely given that the first reported cases hail from the forces stationed at Tynemouth Castle. More detail about the severity of the outbreak here is provided in letters that were received on 23rd October, 1644, which stated that 'the plague was very hot in Tinnmouth Castle, the garrison of the enemy which commands the Tyne, that stops the river to Newcastle, and that eight of them have died in one week and that one who came out of the castle reporteth that about sixty were sick in the Castle of the plague when he left them'. Similarly, in an intercepted letter sent from Sir Thomas Riddle to Thomas Glenham, Governor of Carlisle, it is also mentioned that 'the plague had broken out within the Castle, eight men were dead and sixty more infected, who were put into Lodges in the Fields and the Chief Chirurgeon there dangerously sicke, who I hear is since dead, so it is conceived most of the rest that are in the Castle will run away because of the infection'.[150]

---

[145] Wrightson, *Ralph Tailor's Summer*, p. 32.

[146] See Paul Whillis, 'The Experience of Scottish Occupation in Newcastle upon Tyne and the Bishopric of Durham, 1640-1647', Unpublished MA Thesis, Durham University (2002).

[147] Anonymous, *A True Relation of the Taking of Newcastle by Assault, on Saturday the nineteenth of October instant, 1644. Being certified in Three Letters: The truth of which is likewise certified to the Parliament, by Letters of the same date: In which Service the Scottish Army behaved themselves with great Valour* (London, 1644), p. 2.

[148] Shrewsbury, *A History of Plague*, pp. 402-404.

[149] Shrewsbury, *A History of* Plague, p. 404; Scott and Duncan, *Biology of Plagues,* p. 243.

[150] H. A. Adamson, 'Tynemouth Castle: The Eve of the Commonwealth', *Archaeologia Aeliana*, Series 2, Volume 15 (1892), p. 219.

The city of Edinburgh was quick to respond and on 23 December 1644, authorities forbid the arrival of ships

from Newcastle 'or any suspect places'.[151] Their swift action appears to have little effect however, for two

days later it was necessary to appoint a physician, Doctor Jon Paulitius, at a rate of forty pounds per month to

visit those potentially infected with plague.[152] The rising level of infection can be seen in the rapid increase in

salary of Edinburgh's first documented plague doctor. By April, the 'increas of the contagioun' in Edinburgh

led authorities to call upon the services of Dr Paulitius once again, this time to search 'all such persones sall

happen to deceis within this brugh or liberties thairof' at double his previous salary.[153] On 6 June, authorities

agreed to pay their plague doctor an increased salary of one hundred pounds per month, but by 13 June, the

council had appointed a Dr George Rae at the same large salary, most likely to replace the deceased Dr

Paulitius.[154] By the summer of 1645, then, the great plague of Edinburgh had well and truly taken hold,

although more work is needed to ascertain the scope of mortality.[155]

Scott and Duncan refer to the outbreak across the border as a type (ii) epidemic. From its origins in

Tynemouth, it spread inland into Newcastle. According to John Sykes, it had reached Newcastle by the

beginning of October. 'It is said', he wrote, 'when the plague was at Newcastle, the inhabitants sent for the

Lee-penny, and gave a bond for a large sum in trust for the loan'.[156] The 'Lee-penny' is the name given to a

charm or amulet preserved at Lee Castle which was believed to have magical healing properties.[157] By

November, the disease had reached the city of Durham where it continued actively during December and

January before finishing in February 1645 in the parish of St Oswald. According to Sykes it also made 'great

---

[151] ERBE, IX, p. 60.

[152] Ibid.

[153] ERBE, IX, p. 67.

[154] ERBE, IX, p. 70.

[155] An analysis of the progress of the disease elsewhere in Scotland, along with analysis of several surviving parish registers, is provided in Flinn (ed.), *Scottish Population History from the 17th Century to the 1930s* (Cambridge, 1977), pp. 133-49.

[156] Sykes, *Local Records: or, Historical register of remarkable events, which have occurred in Northumberland and Durham, Newcastle-upon-Tyne, and Berwick-upon-Tweed from the earliest period of authentic record to the present time; with biographical notices of deceased persons of talent, eccentricity, and longevity* (Newcastle, 1866)*, p. 99

[157] The Lee-penny is a dark red coloured triangular stone set in a piece of silver coin. According to Sykes, it is said to cure all disease in men and cattle and used by dipping the stone in water, which is given to the affected person or animal. Wounds could also be healed by washing the affected area with the same water. For more information about this curious object, see Thomas Reid, 'The Lee Penny', *Proceedings of the Society of Antiquaries of Scotland*, Volume 57, pp. 112-119.

havock' in Darlington and its neighbouring villages[158]. By April, the disease had reached Gateshead. £5 7s 2d was 'paide for the making eleven lodges with sodds in Bensham and for the reliefe of the infected people'.[159] It was possibly present later in the year at York, where, on 9 September 1645, authorities issued an order 'in this tyme of dainger of the vissitacon' prohibiting individuals from selling old clothes, shoes, or 'anie manner of fruite'.[160] However, we are unable to confirm whether or not this was a response to rising infection levels or simply a preventative measure given the spread of the disease in Newcastle and its surrounding areas.

1.10 1665-1666

Although described as 'the great plague' in London, contemporary epidemics in the provinces, with some notable exceptions, were generally mild with relatively few plague deaths reported.[161] In Gateshead, for example, the plague arrived towards the end of July. Between then and mid-October just thirty-two victims were recorded.[162] There is no explicit mention of the plague in any of the Durham parish registers. On 18 July 1665, however, a report from Durham stated that there were then seven houses shut up with the plague in Sunderland, one in Wearmouth and one in Durham, 'where there is great fear because of the resort of persons from London'. According to the letter a strict watch had been introduced, and no one from suspected areas was permitted to enter.[163] In an attempt to prevent the spread of plague within the city, an order of the common council of Newcastle forbid masters of ships from bringing passengers or goods into their harbour. Sailors were also prohibited from coming on shore on pain of imprisonment.[164] The disease does not appear to have reached Scotland, potentially due to the swift implantation of preventative measures.

---

[158] Sykes, *Local Records*, p. 99.
[159] F.W.D. Manders, *A History of Gateshead*, p. 177.
[160] EYLA, Corporation Minute Book, Y/COU/1/1/36.
[161] Exceptions include Eyam, Colchester and Salisbury.
[162] F.W.D. Manders, *A History of Gateshead*, p. 177.
[163] Mary Anne Everett Green (ed.), *Calendar of State Papers Domestic Series, of the reign of Charles II 1664-1665* (London, 1863), p. 482.
[164] Sykes, *Local Records*, p. 113.

Conclusion

This chapter set out to update our understanding of the incidence of plague by providing the first clear, comprehensive account of the transmission of the disease in northern England and southern Scotland. The nine major outbreaks that threatened these regions between 1597 and 1666 demonstrate that the disease rarely smoldered during the intervening years between major outbreaks, but rather was frequently reintroduced. With the exception of the smaller outbreaks in the opening years of the sixteenth century, we can see clear gaps between each outbreak. In northern England and southern Scotland, visitations of bubonic plague were almost entirely dependent on fresh importations of the disease, usually from English and European ports. It is clear that contemporary authorities understood this threat as they continued to monitor the disease's progress elsewhere during these intervening years and occasionally issued precautions designed to protect themselves against fresh importations of plague. It is notable that the most severe outbreaks in these years often occurred after a long period of absence. York experienced its worst outbreak in 1604, having been free from the disease for fifty years. Similarly, Edinburgh's worst outbreak was in 1644, when the disease had been absent since the early seventeenth century. This would suggest that the population became increasingly vulnerable when they had not built sufficient levels of immunity to the disease. A focus on the north of England and Edinburgh, therefore, contradicts Morris's argument that England became a 'permanently enzootic area in the seventeenth century'. Additionally, this case study has demonstrated that, contrary to previous belief, plague was not exclusively an urban disease. Certain characteristics of urban towns may have helped the disease to flourish, but communication networks between large urban centres, small market towns and rural hamlets meant that the disease reached even the most isolated of northern villages. In addition, the resources available to large urban centres sometimes, as in the case of York in 1625, meant that they were able to swiftly implement measures that prevented the disease's entry to the town, where smaller, rural parishes were left susceptible.

Why is this important? The mapping of plague outbreaks in Northern England and Southern Scotland reveals not only a pattern of recurring crises but also hints at a lasting impact on both the people and the social

memory of the time. Each of these regions experienced what might be termed a 'great plague'. Northern England faced extensive mortality in 1597-8 amid severe famine, York suffered the loss of approximately a third of its population during the outbreak of 1604, Newcastle saw similar devastation in 1636, and Edinburgh endured a particularly brutal outbreak in 1644-5. These events were severe enough to remain embedded in collective memory, affecting how individuals, communities, and administrations prepared for or responded to subsequent outbreaks. One might imagine a hypothetical family enduring their own 'great plague' during these years, with parents and grandparents who still carried memories of earlier outbreaks. The incidence of plague would likely have shaped their daily lives. For communities that had faced such catastrophic losses, the presence of plague was not only a recurring fear but a defining aspect of social and economic life. The rest of this thesis will explore the social impact of plague in more detail, revealing how this constant threat shaped social resilience and unity, fostering complex networks of care and solidarity even in the face of crisis.

Chapter Two: Policy and Policing the Plague

On 4 September 1605, Margaret Owthwaite of St Marygate in the centre of York submitted a petition to Edmund Sheffield, Lord Lieutenant of Yorkshire and President of the Council of the North. The petition itself no longer survives, but a detailed description of her extraordinary complaint can be found in the minutes of the York Corporation. She informed the court that 'in the late tyme of extremitye and sicknesse', she, alongside her neighbours, walked to the end of their street towards Bootham, in order to 'crave releif'. This was, in general, a poorer area on the outskirts of the city. The street had been 'sore infected' with the plague, and the adjoining street of Jillygate was also 'payled vp' with numerous infected households. The group arrived outside the home of Alderman Jackson where they were greeted by his servant, Leonard Baites, 'standinge ther with a gunne charged with dridge'. According to Margaret's testimony, Leonard then discharged the weapon towards the crowd, 'upon purpose'. Margaret was shot in the head but miraculously survived, sustaining 'two verie grievous woundes'. She lost her right eye, and her 'sences perished'. Margaret had initially requested that the Lord Lieutenant summon the servant and 'appointe that some reasonable satisfaccon be sett downe for the same'. Lord Sheffield then referred the matter to the Lord Mayor, asking him to consider Margaret's complaint and 'to yield the peticoner suche releife as in his good discretion he should thinke befittinge'.

The corporation summoned both Margaret and Leonard to court to examine the case further. After hearing both sides, the court determined that the inhabitants of St Marygate had been 'verie disorderous' on numerous occasions. They had defied the watchmen and refused to stay within their homes when instructed. The watchmen, constable and other inhabitants residing on the nearby street of Bootham were reportedly 'greatlie trobled' and 'putt in great feare', so much so that they complained to the then Lord Mayor, who instructed that the 'statute made for ordering persons infected' be read out loud to the Marygate inhabitants. This appeared to have little impact, for the inhabitants reportedly 'did continewe verie disorderous' at which point the constable in Bootham called for aid to keep the inhabitants contained within the street. Leonard

Baites, the court maintained, had discharged his weapon 'thinkeinge to have afraide them', 'and not with anie

intent to hurt anie of them'. He had 'shote…over the heads of the people which were standing together…and

by chance some of the dridge' injured 'the said Owthwaite wif'. The court ultimately ruled in favour of

Leonard, 'findinge no cause that the saide Baites should yield [Margaret] anie satisfaccon inregard of the

same hurt'. Yet, 'inregard of her povertie', the court agreed to provide some form of relief from the common

chamber.[165] This incident reveals crucial insights into the ways in which power and authority were wielded

during outbreaks of plague. In this one vivid scene, we can see that emergency regulations were read out to

those perceived as disobedient, yet this in no way ensured compliance. We can see that the closed doors and

empty streets often associated with severe outbreaks of plague could be sites of gathering, resistance, and

unrest and we can see that authorities in some instances resorted to violence to keep the poor infected

within their homes. Whilst the official plague orders may reflect the intention of authorities, administrative

records like corporation minutes reveal the underlying tensions between rulers and ruled.

On 15 January 1975, in his lecture at the Collège de France, the social theorist Michel Foucault described two

'dreams' inspired by the occurrence of bubonic plague: one he called the 'literary' dream, and another he

called the 'political' dream.[166] In the literary dream, plague 'overcomes the law just as it overcomes the body'.

Anarchy reigns and individuals, pushed to breaking point by illness, fear and grief, 'abandon their identities,

forget their status, and abandon themselves to the great debauchery of those who know they are going to

die'. The political dream, in contrast, interprets the measures taken by authorities across Europe to control

and prevent the spread of the disease as 'the marvellous moment when political power is exercised to the

full', the moment when 'the spatial partitioning and subdivision…of a population is taken to its extreme point,

where dangerous communications, disorderly communities and forbidden contacts can no longer appear'.[167]

The plague, according to the political dream, provided authorities with the justification required to impose an

---

[165] Explore York Libraries and Archives (hereafter EYLA), Y/COU/1/1/32.
[166] Michel Foucault, *Abnormal: Lectures at the Collège de France 1974-1975,* ed. Valerio Marchetti and Antonella Salomoni (London and New York, 2003), p. 47.
[167] Ibid.

unprecedented extension of state power over their citizens. Under the guise of a concern for public health, authorities were able to maintain absolute control over the movements of their subjects thereby creating 'the utopia of a perfectly governed city'.[168] Foucault appears to find evidence of both dreams in European plague outbreaks, and would likely find evidence of both in the example outlined above. Margaret and her neighbours were desperate, and this desperation reportedly led them to behave in a disorderly, fear-inducing, law-breaking manner. Simultaneously, the authorities carried out the unprecedented action of wielding violence to ensure compliance and restore control, opening fire on the crowd to force them to disperse. Which dream, therefore, most accurately represents the actions of authorities in early modern England and Scotland? How far did governments utilize the conditions created by outbreaks of plague to expand their powers? How far did they attempt to control their subjects, and how well did they succeed?

As Paul Slack has argued, 'the reactions of the common people to plague are the most difficult of all to reconstruct'.[169] Their views are largely unrecorded. We can see the measures put in place, and we may speculate as to the motivation behind these policies, but we do not necessarily know how they were received. For this, we must turn to the instances of transgression. This chapter builds on the work of historians such as Guilia Calvi and John Henderson whose work has illuminated how plague policy was received in Florence.[170] A comprehensive survey of plague policy offences has not been attempted before anywhere in England or Scotland and plague infractions feature very rarely in the larger surveys of crime in early modern England. There are none to be found in the index of Sharpe's *Crime in Early Modern England,* for example, and they receive only a brief mention in Gaskill's *Crime and Mentalities.*[171] This is likely due to the limited survival and fragmentary nature of the source material. But plague policy infringements allow us to observe how emergency plague measures were experienced, negotiated, bent or broken. More importantly, they offer rare

---

[168] Michel Foucault, *Discipline and Punish: The Birth of the Prison,* trans. By Alan Sheridan (London, 1977), p. 198.
[169] Paul Slack, *The Impact of Plague in Tudor and Stuart England* (Abingdon, 1985), p. 284.
[170] Giulia Calvi, *Histories of a Plague Year: The Social and the Imaginary in Baroque Florence* (Berkeley, 1989); John Henderson, *Florence Under Siege: Surviving Plague in an Early Modern City* (New Haven, 2019).
[171] J.A. Sharpe, *Crime in Early Modern England, 1550-1750* (London, 1984); Malcolm Gaskill, *Crime and Mentalities in Early Modern England* (Cambridge, 2000).

access to the responses of common people and allow us to observe closely the relationship between rulers and ruled during a period of immense upheaval. This chapter explores instances of plague policy transgressions in northern England, particularly in York and Edinburgh, in order to assess how far the will of government encroached upon the lives and liberties of individuals, and how these individuals responded to these new policies.

Although a survey of these infractions will make an important and unique contribution to plague scholarship, this chapter seeks to do more than simply outline cases. With this evidence, I question Foucault's 'literary dream' by arguing that far from demonstrating a complete breakdown of social order, or, as Foucault described, 'a kind of orgiastic dream in which plague is the moment when individuals come apart and when the law is forgotten', plague-related offences were largely motivated by the will to survive, to maintain social networks, and, to a lesser extent, to express dissatisfaction with the increased power and authority of civic officials.[172] The transgressions, and the punishments they received, are much more aligned with the features described in Foucault's 'political dream', in that they show that authorities were just as, if not more, concerned about maintaining public order, as they were about preserving public health. Overall, however, I argue that the dichotomy between anarchy on the one hand and complete social control on the other may be too reductive to accurately describe responses to plague in this period. Neither of these interpretations allows for the one of strongest and most enduring motivations behind early modern social interactions: the bonds of good neighbourliness. Many of the transgressions discussed below illustrate that even during outbreaks of plague, people fought to maintain good neighbourliness, contrary to the orders of authorities.

Malcolm Gaskill imagines archival material in three distinct layers, each constructing a different sort of reality. On the surface, we have 'normative' sources such as statutes, proclamations, orders and sermons which reflect 'the way things were *supposed* to be'. Beneath this, we have more 'impressionistic sources' including ballads, diaries, letters and pamphlets broadly revealing 'how things *seemed* to be to contemporaries'. Finally,

---

[172] Foucault, *Abnormal,* p. 47.

we find 'mainly administrative sources' which, according to Gaskill, 'best reflect the input of ordinary people, and perhaps the way things really *were*'.[173] Only by combining all three can we begin to piece together a more comprehensive understanding of the past. We will see elsewhere in this thesis how challenging it can be to rely on impressionistic sources which describe the impact of plague. Impressionistic sources such as ballads and pamphlets are largely responsible for the long-standing belief repeated by scholars for centuries that plague nurses were incompetent and feared by most of early modern society. Consequently, this chapter has opted to focus instead on the first and last layer of Gaskill's analysis: the 'normative' and the 'administrative'.

The chapter has been divided into three main sections. The first part of this chapter will provide an overview of the policies put in place by authorities at a national level, comparing those enacted by both English and Scottish governments. Then, using administrative records from the Corporation of York and South Leith Kirk Sessions, the second section will assess how far these central orders were implemented locally. Together, these sections will allow us to see where the locus of power and authority resided and question whether the occurrence of plague saw a rapid expansion of state dominance. However, when exploring the impact of plague, if national policies tell us government intent, and provincial accounts show us how far these measures were actually enforced, how might we discover how they were received? How do we access the input of 'ordinary people' and get closer to a sense of *'the way things really were'*? The third and final section of this chapter begins to answer these questions by exploring instances of transgression. Records of plague policy infringements allow us to gain a sense of how these measures were experienced. They allow us to observe which measures were followed, and which were ignored, and, perhaps more importantly, why.

2.1 English and Scottish Plague Policies in National Context

When determining the extent to which authorities achieved an increased level of social control over their populace, an essential question arises: in the context of plague policies, where did power ultimately lie? Did

---

[173] Malcolm Gaskill, *Crime and Mentalities in Early Modern England* (Cambridge, 2000), p. 21.

towns and cities receive their instruction from the centre? Or were the peripheries permitted to act autonomously, responding to crises as they saw fit? Were there such things as national plague policies? And if so, how closely were they followed?

Unlike many other European countries, England had no public precautions against the plague before 1518.[174] A royal proclamation issued on 13 January that year required all infected homes in London to be identified by bundles of straw attached to ten-foot long poles 'to the intent that all persons passing thereby may have knowledge that the said house is infected with the said plague', and their inhabitants were instructed to carry a four-foot long white stick when they ventured out into the streets.[175] Until 2019, it was believed that this proclamation was the first recorded example of quarantine regulations issued in England. However, the discovery of two previously unknown documents from the archives of St George's College, Windsor, has since altered this chronology. Euan Roger identified a series of plague ordinances related to the college issued in November 1517 at the behest of Henry VIII which, like his later 1518 proclamation, ensured that quarantined dwellings were clearly identified and restricted movement between quarantined properties.[176] As Roger has acknowledged, the similarities between the two are striking, and the regulations relating to quarantine are near-identical. Both prescribe the use of long wands to identify both infected dwellings and people. These similarities, Roger argues, are evidence that the London proclamation was modelled on the earlier Windsor accounts, and that Windsor acted as a 'testing ground' for early Tudor plague ordinances.[177]

Over the course of the next sixty years, some English towns drew up regulations to monitor and control the disease and to finance the care of the infected. However, it was not until 1578-9 that a central policy for the

---

[174] Slack, *Impact of Plague*, p. 201.

[175] Paul L. Hughes and James F. Larkin (eds.), *Tudor Royal Proclamations Vol III: The Later Tudors (1588-1603)* (New Haven and London, 1969), p. 269.

[176] Euan Roger, 'To Be Shut Up': New Evidence for the Development of Quarantine Regulations in Early Tudor England', *Social History of Medicine,* Vol. 33, No. 4, (2020), p. 1085.

[177] Ibid., p. 1086.

entire country emerged under Elizabeth.[178] Surviving copies of Elizabeth's *Orders…to be executed throughout the counties…as are, or may be hereafter infected with the plague* are undated. However, based on letters from the Privy Council in November 1578 announcing its intent to provide 'some general order through the realm' by means of printed directions, Slack estimates that they were published towards the end of 1578, and were certainly in print by the end of March 1579. There may also have been earlier drafts in circulation towards the end of 1577.[179] The *Orders* represented England's first published plague orders, and reflect a radical expansion of Henry VIII's 1518 proclamation. 'Uniformity', writes Slack, 'was to be imposed on the nation through justices of the peace and the printing press'.[180] There were seventeen orders in total. Justices were ordered to collect a tax for the relief of the poor, appoint searchers to view the bodies of the deceased, mark infected households, enforce quarantine, distribute essentials such as food, fuel and medicine to the poor, burn or air contaminated clothing and bedding, keep an accurate record of deaths and designate an appropriate area of for the burial of plague victims. Order 14 also permitted justices to execute 'any other orders…thought meete' and imposed imprisonment as punishment for offenders, demonstrating a wide-ranging increase in powers. Authorities also clearly had to fight against the strength of Christian charity or 'neighbourliness', as order 16 suggests:

> Item, if there be any person Ecclesiastical or laye, that shall holde and publishe any opinions (as in some places report is made) that it is a vayne thing to forbeare to resort to the infected, or that it is not charitable to forbid the same, pretending that no person shall dye but at their time prefixed, such persons shalbe not onely reprehended, but by order of the Bishop, if they be ecclesiastic, shalbe forbidden to preache, ad being laye, shalbe also enioyned to forbeare to vtter such dangerous opinions vpon payne of imprisonment, which shall be executed, if they shall perseruer in that error.[181]

---

[178] Anonymous, *Orders, thought meete by her Maiestie, and her priuie Councell, to be executed throughout the counties of this realme, in such townes, villages and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same* (London, 1578[?]).

[179] Slack, *Impact of Plague,* p. 209.

[180] Ibid., p. 208.

[181] *Orders thought meete,* p. 6.

The order attempts to reassure readers, however, 'that according to Christian charitie, no persons of the meanest degree shalbe left without succour and reliefe'.[182] These orders would remain largely intact, with some minor additions and amendments, until the outbreak of 1665. Although they would not receive statutory support until 1604, they were reprinted with only minor alterations in 1592, 1593, 1603 and 1625.[183] The 1604 plague act passed by Parliament was significant because it established legal provisions for the charitable relief of plague victims and introduced harsh punishments for anyone breaking the policy of isolation. Watchmen now had authority to use 'violence' to keep people in quarantine, anyone found wandering the streets could be whipped as a vagrant rogue and anyone found with a plague sore in the company of others could be sentenced to death.[184] Slack suggests that this may have been influenced by the new king, James VI and I, who may have noticed that the Scots imposed harsher punishments for offenders against plague policies than the English.[185]

Scotland's national response to the disease has received much less scholarly attention, despite the long-recognised fact that anti-plague policies were introduced in Scotland over a century before their English counterparts. Outside of the standard reference works on plague by Creighton and Shrewsbury, Scottish plagues have made 'relatively little impact in academic consciousness'.[186] There are, of course, some notable exceptions. Ritchie's 1948 article, for example, provided the first comprehensive summary of Scotland's maritime quarantine policies and Mullet's 1950 article offered the first summary of general responses to plague in Scotland.[187] Flinn's pioneering edited volume, published in 1987, remains the principal reference work for Scotland's demographic history, and contains essential analysis of crisis mortality in the early

---

[182] Ibid., f. 7r.
[183] Slack, *Impact of Plague,* p. 209, 211.
[184] Anonymous, *An act for the charitable reliefe and ordering of person infected with the plague* (London, 1630). https://www.proquest.com/books/act-charitable-reliefe-ordering-person-infected/docview/2248554165/se-2 (accessed August 28, 2023).
[185] Slack, *Impact of Plague*, p. 211.
[186] Richard D. Oram, '"It cannot be decernit quha are clean and quha are foulle": Responses to Epidemic Disease in Sixteenth- and Seventeenth-Century Scotland', *Renaissance and Reformation,* Vol. 30, No. 4, Special Issue: Transformative Disorder: Scotland 1550-1650 (Autumn, 2007), pp. 13-39.
[187] John Ritchie, 'Quarantine for Plague in Scotland during the Sixteenth and Seventeenth Centuries', *Edinburgh Medical Journal,* 55 (11) (Nov 1948), pp. 691-701. For a more recent study on this topic, see John Booker, *Maritime Quarantine: The British Experience, c. 1650-1900* (Aldershot, 2007); Charles F. Mullet, 'Plague Policy in Scotland, 16th-17th Centuries', *Osiris,* Vol. 9 (1950), pp. 435-456.

seventeenth century and the demographic impact of the 1644-1649 outbreak of plague.[188] However, it was not until 2007 that an updated survey of responses to plague in early modern Scotland was provided by Richard D. Oram. Meanwhile, Karen Jillings' *Urban History of the Plague*, published in 2018, remains the only monograph-length study of the impact of plague on a Scottish community.[189] If we compare these contributions to the volume of scholarly work on English or European plague outbreaks, it is clear that there is much left to discover. A brief outline of some of the earliest and most significant interventions is therefore provided below.

Early responses to plague in Scotland were underpinned by an act passed in October 1456 known as 'The Rule of the Pestilence'. This has been identified by John Ritchie as being 'the first attempt by any central body in Scotland to codify the methods of dealing with plague'.[190] It set out guidelines for both household quarantine and the removal of those unable to support themselves to appropriate places outside of towns.[191] The 'Rule' made clear that sufferers who were unable to support themselves during isolation should be provided for at the public cost, placed restrictions on movement and insisted that 'no man burn anothers house' unless this may be completed without hindering or harming surrounding properties.[192] It also highlighted the importance of spiritual interventions by permitting priests to participate in twice-weekly processions for the 'staunching of the pestilence'.[193]

---

[188] Michael W. Flinn (ed.), *Scottish Population History from the Seventeenth Century to the 1930s* (Cambridge, 1977).

[189] Oram, '"It cannot be decernit", pp. 13-39. Karen Jillings, *An Urban History of the Plague: Socio-Eocnomic, Political and Medical Impacts in Scottish Community, 1500 – 1650* (Abingdon, 2018). Jillings' main concern in *Urban History* was to explain Aberdeen's immunity from plague between 1545 and 1647, which she attributes to a combination of location, statutes introduced in response to the 'great pox' of the 1490s as well as the burgh council's efforts to grow and maintain effective networks of information. She also made invaluable contributions to Scottish plague scholarship by offering an extended analysis of Scotland's only plague treatise, *An Breve Descriptioun of the Pest,* published in 1568, as well as a much-needed updated survey of Scotland's national responses to plague.

[190] John Ritchie, 'The Rule of the Pestilence', *Medical History* 2:2 (1958), p. 151.

[191] It is not explicitly stated that removal from the town would mean relocation to a designated pesthouse, though we might assume this is the case based on later policies.

[192] Ritchie, 'The Rule of Pestilence', p. 152. The 'burning' of dwellings refers to the scorching of internal walls with straw or heather which was a common method of fumigating or disinfecting properties. This was a hazardous process, and did occasionally result in the destruction of both infected and surrounding properties. See page 103 for an example of a routine cleansing gone awry.

[193] *The Records of the Parliaments of Scotland to 1707*, K.M. Brown et al (eds) (St Andrews, 2007-2023), 1456/7. Date accessed: 22 August 2023.

Thirty years later, on 28 March 1498, the Edinburgh Town Council extended this policy by prohibiting the importation of English cloth on pain of destruction, and likewise prohibiting anyone from entering the city from suspected infected places on pain of death. Residents were also forbidden from receiving outsiders from suspected regions on pain of having all of their movable goods burnt and being banished from the town forever.[194] Fresh ordinances were enacted on 17 November, when harbouring 'ony maner of person...riche or pure' without licence, became a crime punishable by banishment and the confiscation of goods. In addition, a watch was set at the city gates, and individuals were prohibited from entering by 'bak postrouns...dykes or ony vther priuate places'. Violators of this policy were threatened with the particularly severe punishment of corporal punishment, including the 'cutting of thair eiris [ears], byrning of thair cheiks [cheeks]' and banishment.[195] The importation of English cloth was also forbidden on pain of burning, and parents were instructed to supervise children under the age of thirteen or risk a fine of forty shillings.[196] Children found wandering the streets without parents to pay such a fine were to be put in the 'netherholl' [Nether Hole].[197] Finally, tavern hours were restricted, and a general curfew was enforced. Anyone found wandering abroad after 10pm at night, except those engaged in honest or lawful errands, would also risk being placed in the 'netherhole'.[198]

The following summer saw the repetition of some existing ordinances, as well as the introduction of new ones. Residents were once again forbidden from harbouring anyone from suspected places without licence, this time under pain of death, and inhabitants of those towns were prohibited from entering on pain of 'byrning on thair cheiks with hett [hot] yrne [iron]' as well as banishment. Children, which now included all those under the age of fifteen, were forbidden to wander the streets, under pain of being placed in the stocks

---

[194] ERBE, I, p. 72.
[195] Ibid, p. 74.
[196] On 6 February 1489, this policy was extended to include the importation of 'ony maner of merchandise' including wool, hides, cloth, and other victuals without licence, and without a sufficient testimonial that the items have arrived from a place free from infection.
[197] The 'Nether Hole' was a dungeon below the Tolbooth, the usual meeting place of the burgh council and court. It had very little light, ventilation or sanitation. See Herbert Maxwell, *Edinburgh: A Historical Study* (London, 1916), p. 100 and Geoffrey Stell, 'The earliest tolbooths: a preliminary account', *Proceedings of the Society of Antiquaries of Scotland,* 111 (1981), p. 447.
[198] ERBE, I, p. 75.

and scourged with wands. Dogs and swine were to be kept indoors or risk being slain, and schools, markets and fairs were closed.[199] By 27 November 1499, Edinburgh's town council had appointed its first dedicated plague workers by selecting several men of 'substance' to act as cleansers. The role of cleansers will be discussed in more detail in elsewhere in the thesis, but for now, it will suffice to say that their role was to cleanse and fumigate infected goods and dwellings. The duties of plague cleansers were clarified, and the role reaffirmed the following February.[200]

By the turn of the sixteenth century, therefore, a fairly comprehensive list of plague measures was already in circulation in Edinburgh, many of which were fortified by severe punishments. It was not until 1513, however, that anything resembling an official set of updated national 'plague orders' comparable to the 'Rule' of 1456 would be produced by Scotland's Privy Council, designed to be enforced across the country. James IV's letter 'anent the pest' was issued on 17 January 1513, and although addressed to magistrates in Edinburgh, it was ordered to be distributed to each major burgh and can therefore be regarded as a series of nationwide policies, similar to those released by England's Privy Councils.[201] The letter was significantly longer and more detailed than the 'Rule' that preceded it, although Jillings suggests that it was 'confirmatory rather than innovative', as it largely reiterated measures that had already been in place in Edinburgh and other local authorities for several years.[202]

James IV's letter contained a series of rules designed to combat all possible sources of contagion. The importation of infected goods by both sea and land was strictly forbidden. Anyone found bringing in infected material accidentally was instructed to report the situation to the authorities. Those suspected of infection, be they man or woman, loyal subject or stranger, were prohibited from attending 'kirk mercat' by day or night

---

[199] Ibid, p. 76.
[200] Ibid, p. 77.
[201] ERBE, I, pp. 139-141; Jillings, *Urban History of the Plague,* p. 58, 60. An item dated 29th January 1513 in the treasury's accounts states that a messenger was 'to pas with the Kyngis lettres to all borowis, fra Forth north, for the gud rewill anent the pestilence'. See James Balfour (ed.), *Accounts of the Lord High Treasurer of Scotland,* Vol. IV, 1507-1513 (Edinburgh, 1902), p. 404.
[202] Jillings, *Urban History of the Plague*, p. 61.

and from socialising with 'clene folkis'.[203] Quarantined individuals 'of quhatsumeuer estait or degrie' were to

remain in their homes, and survivors of the disease were banned from socialising with uninfected individuals

for fifteen days without carrying a white wand in their hands, or displaying a white cloth sewn into their

clothes near their chests. All the above measures were issued on pain of death. Infected houses were to be

marked by nailing a white cloth to the stairs and doors 'in the maist vtvard [outward] and sichty place' and

failure to do so would be to the 'vtter perrell' of offenders. All suspected persons and houses were to be

thoroughly cleansed, and anyone found negligent in this task would again be 'pvnisht with rigour'. All 'vile and

suspect beistis' such as dogs, cats, and swine were to be restrained or could be lawfully slain by 'all personis,

officiaris, or vtheris' without the need to compensate the owners for losses. Efforts were made to clean up the

environment in urban areas. Residents were instructed to cleanse all streets, closes, gutters and windows

'bayth on baksyd and foresyd' or face a five-mark fine and authorities were to ensure that middens were

removed from entrances to the town. Citizens were to be held accountable for the actions of their servants.

Beggars were not permitted to remain in towns unless they were deemed to be 'impotent aged or blind folkis,

that ar nocht abill to wyn thair leving within the realme vtherwayis', and these were to receive a token to

prove their right to remain. As Jillings has observed, one of the primary innovations or developments from the

'Rule' to the 'Letter' was the introduction of a staggered release process from quarantine.[204] The

reintroduction of plague survivors back into society was achieved using indicators such as white sticks and

squares of white cloth. Survivors wore these identifiable items for fifteen days following their recovery to

allow 'clane folkis' to 'eschew thame'. In general, then, Scotland's plague policies, although comparable to

England's in their pursuit of combating all possible sources of infection, incorporated stricter language and

wielded significantly harsher punishments. As Charles Mullet has commented, 'No town in England could

show anything like the same zeal'.[205]

---

[203] 'Kirk mercat' refers to the attendance of church or market. It was a unique provision in Scottish legislation, made to demonstrate that the health of an individual was of a sufficient standard that they could participate in the ordinary business od daily life. See J.H.S., 'Kirk or Mercat', *The Scottish Antiquary, or Northern Notes and Queries,* Vol. 11. No. 3 (1897), pp. 121-124.

[204] Jillings, *Urban History of the Plague,* p. 61.

[205] Mullet, 'Plague Policy in Scotland', p. 437.

Regarding England's implementation of plague policies, Slack has observed that the measures did not originate in provincial experiments, which were then adopted by parliament and the Privy Council. The movement was in 'decisively the opposite direction, from centre to periphery'.[206] Once the basic principles of isolating the sick and providing relief for them from the public funds and emergency assessments had been defined at the centre, he argues, they then became permanent elements in local government. The evidence provided above demonstrates that, unlike England, Scottish plague measures were largely developed by the Burgh authorities, not by the Privy Council. The 'Rule' of 1456 provided an important foundation and impetus, and the letter of 1513 reiterated the crown's desire for action, but it was the Burgh authorities that adapted and developed these early guidelines into concrete policies. The movement in Scotland, then, was from periphery to centre. However, as Oram has argued, this lack of centralised legislation should not be interpreted as weakness at the centre, but rather reflects the nature of late-medieval government in Scotland. 'Rather than parliament producing fresh legislation', Oram argues, 'the crown directed instructions by proclamation to the localities, which were then issued as enactments by local jurisdictions.[207] The 'Rule' of 1456 and the later 'Letter' of 1513, then, were all the burghs required to act decisively to prevent and control the spread of disease, and to punish offenders as they saw fit.

Regardless, the plague orders released by both English and Scottish central governments seem to have increased the powers given to local authorities. In the name of public safety, they were now permitted to control the movements of their subjects and to punish offenders outside the realm of traditional courts. They also entrusted this power to an unprecedented number of individuals. An Oxford broadside dated 1644, for example, certainly demonstrates an expansion of power and authority. The *Order for the Observance and Execution of the State made for the Reliefe and Ordering of Persons infected with the Plague* gave power to 'Justices of Peace of Counties, Maiors, Bayliffes, Head Officers, or Justices of Peace in Cities, Boroughs, Townes Corporate, and places Priviledges', even to 'the Vice-chancellour of either of the Universities, and to

---

[206] Slack, *Impact of Plague,* p. 200.
[207] Oram, 'It cannot be discernit', p. 22.

the Bishop and Deane of every Cathedrall Church respectively' to act on behalf of the crown, to punish and

even execute offenders. We might therefore argue that the plague did lead to the rapid expansion of powers.

However, like Gaskill, Ole Peter Grell has argued that such regulations provide evidence of 'government

intent' rather than expressions of 'practical policy'.[208] If we wish to assess how far this 'intent' was enforced

on the ground, we must turn to the third layer of Gaskill's analysis: administrative sources.

2.2 Local Implementation of National Plague Policies

The policies enacted by fifteenth, sixteenth and early seventeenth century English and Scottish governments

remained in use, relatively unchanged, throughout the major epidemics of the seventeenth century. I have

selected accounts of two outbreaks of plague, the 1645 outbreak of plague in Leith, and the 1604 outbreak in

York, which help us to understand the relationship between the national plague policy and the practicalities of

enforcing these orders.

2.2.1 David Aldinstoune's Account of the 1645 Plague in Leith

The first account which we shall explore can be found in records of the Kirk sessions of South Leith.[209] This

remarkably detailed account is the work of David Aldinstoune, the town's session clerk, as he recorded the

day-to-day workings of the Kirk sessions during the summer of 1645, the last and most severe outbreak of

plague in Edinburgh. Flinn estimates the mortality rate to have been between 9,000 and 12,000 people,

equating to approximately a third or a quarter of the city's inhabitants.[210] Save for one month towards the

start of the outbreak, when the clerk himself was stricken with the disease, Aldinstoune faithfully recorded

the events which occurred throughout the entire outbreak of 1645-6. The completeness and attention to

detail of his work make it unique amongst plague accounts of this period, and yet it remains relatively

---

[208] Ole Peter Grell, 'Plague in Elizabethan and Stuart London: The Dutch Response', *Medical History* 34 (1990), p. 425.
[209] NRA, CH2/716/5, South Leith Kirk Session Minutes (1643-1650)
[210] Flynn (ed.), *Scottish Population History*, p. 147.

underexplored.[211] The account is so detailed, in fact, that it would be impossible to include every significant event here. During the summer of 1645, plague arrangements dominate the account, leaving precious little room for any other 'ordinary' business. Therefore, I will restrict my comments to those which best illustrate the implementation of plague policies, allowing us to assess how far the policies made by the central government were actually followed in the localities, and how far we can interpret these actions as a rapid expansion of power and authority.

The first reference to the plague in Leith appears in an entry dated 3rd April 1645 when two men, Jon Kellas and Jon Aldinstoune, were instructed to furnish two other men, James Thomsone and Jon Dunlap, and one unnamed woman with food as the three had all been quarantined 'for feare of the plague'.[212] An entry the following week, on 10 April 1645, confirms that the provision of meat and drink to quarantined households was to be provided at 'ye Sessiones expense till yei be freed'.[213] Shortly after this entry, we see a note written in a different hand stating that the author of this account, David Aldinstoune, had been instructed to keep within his house having prayed at the deathbed of a woman named Margaret Gilmuir who was suspected of having died of plague. Aldinstoune was then quarantined from 16 May 1645 to 15 June 1645. He left six blank pages in the register to reflect his absence, stating 'he could not gait certaine notice what was done in ye session' during this time.[214]

In general, responses in Leith appear to go beyond the ordinances set out by either the Rule of 1456 or the Letter of 1513. They even appear to exceed the level of provision implemented by the Edinburgh Town Council. This suggests that whilst the general intentions may have been set out by central government and the Burgh authorities, it was at a parish level that most plague policy was tested, adapted, and enacted. Of

---

[211] It is discussed in some earlier works e.g., H. P. Tait, 'An Edinburgh Tercentenary', *Edinburgh Medical Journal*, 51 (Nov-Dec 1944), pp. 475-485. More recently, it has been featured in a National Records of Scotland blog post: https://blog.nrscotland.gov.uk/2020/06/18/stench-corruption-and-filth-the-leith-plague-of-1645/ [Date Accessed: 22/08/2023].
[212] NRS, CH2/716/5, f. 87.
[213] Ibid., f. 88.
[214] Ibid., f. 89.

course, some of the actions taken by the council adhere to the orders enacted by central government. For example, we have already seen that individuals who had been exposed to the disease, either by direct infection or by association, were quarantined and provided for. Similarly, as set down in the Letter, householders were instructed to remove the middens, muck, and deceased swine from the streets. Quartermasters were instructed to provide weekly death tolls, and plague cleansers were appointed and provided with 'sufficient maintenance'.[215] As the outbreak intensified, a travel ban was placed on the inhabitants of Leith, and they were prohibited from travelling into the city of Edinburgh via Canongate until the disease had ceased.

However, the survival of the parish evidently required significantly more assistance at the parish level, and the kirk session continued to expand and build upon the provision recommended by central authorities. Men were appointed to assist the baillies whilst others were appointed to visit the infected housed in lodges or pesthouses on Leith Links. Carters were employed to carry belongings from infected houses to the pesthouses. Elders met to consider the best way to collect money to assist the poor and settled upon a collection at the church door. On 17 June, elders and deacons were instructed to appoint 'honest men' to help them deal with the epidemic, and a visitation was organised to select a site suitable for burying infected corpses. Two days later, another committee was convened to meet between 5 and 6 in the morning to decide upon a 'fair and most convenient' way of appointing quartermasters. The following day, a total of twenty men were appointed 'to visit and furnishe ye several quarters both in yue toune and linkes' for the space of five weeks. A grave digger named Andro Steinsone was employed and provided with a substantial wage: 16 shillings per day and an additional ten pounds per year to pay his rent.[216] On 29 June, our author, David Aldinstoune, was instructed to ride to Borrowstonness to seek out two additional cleansers but was unsuccessful as they were already employed by their own parish. The Letter of 1513 mentions the need to appoint cleansers and individuals to record the numbers of sick and dying, but in reality, an outbreak as

---

[215] Ibid., f. 113.
[216] NRS, CH2/716/5, p. 114.

severe as this necessitated the appointment of a much broader range of individuals. The sessions acted autonomously to appoint committees and councils, quartermasters, and additional plague workers, replacing each of these essential roles as individuals perished during the course of their duties.

Paying for the poor infected was also clearly an issue during the summer of 1645. The Kirk shouldered the responsibility to maintain the infected from the common purse and there are repeated entries throughout the account instructing various individuals to ascertain who in the town required meat, drink or other necessities. The fulfilment of these needs was a costly process, and the Kirk was forced to find new ways to raise the required funds. On 19 June, it was decided that workmen who should fall ill should be sustained 'by ur own boxes', meaning that, where possible, they should be supported by their guild.[217] The rest of the town's inhabitants were to be provided for by a weekly contribution, which would be collected by the elders and the deacons. Whilst these actions were aligned with the wishes of the national orders, the authorities in Leith must have struggled to manage the needs of the sick on this contribution alone and sought to raise additional funds wherever possible. A man's home was ordered to be cleansed and searched, 'becaus it is thought yat yr are moneyes in his house', moneys which could be used to support the poor infected. Later, it was ordained that all money found in a house after it had been cleansed was to be delivered to the baillies and then to the treasury for use of the poor.[218] Authorities in Leith also sought to make savings where possible, commandeering equipment and properties to support the effort. Two men, Matthew Mitchel and James Methie promised to lend their cauldrons to the links for cleansing the goods of the infected housed in the pesthouses, and Peter Cochrin's house was commandeered as a 'magazine house' or storehouse to keep beer, ale, bread and all other necessary provisions to maintain the people housed there.[219] On 24 July, a 'foule cleanser' named Malcome was instructed to slay all the cattle on the Links without an owner to feed the poor housed in the pesthouses.

---

[217] Some guilds would provide relief for their own brethren, and perhaps also local poor people. See Mairi Cowan, *Death, life and religious change in Scottish towns c. 1350-1560,* (Manchester, 2012), p. 104.

[218] NRS, CH2/716/5, ff. 111-112.

[219] Articles of clothing were boiled in large cauldrons whilst other infected articles were put into kilns and subjected to the heat and smoke of burning heather or whins.

However, it was not only the cost of maintaining the sick that strained the town's resources, paying for the burial of the increasing numbers of deceased inhabitants was also a cause for concern. On 1 July, it was found that 42 individuals were unable to pay for their own coffins, the cost of which amounted to £75 18s, which was to be paid for from the common purse.[220] Less than a week later, the prices of large and small coffins or 'kists' were sourced, (4s for a 'little kist' and 6s 8d for a 'meikle kist'), before an order was made stating that only those who were able to pay for their own coffins would be buried in them. Clearly, the town had initially intended to pay for the poor to be buried traditionally, but a lack of funds meant that they were buried interred without coffins. A nineteenth-century account of the outbreak states that many of the dead were instead buried in coarse blankets with blue stripes along the borders.[221] A recent excavation of the site confirmed these findings, stating that among adult burials, there appeared to be roughly an equal split between coffined and shrouded burials, although the report also notes that most of the children were interred in coffins.[222]

Eventually, the devastating plague in Leith ended. On 7 December 1645, it was ordered that all but a few of the lodges on the links should be taken down and brought into the church yard for the use of the church and a Tuesday sermon was introduced 'seeing ye plague is ceasit'. As the town was by this point cleansed and almost free of the disease, anyone still harbouring wounds or signs of infection was sequestered outside of town in a house on the Links. Finally, the church was cleansed, preaching resumed and Aldinstoune received recognition from the town's pastor for his dedication to the session during the visitation. There is some evidence of lingering anxiety within the session. On 25 January 1646, for example, it was ordered that there 'be no intercourse betwixt ye cleane people & ye foul who are infected with ye plague of pestilence'.[223]

---

[220] NRS, CH2/716/5, pp. 114-115.

[221] Alex Campbell, *The History of Leith from the Earliest Accounts to the Present Period with a Sketch of the Antiquities of the Town* (Leith, 1827), p. 147.

[222] M. Stoakey, (et al.), '"Great fears of the sickness here in the City…God preserve us all" A plague burial ground in Keith, 1645: an archaeological excavation at St Mary's (Leith) RC Primary School, Leith Links, Edinburgh', *Scottish Archaeological Internet Reports,* 86 (2019), p. 52.

[223] NRS, CH2/716/5, pp. 114-115.

Thankfully, however, the disease did not return after the winter months. The 1645 outbreak was both the worst and last occurrence of plague in Leith.

As Tait has reasoned, Aldinstoune's account offers insight into the many roles played by the Kirk. 'At this period of Leith's history', he writes, 'the Kirk Session exercised the offices of Public Health, Public Assistance and Police Authorities for the particular part of the town which it served'.[224] Interestingly, despite the meticulous detail recorded by the session clerk, there are no plague infractions recorded in his account. In theory, Kirk session minutes recorded the proceedings of the church court. In this sense, they are primarily a record of the disciplinary cases heard as well as any other decisions or business relating to the session. Why, then, are there no records pertaining to plague offences in the summer of 1645? The Letter of 1513 had certainly given permission for authorities to act decisively and to punish offenders on pain of death, branding, banishment, or fines. It may be that no plague infractions were committed, although given the frequency of infractions in Edinburgh this does seem unlikely. It may be simply a peculiarity of the parish. Session minutes vary considerably from parish to parish, and from clerk to clerk. It does appear that the South Leith sessions are relatively light on punishments in general; most of the entries into the register in the years leading up to the 1645 outbreak concern topics such as maintenance of the fabric of the church, feast and fast days, poor relief and education. This is not to say, however, that South Leith did not punish any offenders at all. In the months leading up to the outbreak there are several cases concerning defamation and witchcraft and just two months after the Kirk declared the cessation of the outbreak, one Janet Nicholsone was ordered 'sit downe upon hir knees' in the presence of the session to ask for God's mercy after she had been heard swearing on the Lords Day.[225] This would suggest that although the Kirk would handle cases of moral and spiritual infractions, they did not punish offenders of plague. The role of punishing offenders of plague infractions may have been handled exclusively by the town council courts in Edinburgh, with Leith reporting offences directly to a higher authority.

---

[224] H. P. Tait, 'An Edinburgh Tercentenary' *Edinburgh Medical Journal,* 51 (11-12), (1944), p. 478.
[225] NRS, CH2/716/5, pp. 114-115.

How far can we interpret the actions of South Leith Kirk as a Foucauldian expansion of power? Certainly, the kirk wielded the powers set out by the Letter of 1513 to restrict the movement of their parishioners, to impose curfews and remove the sick to pesthouses. But the evidence above suggests that whilst the policies set out by the Rule, the Letter and Edinburgh's town council were adhered to in South Leith, the logistics of ensuring the town's survival in 1645 meant that authorities were forced and able to act beyond even the roles assigned to them by central government. The parish acted autonomously to create various committees and appoint a series of plague workers beyond those advised by national orders. It is perhaps not surprising that the authorities in Leith took their many roles so seriously. In addition to the urgent need to ensure their town's survival, the language set out in the Letter stated that authorities found negligent in their duties could be charged, and 'pvnist with rigor'.[226] However, when it came to punishing offenders of plague infractions, despite the severe language employed in the Letter, this power they seem to have left in the hands of central authorities.

2.2.2 Corporation Records for the 1604 outbreak in York

The next account which we shall explore is that of the York Corporation during the outbreak of 1604. As the name would suggest, this was a much larger organisation than that of the South Leith Kirk Sessions. Although there is evidence in some larger, London parishes of churchwardens and other religious authorities taking charge of plague relief, this was not the case in York. There is very little evidence in York parish records of outbreaks beyond the occasional references to plague deaths in parish registers. In general, it seems that the day-to-day management of outbreaks of plague in York was managed by the City Council, also known as the Corporation. The ancient corporation of York was founded in the thirteenth century and its rights and privileges were gradually accrued over time by royal decree and legislation and its function varied over

---

[226] ERBE, I, p. 140.

time.[227] According to Palliser, the liberties enjoyed by the corporation meant that they 'considered themselves responsible only to the king'.[228] By the seventeenth century, it was largely responsible for matters of public health, poverty, maintaining order within the city as well as the maintenance and repair of civic property.

Unlike the Kirk session of South Leith, which took its example from just two national statutes and the actions of the Burgh Council, York City Corporation had an abundance of national policy to adhere to. However, the outbreak of 1604 coincided with one of the more radical updates to English plague policy: James I's statute *For the charitable relief and ordering of persons infested with the plague.* As we saw above, in addition to extending the financial help available to accommodate the sick, James I's statute introduced harsh punishments for anyone breaking the policy of isolation. For the first time, watchmen were permitted to use violence to keep the sick within their homes, and anyone with a plague sore found to be out conversing with others would be deemed a felon and executed as such. Whilst Scotland had long introduced the death penalty for plague infractions, the 1604 act was the first introduction of such severe punishments south of the border.

The outbreak of 1604 in York was one of the worst the city would ever experience. Based on a survey of the surviving parish registers, Palliser estimates that approximately thirty per cent of the city's population were carried off by the disease in a single year.[229] The disease had raged in London throughout 1603, but it was not until the following April that it began closing in upon the city of York. The corporation employed a range of measures aimed at preventing the disease from entering the city. In July 1603, for example, upon hearing that the disease had reached Newcastle, a watch was appointed at the city gates to prevent travellers from entering. Markets and fares were cancelled, merchandise from Newcastle and London was prohibited from being imported without licence and innholders were forbidden from lodging anyone from either of those cities.[230] These measures appear to have been successful, as no cases of the disease were reported for most

---

[227] P. M. Tillott (ed.), *A History of Yorkshire: The City of York* (London, 1961), pp. 33-37.
[228] D. M. Palliser, *Tudor York* (Oxford, 1979), p. 60.
[229] Palliser, *Tudor York*, p. 125; D. M. Palliser, 'Epidemics in Tudor York', *Northern History,* Volume 8, (1973), p. 56.
[230] EYLA, Y/COU/1/1/32, ff. 279-285r.

of 1603. However, fears were renewed in December when a Jilligate porter, Christopher Wilson, died under suspicion of the plague. Wilson's wife was quarantined and given two shillings from the common purse for her maintenance. A watch was also set to ensure she did not leave her home. A male searcher named Robert Thackwrey was then appointed to search the body of the deceased.[231]

By the following spring, the disease had truly begun to take hold, and the corporation employed a series of measures to control its spread throughout the city. Many of these were in line with the ordinances set out in James I's statute as well as earlier English plague orders. On 14 March 1604 the corporation ordered all city parishes to supply weekly certificates of mortality on the model of the London mortality bills. City wardens were instructed to implement 'a more sufficient watch' at all entrances to the city, making sure that no 'soldyers, roges, beggers or vargrant persons' were given admission. Constables were then instructed 'in His Majesties name' to apprehend vagrants and beggars 'to receive punishment according to the law'. On 18 April, the corporation expressly banned inhabitants from visiting the sick, stating that 'onelie such persons as shall kepe them or can do them good in that tyme' were permitted to enter the homes of the infected. Even this policy was later restricted, as the corporation warned that no more than twelve wives should resort to 'sick wives labor'. Viewers and cleansers were appointed, and the corporation organised additional assessments to assist with the relief effort.[232]

Like the authorities in South Leith, some of the actions of the York Corporation appear to go beyond the policies outlined in the national orders. Once again, whilst the national orders outlined the intentions of central government, it seems that the actual logistics of enacting these intentions required a somewhat broader scope of activities. For example, the corporation introduced a 12d fine for anyone found resorting to an alehouse to drink ale or beer. Additionally, to ensure that all possible funds were allocated for the use of the poor infected, inhabitants were forbidden from giving charity 'at ther dores' and instructed instead to give

---

[231] Ibid., f. 302r; 306r.
[232] EYLA, Y/COU/1/1/32, ff. 330r; 333v; 340r; 345r.

only to the poor appointed by authorities. A house belonging to Sir Roberte Watter, knight, which had previously housed the poor, was repurposed for the use of the infected and heavy fines were introduced for absent magistrates.[233] However, the main way in which the corporation appear to act beyond the powers given to them by the 1604 statute is in their prosecution of offenders. The corporation's powers in this capacity were more comparable to the Edinburgh Town Council than the kirk of South Leith. It is therefore unsurprising that they took on responsibility for this role, where South Leith opted to delegate this part of plague management to higher authorities. The crimes and punishments recorded in the corporation minutes will be discussed in detail in the following section. For now, it will suffice to say that whilst some crimes and punishments were included in the 1604 statute, i.e., severe punishments for breaking quarantine, the corporation appear to have taken it upon themselves to prosecute a much broader range of infractions, often deciding upon their own punishments for offenders. In this sense, we can argue that the York Corporation records provide evidence of an expansion of the powers of local authorities.

Whether this expansion amounts to a Foucauldian 'political dream', however, remains to be seen. In his analysis of plague policy enforcement, Foucault does not necessarily pinpoint a singular location for power and authority. Instead, he explores how power is dispersed and exercised at different levels of governance, highlighting the role of both centralised institutions and local authorities in implementing strategies for managing outbreaks of the disease. The evidence provided above supports this analysis. If we look exclusively at the national plague orders enacted by central authorities, we could argue that the plague led to the rapid overarching extensions of power in the early modern period. In the name of public health, an unprecedented number of individuals were permitted to use violence against their subjects, and citizens could be whipped or even executed for walking in the street or visiting the sick without permission. In reality, however, when we look at the next layer of source material, the administrative records written by those responsible for the day-to-day planning and management of the outbreak, we can see that the picture is somewhat more complicated. There is certainly evidence of some expansion of powers, even more perhaps than that outlined

---

[233] Ibid., ff. 321r; 332r.

by the national orders. The demands of plague management required local authorities to act decisively and autonomously to meet the needs of their inhabitants. However, looking simply at the policies employed by local authorities, we might also argue that some restraint was shown. Both in Leith and York, authorities implemented their most severe policies of quarantine only when necessary, and removed individuals to pesthouses only if they could not provide the resources to maintain them within their own homes. Wherever possible, recovered individuals also were set at liberty as soon as it was deemed safe to do so. It seems reasonable, therefore, to conclude based on the evidence supplied above that whilst the plague did lead to some expansion of civic powers, this power was not necessarily wielded to the extent permitted by the law.

2.3 Policing the Plague

So far, we have explored plague policy from the perspective of the authorities. We have examined the intent of national governments through nationwide policies and looked at two case studies which help us to understand how far this intent was enforced. However, if we are to get closer to, as Gaskill writes, 'the way things really *were*', we must turn to a different set of sources which offer insight into the reception of these policies. Records of plague policy infringements allow us to gain a sense of how these measures were experienced. They allow us to observe which measures were followed, and which were ignored, and, perhaps more importantly, why.

The remainder of this chapter is based primarily on an analysis of 99 plague 'crimes' committed by over 148 individuals across northern England and Edinburgh. The earliest offence contained in this sample is that of Bessye Symourtoun, who was sentenced to branding in Edinburgh on 27 May 1521 after she was caught in the act of hiding plague-infected goods under a pile of wood. It is therefore quite fitting that the latest example included in this sample occurred 146 years later, in July 1667, when a widow named Elizabeth Duffeild was referred to the assizes for the similar offence of exposing plague-infected clothing in Cawood, a village in North Yorkshire. It is hoped that by uncovering these examples, this chapter can apply the methods

used by John Henderson whose aims included providing 'a more nuanced picture of the identity and reactions of the poorer levels of society than that of contemporary accounts by patricians or of government officials'.[234]

Guilia Calvi's work, based on roughly 300 cases brought before Florence's public health board (Sanità), offers insight into the daily circumstances of ordinary people living through the plague of 1630-33. Henderson's exploration of public health policy infractions in his work on Florentine plagues analyses an even more enviable sample of some 566 cases of prosecutions undertaken by the health board's special court between September 1630 and July 1631.[235] These cases, he argues, record the strategies used by individuals and families as they sought to maintain the networks on which they normally relied to survive and demonstrate a surprising degree of flexibility in the enforcement of the law.[236] Both historians make use of plague infractions to illustrate how ordinary people coped with the stresses of plague. However, both Henderson and Calvi were able to draw on the rich source material generated by Italian health boards. Unfortunately, no comparable institution existed in early modern England or Scotland. There was no uniform process for dealing with plague policy infractions, and offences were prosecuted on an ad hoc basis, alongside other business of the day, in a wide range of courts. The examples that form the basis of evidence for this chapter, therefore, have been gleaned from an extensive range of sources found in seven different archives across Northern England and Edinburgh.[237] They were collected over a period of three years and were identified by searching through a wide range of administrative sources including town council minutes and kirk session records in Edinburgh, corporation minutes and court records in York and Lancashire, as well as consistory court depositions and personal correspondence in Durham.

---

[234] Henderson, *Florence Under Siege,* p. 229.
[235] Ibid*.,* p. 229.
[236] Ibid., p. 276.
[237] These include Edinburgh City Archives, the National Records of Scotland, Explore York Library and Archive, the Borthwick Institute for Archives, Lancashire Archives, Wigan Archives and Local Studies and Palace Green Library in Durham.

2.3.1 Who committed plague crimes?

The fragmentary nature of the evidence relating to plague infractions in northern England and Edinburgh

limits the level of detailed statistical analysis that can be completed. The biographical information included in

these cases is sparse, and rarely includes more than the name of the offender. Some cases do not even

contain this much detail, as in a case recorded in York on 12 December 1631 which refers simply to 'Those

fower women and a man' or the 'three men' fined in Edinburgh in 1636.[238] However, a general overview of

the gender and occupations of the individuals included in this sample is possible and will provide important

context for the qualitative analysis later in the chapter.

Women, it seems, were significantly less likely to be prosecuted for plague-related offences. Of the 148

individuals included in this sample, just 28 of them (19%) were women. This may have been because they

were less likely to actually commit the crimes, or it may be, as in the case of Nyny Blythman, a York tailor

prosecuted for 'suffrying his wife to come home to his house' with potentially infected goods, that husbands

were held responsible for the actions of their wives. The vast majority of recorded cases do not list

occupations. Those that do have been listed in Table 1 below:

Table 1: List of Occupations

Ale Brewstress	1	Macebearer to the Lord Mayor	1
Apprentice	1	Merchant	6
Armorer	1	Sadler	2
Bailiff	1	Schoolmaster	1
Bellman	1	Servant (Female)	1
Butcher (or Fleschour)	2	Servant (Male)	1
Cleanser	1	Shoemaker (Cordiner)	2
Constable	4	Skipper/Shipmaster	4
Draper	5	Smith	1
Goldsmith	1	Spurrier	1
Grocer	1	Stabler	1
Haberdasher	2	Tailor	4
Inkeeper/Innholder	2	Watchman	1
Knight	1	Widow	3
Labourer	1	Yeoman	2
		Total	56

---

[238] EYLA, Y/COU/1/1/35 f. 146v; ERBE, VIII, p. 176.

Some additional occupations can be inferred by the types of offences committed. For example, the three York men questioned alongside other merchants who had travelled to Hull long after a ban on trading with that town had been imposed, were probably also merchants of some kind. In addition, we can assume that the three men fined for landing a ship in Leith from a region suspected to be infected with plague were shipmasters or merchants. Even in this small sample, we can see a broad cross-section of society represented by these occupations. From the poorer sort represented by labourers and servants, through the middling sorts represented by grocers, haberdashers and innkeepers, to the upper echelons of elite society, a knight, no one, it seems, was excluded from the reach of plague prosecutions.

2.3.2 What kinds of crimes were committed?

As we established in Part One of this chapter, plague orders in England and Scotland were not uniformly applied throughout the provinces. There was no centralised institution or health board comparative to European examples to see that plague policies were enforced, and only a handful of the nationally-sanctioned plague orders included explicit punishments. The treatment of plague policy infringements, then, was dictated by local government, and the acts that were, or were not, deemed criminal offences, could vary from town to town. It should be noted here that the only crimes that can be examined are the ones which made it to the level of prosecution; there were likely many more low-level offences which never reached the desk of the town council recorder, or caught the attention of the local magistrate. In general, the offences that do survive can be categorised into three distinct groups. First, we have the crimes that posed a direct threat to the health of the town, those that were deemed to put the population at risk as they held the capacity to spread the disease. These included the handling of infected material, associating with the infected, concealing the sick, and breaking quarantine. Next, we find those that threatened the social order. These included the spreading of false information, seditious speech, lewd behaviour and actual or threatened violence against authorities and other members of the public. Finally, we have crimes that hindered the smooth running of

emergency measures such as the failure of plague workers to fulfil their duties to a criminal degree, and the refusal of residents to pay emergency plague assessments. Together, they provide important context for the policies outlined above, and help us to understand how far governments crept towards full social control over their citizens.

The Threat to Public Health

The first category of plague offences are those which threatened the health and safety of the town by increasing the risk of spreading the disease. As plague orders themselves were designed to limit the spread of the disease, those found to be deliberately increasing this risk could expect to be punished for their actions. The first of these offences includes the handling of infected material. The earliest example of this offence included in this sample we have already seen above. It was committed by Besse Symourton, who, in May 1521, was caught in the act of hiding plague-infected goods under a pile of wood at the end of Fowler's Close in Edinburgh. She was sentenced to be branded on the cheek and banished from the town.[239] Seven years later, in October 1530 three women, Issobell Bowy, Kate Boyd and Besse Anderson were banished for a similar offence. Issobell and Kate had been quarantined within their houses for suspicion of the plague. Both of them were tried after they opened a feather bed and removed half a stone of feathers and gave them to Besse to sell, running the risk of infecting the entire town.[240] A somewhat more dramatic example of this category can be seen in York in December 1631, when four women and one man were set in the stocks and whipped after they had 'digged and raved vpp Clothes and other things' that had been buried for danger of infection.[241] Some contemporaries believed that the disease could linger on the dead forever, and this explains why some authorities ordered that plague victims be buried in extra-deep graves.[242] The act of unearthing clothes, already understood to be one of the primary carriers of the disease, from the ground

---

[239] ERBE, I, p. 204.
[240] ERBE, II, p. 42.
[241] EYLA, Y/COU/1/1/35 f. 146r.
[242] During the 1665-1666 outbreak of plague in London, a gravedigger was provided with extra remuneration to encourage him to dig graves deep 'as it is orders [in the Plague Orders] and as the time requires'. Vanessa Harding, 'Burial of the plague dead in early modern London' in J. Champion (ed.), *Epidemic Disease in London* (London, 1993), p. 56.

would have been regarded as an extremely dangerous task, both for the offenders and those they would later come into contact with. It is difficult to speculate exactly what motivated these offences, committed over 100 years and 200 miles apart. Perhaps they sought to seize the opportunity to make some extra money, or perhaps they simply needed the income to survive.

Survival was, of course, a strong motivator for individuals to breach plague policies. Community, and the Christian ideal of 'neighbourliness', appears to be another. Associating with the infected was strictly forbidden by both Scottish and English authorities. Nevertheless, individuals continued to sit beside their dying friends and neighbours, and spend time with both their families and their church communities. In August 1530, for example, a man named David Duly, a tailor from Edinburgh, had kept his wife at home for two days until she died, without revealing her condition to the authorities. In the meantime, Duly had gone to mass at St Giles Kirk, 'amangis the cleyne pepill, his wife beand in extremis in the said seiknes'. As, in the opinion of the Town Council, he had endangered the town, he was sentenced to be hanged on a gibbet before his own door. However, 'at the will of God he…eschapit', when the rope broke and Duly fell from the gibbet. As he was 'ane pure man with small bairns' the Provost and Baillies took pity on him and commuted his sentence to banishment for life.

We have already seen the indictment of Nyny Blythman, set in the stocks for allowing his wife to come home after she had tended to the sick in the country.[243] Like Duly, Blythman's wife had also been 'abrode in this Citie emongs the holle', therefore at risk of spreading the infection. In York, throughout the winter of 1631, there are several records in the Corporation Minutes concerning the illicit association with the infected. For example, Phillip Askwith, Macebearer to the Lord Mayor of York, was suspended from his office after he had dined at the Lord Mayor's house knowing that his wife had sat with a woman dying of plague the night before 'to the great feare & danger both of his Lo[rdshi]p his household and the whole Citty'.[244] Just over a week

[243] A. Raine (ed.), *York Civic Records Vol V,* (The Yorkshire Archaeological Society, 1944) p. 81.
[244] EYLA, Y/COU/1/1/35 f. 141r.

later, five men, James Woodbyrne, James Parkinson, Thomas Cobb, Edward Rosindale and a Mr Grindall, were fined twenty shillings each for visiting a man named Robert Elward, contrary to the order forbidding them to do so.[245] It is interesting to note that in two of these examples, husbands were held responsible for the actions of their wives, who sought to comfort neighbours and friends, or tend to the sick in the country. These infringements provide insight into the lengths to which individuals might go to preserve their informal networks of sociability, often at great risk to their own health. They also demonstrate the strength of the Christian duty to tend to the sick, and the concept of 'neighbourliness' explored in depth by Keith Wrightson in his analysis of the 1636 outbreak of plague in Newcastle.[246]

Closely related to the crime of associating with the infected, was the act of concealing the infected. Both English and Scottish plague orders stipulated that all cases of infection should be reported to authorities. In England, this may have been carried out by searchers, who would then report their findings to the parish clerk.[247] In Scotland, the responsibility was placed firmly upon the private household, who were instructed to inform the baillie immediately if anyone in their home had fallen ill. This was not always adhered to as strictly as authorities might have liked, however. In June 1530, for example, George M'Turk and his spouse, Male Mudy, along with Marione Suddirland and Alisone Bird, were charged with keeping a sick child in their house for three days without informing authorities until after the child had died. All were branded on the cheek, while Marione Suddirland, who was alleged to be the source of the infection, was banished for life under pain of death, the other three were banished during the town's pleasure.[248] In July 1652, Richard Williams brought his servant to the home of his mother-in-law, Dorothy Deane. Williams failed to report to the authorities, however, that his servant had recently shared a bed with another girl who had become infected and later died of plague.[249] Despite having 'tymely notice to the Contrary', Deane had still made the decision to receive both

---

[245] Ibid., f. 143r.

[246] Keith Wrightson, *Ralph Tailor's Summer: A Scrivener, His City and the Plague* (New Haven, 2011).

[247] See Richelle Munkhoff, 'Searchers of the Dead: Authority, Marginality, and the Interpretation of Plague in England, 1574-1665', *Gender and History,* Vol. 11, Issue 1 (1999), pp. 1-29.

[248] ERBE, II, p. 35.

[249] LA, QSP/67/1.

her son-in-law and his servant into her home, and consequently, a watch was set upon her house. Again, it is unclear what motivated individuals to conceal or to fail to report cases of infection. Perhaps they simply did not want their homes to be shut up. Perhaps they could not afford to remain quarantined in their homes and did not want to face the horrors of the pesthouse. In the case of M'Turk and Mudy, perhaps they feared that the child would be removed to a pesthouse and was in such a serious condition that they wished to provide the end of life care at home.

Orders to quarantine infected households had been enforced since 1578 in England.[250] The process was described by contemporaries as 'shutting up', as the doors of a home would often be padlocked by a local constable, closing all living inhabitants inside. The door might then be marked with a red cross and the words 'Lord have mercy upon us' to warn passers-by of its infected status.[251] Despite its widespread usage throughout the sixteenth and seventeenth centuries, the issue of quarantine was hotly contested. Kira Newman has identified 'a popular narrative that portrayed quarantine and isolation as a personal punishment rather than a prudent policy'.[252] This popular narrative was voiced in a range of contemporary printed pamphlets. The anonymous pamphlet *The shutting up of infected houses as it is practiced in England soberly debated* (1665), for example, lists several reasons why the policy was not only inhumane, but also ineffectual.[253] It is therefore not surprising that many of the offences included in this sample concern breaking quarantine policies. In August 1605, for example, Phillip Fyton, a labourer from Lancashire, had been restrained in a cabin after behaving 'leaudly and dangerously' by travelling to suspected places and associating with suspected people. He was reportedly 'wandringe abroade in the dayetyme, and in the nighte lynge in the outhowsinge of dyvers of the inhabitants...to the great greefe and daunger of the said inhabitants thear'.[254] The situation was deemed so serious that he had been 'chayned within his Cabynne' by the

---

[250] Slack, *Impact of Plague,* pp. 47, 211, 209.

[251] Kira L.S. Newman, 'Shutt up: Bubonic Plague and Quarantine in Early Modern England', *Journal of Social History,* Vol. 45, No. 3, (Spring 2012), p. 812.

[252] Ibid., p. 810.

[253] Anonymous, *The shutting up of infected houses as it is practiced in England soberly debated* (London, 1665).

[254] R. Sharp-France, 'A History of the Plague in Lancashire', *Transactions of the Historical Society of Lancashire and Cheshire* Volume 90 (1938), pp. 42-43.

constables of Moston. However, Fyton appears to have been determined to escape, and he broke free of the chains in the cabin, 'utterly denyeth to be obedyente and to be governed'. An order for his arrest was issued, and, if found, Fyton was to be imprisoned 'tyll further order be taken'.

On 1 September 1631, the Lord President of the Council of North, Thomas Wentworth, wrote a lengthy letter to the Lord Mayor of York expressing his concern about the progress of the disease in the city, and providing a range of instructions for the town magistrates to follow. He also condemned one individual for breaking his quarantine order, although from the tone of the letter it is clear that he held the authorities, rather than the offender, largely responsible for this lapse in control. 'In particular', he wrote, 'I desire a butcher heare in Marigate, whose name I will send you, who is knowne to have beene in companie with one on Sundaie last past that is now shutt vpp, may be instantly removed to some such place, least he might proue dangerous to his neighbours'. The butcher in question was Harry Wilkinson, who had given his word to one Alderman Croft, 'whose remissness', Wentworth wrote, 'I much blame', that he would return to his home and not leave it without licence. Nevertheless, he was spotted outside of his home until 10 o'clock at night, and then came home drunk.[255] Wilkinson was not the only York resident who rebelled against the policy of quarantine. The following day, on 2 September 1631, a tailor named Richard Atkinson had received a family member of Alderman Lawne into his home, despite the fact that they had arrived from a part of the city which was at the time grievously infected with plague. Consequently, Atkinson and his family were quarantined, and their house was shut up. The front door was locked, the 'Casements naled vpp with little nayles', his back door was locked up 'w[i]th a hang lock on yt' and a watchman was instructed to watch the house by day and night. Atkinson, a man of some standing, was outraged by the order. He 'gave very obstinate wordes' to the Lord Mayor and aldermen, and 'sayd he wold not have his dore shutt vpp' but argued instead that he should be 'trusted he should keep his house and family as safe and Cleare as any of them'. He accused the Lord Mayor and aldermen of bringing 'great scandall on the citty', and maintained that 'he could governe as well as any of

---

[255] EYLA, Y/COU/1/1/35, f. 116r.

them and that he could have done wiselyer himselfe'. He was fined thirteen pounds, six shillings and eight

pence for his outbursts.[256]

Meanwhile, back in Lancashire, a statement submitted to the Quarter Sessions in Wigan on 3 December 1631

describes the actions, and the motivations, of two women who broke free of quarantine. The statement was

provided by Edmund Pickeringe, constable of Baley, and was presented to John Osbaldeston esq., a Justice of

the Peace. Pickeringe informed Osbaldeston that one Marie Linley, despite being instructed to keep to her

home by Mr James Lowde, high constable, 'did break forth contrary to their comandement and went a

begging to Mr Minckleys house and divers other neighbour houses'. She had also harboured one Richard

Dobson, 'a man of evill caringe' who was suspected to have been in Preston, where the plague was.[257] In fact,

Dobson had already confessed to breaking quarantine one month earlier.[258] Dobson had been shut up in the

home of Roberte Howerth, but had 'gott awaie from the said house by stelth'. He was discovered, detained,

and brought back to the house and placed under a strict watch. By morning, however, Dobson had made a

second escape. It seems that from here, he had travelled to the home of Marie Linley, who had attempted to

conceal his presence from authorities. In same petition, the informer also revealed that Margaret Howorth,

'contrarie to the said Mr Lowde...comaundement', 'went forth to Lawrence bannesters house to spin'.[259]

Lastly, in addition to instances where individuals broke *out* of quarantined dwellings, there are also some rare

cases of individuals breaking *into* infected homes. According to the diary of Robert Birrell, Burgess of

Edinburgh, for example, William Ker, a smith, was sentenced to hanging in Edinburgh in December 1604 for

the 'opening of honest mens lockis and dores, they being out of the town fled for the pest'.[260]

The York cases, whilst detailed, do not provide much indication concerning the motivation behind the

offenders' choices to break quarantine. We can therefore only speculate that Harry Wilkinson, the butcher

---

[256] Ibid., ff. 117v-118r.
[257] LA, QSB/1/97/70.
[258] LA, QSB/1/97/67.
[259] LA, QSB/1/97/70.
[260] John Graham Dalyell (ed.), *Fragments of Scottish History* (Edinburgh, 1789), p. 62.

who had spent time in the company of the infected, and was later found to be drunk despite strict instructions to keep to his house, may have believed, contrary to the view of the authorities, that his socialisation with the infected did not pose a serious risk to himself or his community. This was arguably also the view of Richard Atkinson, the tailor who had received friends and family member members into his home from suspected places. The Lancashire cases, however, concern individuals from poorer backgrounds, who seem to have been primarily motivated by desperation, and the will to survive. Marie Linley broke free to beg whilst Margaret Howorth broke free to spin. Both women, therefore, broke their quarantine in order to earn a living. Even Phillip Fyton, the Lancashire labourer found roaming across the county and squatting in his neighbours' outhouses, may have been searching for work at a time when usual sources of income were scarce.

The Threat to Public Order and Discipline

Authorities were equally, if not more, concerned with acts which threatened public order and discipline. As Karen Jillings has argued, 'social control was not only a consequence but also a very real intention of [plague policies] given that plague threatened public order as much as public health'.[261] It is here that we can arguably see the clearest and most compelling evidence to support Foucault's analysis of the 'political dream'. The below examples demonstrate that governments were preoccupied with the maintenance of order and 'good' behaviour during epidemics. In his assessment of crime and punishment in sixteenth-century Aberdeen, J.R.D. Falconer argues that, in the eyes of the Burgh elites, the impact of petty crimes extended far beyond their immediate negative consequences. All illegal activity threatened the community by undermining order and discipline. However, during an outbreak of plague, it was not simply that disorder and unruliness challenged authority or threatened a town or city's ability to function as normal. These acts were considered by many in the early modern period to be *causes* of disease. Certainly from a religious perspective, immoral behaviour

---

[261] Jillings, *Urban History of the Plague*, p. 54.

was thought to be a direct cause of plague. It was sent by God as a punishment for sin. The Puritan cleric

Robert Jenison desired to make Newcastle and other towns 'Cities of God' in order to avert the 'overflowing

scourge of plague'.[262] It may be argued, therefore, that governments wielded their powers to eliminate

disorderly behaviour as part of a calculated effort to bring the plague to an end. At the very least, it should be

acknowledged that the maintenance of public health and public order were inextricably linked.

The first offence included in this category is the spreading of false information. For early modern authorities,

accurate record-keeping was one of the main defences against the spread of disease. As we have seen earlier

in this chapter, plague policy in both England and Scotland was largely reactive, rather than preventative.

Authorities responded quickly to reports of possible infections. Knowing when, or where, an outbreak was

worsening allowed them to respond as quickly and efficiently as possible. The spreading of false information,

however, not only hindered this process but also held the potential to cause unnecessary panic. On 19

September 1631, it was reported that a Mr Hopkinson did 'rayse a scandall' by saying that two men had

arrived in York from Huntington, where the plague was spreading, via the gateway at Bootham Bar, as the

watchmen had been absent. When 'noe such matter' was found, he was fined twenty shillings.[263] Similarly,

the following week, a sadler named John Storrie, 'to the great scandall of this Citty' had, 'in a very lewd and

evill manner', fled from his home with his wife and child to the country, reporting that his house in York was

infected with plague. When this turned out to be untrue, he was fined the large sum of six pounds, thirteen

shillings and six pence. These examples attest to the power of words to cause panic within a town, and

demonstrate the ways in which authorities clamped down on the use of this power. The people of York,

however, certainly maintained their right to express their views. In one particularly amusing example, Edward

Hall, a spurrier from York, when asked by the constable 'how all did in his house' responded that 'all were in

health, but his Catt was sick'. He was, rather harshly, fined ten shillings for his flippant reply and was

---

[262] Robert Jenison, *The Citie's Safetie, or a Fruitful Treatise (and useful for these dangerous times): a treatise on Psalm 127.1* (1630) pp. 28, 147-8.
[263] EYLA, Y/COU/1/1/35, f. 123v.

committed to Monk Bar until he paid the fine.[264] Some of the indictments are richly detailed. For example, on

5 September 1631, Francis Cotton, a constable, made an oath confirming that he was patrolling the area near

Micklegate Bar at about 10 or 11 o'clock in the evening when he met one Francis Laycock. Cotton approached

Laycock to tell him that he should not be out so late, to which Laycock replied that 'he Cared not a fart for

him', 'he had nothing to doe there' and also 'bidd a fart for my Lord Maior and his brethren'. The situation

became more serious when Laycock then threatened to 'thrust his knyfe in him', if Cotton attempted to

meddle in his affairs. Laycock was placed in the stocks where he was set by the neck at the pillory and openly

whipped. Three days later, Isabel Hutchinson, the wife of a local blacksmith, was similarly whipped openly in

the street for saying that 'yf the sicknesse wold come in fast enough, she wold run amongst the thickest of

them'.[265]

The threat of violence could also turn into actual acts of violence towards authorities. In the records of the

Lancashire Quarter Sessions, there is a reference to a yeoman named George Houghton, who, on 22 August

1605, assaulted a constable named George Abbott, then engaged in collecting the money taxed for the relief

of the poor and plague-stricken in Manchester and Salford.[266] It remains unclear exactly why Houghton

objected to the tax. His status as a yeoman suggests that this act may not have been exclusively financially

motivated, at least, in theory he should have been able to pay it. Perhaps, then, his actions reflected a

broader expression of dissatisfaction against the government's response to plague. A more detailed case of

violence against plague workers can be found in the records of the Quarter Sessions Court in Chester. On 9

July, 1650, it was reported that a man named John Steene had drawn his knife and threatened to stab another

man, Dennis Brayne, if he did not move from his post. Brayne was a maimed soldier who had fought in

Ireland, and was appointed to keep watch should individuals from infected places attempt to enter the town.

Steene called Brayne an 'Irish Rogue, a base discended slave a man not fitt to lyve in this towne' and then

assaulted him. He 'fell upon him, pulled a great handfull of haire from off his head, drew his knife and swore

---

[264] Ibid., f. 150r.

[265] EYLA, Y/COU/1/1/35, f. 121r.

[266] James Tait (ed.), *Lancashire Quarter Sessions Records Vol I, 1590-1606* (London, 1917), p. 287.

by God's blood and divers other excerable oathes hee would cutt all [Brayne's] flesh off his bones'. Brayne, having the use of only one hand, was quickly overcome by Steene, who 'gave him many blowes, swore extreamely hee wold bite [his] nose off, and did often offer to do it, and would have done if not the same neighbores then come forth of theire beds and prevented him'.[267] The use of the insult 'Irish Rogue' here suggests that this act of violence may not have been exclusively motived by resentment towards the plague measures implemented in the town. There were clearly some political and religious factors also at work here. However, it was not uncommon for watchmen to be assaulted during the course of their work guarding city walls or infected dwellings from potential sources of infection. In York in July 1603, for example, Michael Scarr assaulted watchmen after they refused entry to individuals whom Scarr would have let in.[268] These assaults were not limited to watchmen, either. On 18 July 1665, Walter Ettrick, one of eight individuals appointed to prevent the spread of plague in Sunderland, wrote to John Sudbury, Dean of Durham and local Justice of the Peace to complain about the difficulties in carrying out their tasks. Ettrick complained that John Litle of Sunderland 'hath much abused the constable in this time of danger because they were ordered by us to shutt vp his sisters house'. The order to shut up the home of John Litle's sister had been given because she had 'stripped of the Cloathes of the shipp man who first dyed of plague and still remains in a dangerous Condicon'.[269]

The last offences in this category are those which were not directed towards authorities, but still considered by them to be a threat to public order. These are the acts which threatened the morality of the town, at a time when it was believed that a strict adherence to moral behaviour might free them from the disease. For example, on 26 September 1631, one Mr Coke was publicly whipped for 'dancing & fidling...in this dolefull & dangerous tyme' near Walmgate Bar in York.[270] This was apparently not enough of a deterrent as just four

---

[267] J.H.E. Bennet and J.C. Dewhust (eds.), *Quarter Sessions Records for the County Palatine of Chester 1550-1760* (1940), p. 142.
[268] EYLA, Y/COU/1/1/32, f. 281r.
[269] Durham University Special Collections and Archives, Cosin Letter Book 1B, 126.
[270] EYLA, Y/COU/1/1/35, f. 127v.

days later, seven men were fined five shillings each for 'dancing drinking and revelling' in a chamber during the night 'in these heavisome times of the infection'.[271]

Either out of fear of losing control over the populace or the fear of allowing the plague to continue by encouraging God's wrath, authorities sought to stamp out all sources of disobedience and disorder. Residents of the towns affected by plague, however, used their voices and actions to express their dissatisfaction and anger towards authorities and their draconian polices. They voiced their disdain through flippant responses and threats towards constables, and assaulted the plague workers who used their increased powers to enforce plague policies such as curfews and quarantine. Some of these offences, however, once again suggest the overwhelming desire to maintain social networks at a time when official medical guidance endorsed isolation and exclusion. The actions of the seven men fined for dancing, drinking, and revelling, for example, may be interpreted as a desperate desire for social interaction and friendship, and John Litle's actions towards the constable may have been motivated by the desire to not lose contact with his sister whose home was about to be shut up.

Hindering Emergency Measures

The plague measures outlined above created an enormous amount of extra work. Local authorities and the plague workers they employed could not always be relied upon to complete this work efficiently. Some failed in their duties to a criminal degree, and faced fines and even imprisonment for their negligence. For example, on 1 June 1604, Anthonly Gelderd, an armorer of York, was fined after he 'did not onelie obstinatelie refuse to watch' a house that was feared to be infected but also spoke 'evill wordes' to the constable who had instructed him to do so. Gelderd had then also refused to help the constables to remove a woman to a pesthouse. He confessed his crimes, and submitted himself to the order of the court, who ruled that his offences were 'thought to be verrie great & not mete to be vnponished', 'especiallie', they continued, 'in this

---

[271] Ibid.

tyme of visitacon for the example of others'.[272] In a similar case, also from York, in March 1632, a cordiner, Richard Fall, was fined 12 shillings for refusing to help a constable to remove a sick man from the street.[273] It is unclear in this case, however, whether Fall was employed as a plague worker, or if the constable had simply asked a random resident to assist him, and the resident had refused. Two constables in Yarm, George Sadler and Will Reade, were brought before the quarter sessions court to answer for their 'negligence in their office' during the time of the visitation. They were accused of 'neglecting the setting and keeping of the watch', 'for not punishing…rogues', and for being absent many times 'when great occasion for his Ma[jes]ties service did happen, to the evill example'.[274] Lastly, in a somewhat bizarre example, on 12 January 1637, a constable was criticised at the quarter sessions court in Yorkshire 'for compelling a poore old blinde man, not able to see the light of a candle, to watch the whole towne in his course of vicinitie…in the time of the visitation…to the great dainger of the inhab[itan]ts' of the town.[275]

In addition to being negligent in their duties, some simply absconded altogether. It was well-understood by contemporaries that the best way to avoid the plague was to flee infected areas. The individuals responsible for enforcing plague measures such as local magistrates, aldermen, baliffs and bailies, were often of sufficiently high wealth and social status that they could afford to flee infected towns and cities, although this meant abandoning their duties in the process. The York corporation records include repeated references to authorities to return to the city. Alderman and magistrates were threatened with fines and other punishments if they refused to return to their posts. As early as 9 July 1550, all aldermen and sherrifs who had fled the city were ordered to return or face a £20 fine, the proceeds of which would be put towards the relief of the infected.[276] During York's most severe outbreak, in the summer of 1604, the corporation sent out a general order instructing all alderman to remain in the city, and ordered those who had already fled to return. When this general order seemingly failed, the corporation was forced to send out individual letters cashing up

---

[272] EYLA, Y/COU/1/1/32, f. 331v.

[273] Ibid., f. 164.

[274] J. C. Atkinson (ed.), *Quarter Sessions Records Volume* 1 (London, 1884), p. 199.

[275] J. C. Atkinson (ed.), *Quarter Sessions Records Volume* 4 (London, 1886), p. 69.

[276] A. Raine, (ed.), *York Civic Records,* Vol. V (1548-1558), (The Yorkshire Archaeological Society, 1944), p. 41.

absent aldermen. One letter, written to Mr Christofer Consett, informed him of the 'greivous infection which doth dailye increase', and argued that the role of authorities during this difficult time was 'to advise and governe carefullye…and not to care for ourselves onlie and lett the poore and visited here by vnprovided for and not governed'.[277] It seems that some magistrates even tried to pay their way out of the city. In a letter addressed to Sir Robert Watter, the mayor of York, Thomas Herbert, stated that 'there are diverse of vs that have offered to give lardge somes of money to have licence to go (during this visitacon) into the contrie for the saffetye of ther lives'. These licences would not be granted, however, as 'it would not onelye be the overthrowe of this Cittye, but also be to the great discredit of vs the Magistrates'.[278] On 16 July 1604, an order was made once again instructing all sherrifs, chamberlains and constables who had thus far fled into the country to return to the city. Refusal to do so would result in a £100 fine for sheriffs, a £40 fine for chamberlains and a £20 fine for constables.[279] This order was then repeated on 21 September 1604, when the fines were extended to include a £40 fine for absent aldermen and a 20 shilling fine for common council.[280]

Plague years were an exceedingly expensive time for authorities, who were responsible for ensuring the safety of their poorest inhabitants. Most authorities would raise additional funds from emergency taxes or assessments. Refusal to pay such assessments was, in many towns, treated as a criminal offence. For example, there is a reference in the Yorkshire quarter sessions records relating to six people, John Gill, 'Hanforth's wife', William Bruswood, Will Kirkby, Tho[mas] Foxe and John Scotson, all of Thirsk, who refused to pay the tax imposed on them for the relief of the poor infected, 'contrary to Christianity'.[281] In York, Sir Thomas Watter, who had the previous year been reprimanded for his absence from his duties, was committed to the custody of the sheriff after he refused to pay an assessment to the value of £15 6s 8d for the poor infected. It was not only the general tax that people refused to pay. Those who could afford to pay were ordered to cover the costs incurred during quarantine, i.e., the cost of watching or the cost of essential provisions like meat, drink

---

[277] EYLA, Y/COU/1/1/32, f. 339r.
[278] Ibid., f. 340r.
[279] Ibid., f. 340v.
[280] Ibid., f. 341r.
[281] J.C. Atkinson (ed.), *Quarter Sessions Records Volume 1*, (1884), p. 3.

or medicines. It seems that not everyone was keen to cover these costs, however. For example, in April 1632, Thomas Pratt a saddler, had refused to pay 11 shillings to cover the cost of watching whilst he was quarantined within his home the previous year. The court ordered that a warrant was made to levy the value from his goods.[282]

Far from demonstrating a Foucauldian 'literary dream' of absolute anarchy, we can see that, in general, authorities like the Burgh council and the York corporation managed to maintain some level of law and order as they continued to seek out and punish offenders even during severe outbreaks of plague. The examples provided above offer also some insight into the motivation behind the breaking of plague policies. They show that when people were found to be breaking plague measures, in general, they did so out of desperation, or the desire to maintain essential relationships and social networks. The individuals who broke free from quarantine, concealed loved ones and continued to visit the sick contrary to the express orders of authorities did so out of a desire to maintain the networks that had supported and sustained them throughout their lifetimes. The fact that people fought to maintain these networks despite the fear of both the disease and the threat of punishment provides compelling evidence that the idea of 'good neighbourliness' was deeply entrenched within early modern society. Crimes committed by women, in particular, reflected the need to survive, as many can be seen selling infected goods, begging without licence, or travelling to homes to spin in order to generate income. However, some of the examples above, particularly those from York do suggest that people did not respond well to the daily intervention of authorities in their lives or the increased powers they held to restrict their movements. People showed their discontent through both their deeds and words.

Conclusion

For Foucault, the historical and conceptual importance of plague was that it brought the limits and responsibilities of government into sharpest relief. By combining the evidence gleaned from two layers of

---

[282] EYLA, Y/COU/1/1/35, f. 164v.

Gaskill's hierarchy of sources, the 'normative' and the 'administrative', we can assess how far governments utilised the conditions created by outbreaks of plague to expand their powers. The evidence outlined above suggests that, in theory, we can see an expansion towards total control. Central governments increased the powers of local authorities, and in turn, local authorities acted above and beyond their jurisdiction. However, in many ways, not all authorities used these powers to the full extent permitted by the law. The law in England, for example, sanctioned the use of violence on the quarantined and the execution of individuals found to be wilfully breaking plague orders. However, we have seen an abundance of examples of such behaviour above, many examples which threatened the health and safety of the town, and not one of the above cases warranted execution as punishment. This chapter has also, therefore, reinforced the importance of looking at several 'layers' of archival material. Certain policies may be announced, and punishments may be sanctioned, but without looking at how these policies were actually enforced, we cannot know how far intentions manifested into action. This is just one of the many ways in which our understanding of plague can be altered by shifting our perspective from the elites creating the policies to the people that they policed. By shifting our perspective, we learn that Foucault's dichotomy of political and literary 'dreams' is too simplistic to accurately explain the impact of plague policies and the complex motivations behind them.

Chapter Three: 'Dishonourable trades'?
Plague industries in early modern English and Scottish Towns

> Only the intendants, syndics and guards will move about the streets and also between the
> infected houses, from one corpse to another, the 'crows' who can be left to die: these are
> 'people of little substance who carry the sick, bury the dead, clean and do many vile and abject
> offices'.[283]

The previous chapter surveyed the attempts of authorities to prevent and control the spread of the disease.

But how were these policies logistically put into practice? And by whom? The answer to these questions

reveals networks of individuals engaged in a range of official positions designed to meet the increasing needs

of their communities. The day-to-day management of plague outbreaks depended on the efforts of hundreds

of individuals working together as part of coordinated 'plague industries' at the parish level.[284] These 'crows'

undertook a wide variety of essential roles. The 1578 London plague orders, for example, recommended the

appointment of 'certaine persons to viewe the bodies of all such as shall die', and others 'to prouide and

deliuer all necessaries of victuals' , as well as 'two or three watchmen...which shalbe sworne to attend and

watch the house, and to apprehend any person that shall come out', and 'honest persons that...shall collect

the summes assessed'. Provision was also made for the burial of plague victims and the cleansing of infected

goods.[285] Who were these individuals? And were they, as Foucault suggests, 'left to die'? The following

chapter will explore the interconnected roles of cleansing, burial, distribution and plague policy enforcement

across northern England and Edinburgh in order to reveal how plague policies were implemented on the

ground. It will describe in detail the roles and responsibilities of the individuals tasked with ensuring that their

communities remained functional throughout outbreaks of plague and demonstrate how these roles could

---

[283] Michel Foucault, *Discipline and Punish: The Birth of the Prison,* Translated from the French by Alan Sheridan, (New York, 1977), p. 195. Here, Foucault is quoting from a late seventeenth-century French ordinance which outlined some of the measures to be taken when plague appeared in a town.

[284] Unlike many European cities, which supplemented their existing teams of permanent public health workers with temporary staff during plague outbreaks, England and Scotland had to recruit new personnel to respond to each epidemic.

[285] Anonymous, *Orders, thought meete by her Maiestie, and her priuie Councell, to be executed throughout the counties of this realme, in such townes, villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same* (London, 1578).

vary from town to town. Whilst some scholars have investigated individual roles, largely using evidence from

London or other European cities, there has been no attempt to bring these tasks together in a single study,

thereby investigating their impact across a range of administrative and legal structures.[286]

The term 'plague industry' was originally coined in 2013 by Neil Murphy in his work on plague management in

northern French towns. Here, he defines the term as the 'creation of official positions specifically to cope with

the impact of epidemics'.[287] Within this French plague industry, Murphy describes provision for the burial of

the dead and care for the living, body and soul. He notes the employment of burial attendants on short-term

contracts, members of religious orders who provided pastoral care to the infected in return for victuals and

money for the upkeep of their buildings and the employment of barber-surgeons to phlebotomise plague

victims as it was believed that the removal of contaminated blood could halt the progress of the disease.[288]

The following chapter explores how this term might be applied to towns in northern England and Edinburgh.

By exploring the same roles performed across multiple administrative and legal structures, we can take the

concept of the plague industry further by considering the gendered and social aspects of these positions. As

will be revealed, multiple plague industries existed across England and Scotland. These industries

encompassed roles ranging from official, salaried positions to the under-valued or unpaid work of neighbours

and friends. Despite the relatively uniform policies released by central authorities, this chapter will show that

each administration adopted their own unique approach to the employment of plague workers. For example,

the same role generally performed by lower-status women in one town might be undertaken by middling-

level men in another. Work that was poorly renumerated or overlooked under one administration, could be

acknowledged and rewarded under another. The key to understanding these disparities, I argue, lies in

contemporary notions of 'honourable' and 'dishonourable' labour, particularly within the context of gender.

---

[286] See, for example, Richelle Munkhoff, 'Searchers of the Dead: Authority, Marginality, and the Interpretation of Plague in England, 1574-1665', *Gender & History,* Vol. 11, Iss. 1, (1999), pp. 1-29; Jane Stevens Crawshaw, 'The Beasts of Burial: *Pizzigamorti* and Public Health for the Plague in Early Modern Venice', Social History of Medicine, Vol. 24, No. 3 (2011), pp. 570-587.
[287] Neil Murphy, 'Plague ordinances and the management of infectious diseases in northern French towns c.1450-c.1560', in Linda Clark and Carole Rawcliffe (eds.), *The Fifteenth Century XII: Society in an Age of Plague* (Suffolk, 2013), p. 145.
[288] Ibid., pp. 145-146.

Dishonour was a broad concept in early modern Europe. Kathy Stewart and others have explored the concepts of honourable and dishonourable trades in their work on early modern Germany. Here, dishonourable status could be legally imposed and even passed down from parents to children. It was applied to vagrants, criminals and prostitutes but was also a fundamental condition of certain trades like executioners, skinners, shepherds, bailiffs, bath masters, linen weavers and gravediggers. It had a range of real-world consequences including exclusion from honourable corporate society and the guild system.[289] Stewart found that in early modern Augsburg, the complex system of honour and dishonour was connected to an individual's trade rather than to their gender. Jean H. Quataert, by contrast, found that these concepts were closely linked to gender, and, in particular, the distance from the household economy.[290] Quataert showed that linen weaving, in contrast to the more highly specialised wool weaving, remained tied to household production and women's work, and it was this connection which contributed to the dishonour of the craft and the strikingly different values placed on each pursuit. Similarly, Merry Wiesner has suggested that competition by female medical practitioners contributed to the dishonour of bath masters and barber-surgeons.[291] The concept of honourable and dishonourable trades was not as clearly defined in early modern England and Scotland as it was in Germany. There were no legal ramifications for those working in typically 'dishonourable' trades and the status and stigma of dishonour was not inherited or ascribed by birth. However, there were undoubtedly social consequences to working in undesirable roles. Building on the work of Quataert and Wisener, this chapter argues that in the context of the plague industry, the perceived honour or dishonour of a role was inextricably linked to the gender of the worker. Whilst the nature of the task itself – particularly the fear of close contact with the disease - certainly contributed, one of the main contributions of this chapter lies in the argument that the same role could be perceived and valued differently depending on whether it was completed by male or female workers. In this sense, it aligns closely with the work of Judith

---

[289] Kathy Stewart, *Defiled Trades and Social Outcasts: Honor and Ritual Pollution in Early Modern Germany* (Cambridge, 2000).
[290] Jean H. Quataert, 'The Shaping of Women's Work in Manufacturing: Guilds, Households, and the State in Central Europe, 1648-1870', *The American Historical Review,* Vol. 90, No. 5 (1985), pp. 1122-1148.
[291] Merry E. Wiesner, *Working Women in Renaissance Germany* (New Brunswick, 1986), p. 190.

Bennett, whose study into women's involvement in the commercial production of ale and beer found that women's labour remained consistently low in status and poorly remunerated between 1300 and 1600.[292]

The chapter is divided into three main sections. The first section explores the responsibilities of burial and cleansing, two roles which best demonstrate this phenomenon of gendered honour and labour. The second section explores the roles of distribution and plague policy enforcement, two roles which bring us closer to the lived experience of the plague, providing a missing link between policy and provision and helping to shed light on how policies were enacted on the ground. Finally, the last section examines how workers across the plague industry were clothed to gain insights into their public perception. This final section also evaluates the dress and role of the 'plague doctor', a figure now synonymous with the disease, and notes the lack of substantial or convincing evidence of their existence in Britain. Ultimately, this chapter increases our understanding of responses to epidemic disease outside of London, allows us to gain a sense of the lived experience of contemporaries and offers important insights into the history of gender and labour.

Part One - Burying the deceased and cleansing the homes of the infected

3.1 Buriers of the dead

The burial of plague victims was an essential part of plague management, especially in busy urban environments where even the sight of an infected corpse was believed to transmit the disease to others.[293] An anonymous eighteenth-century pamphlet describes the horror of seeing the deceased lain out in the streets:

---

[292] Judith M. Bennett, *Ale, beer and brewsters in England: women's work in a changing world, 1300-1600* (Oxford, 1996). See also Judith M. Bennett, *History Matters: Patriarchy and the Challenge of Feminism* (Philadelphia, 2006).

[293] Contemporaries also believed that people could literally be frightened to death. Defoe wrote that 'it was seldom that the weekly [mortality] bill came in but there were two or three put in frighted; that is, they may well be frighted to death. But besides those who were so frighted as to die upon the spot, there were great numbers frighted to other extremes, some frighted out of their senses, some out of their memory and some out of their understanding'. Daniel Defoe, *A Journal of the Plague Year* (London: The Folio Society, 1960), p. 64.

'These objects were so frequent when the plague became raging, that there was scarcely any passing in the streets but several dead bodies would be lying on the ground: at first, people would stop, and call to the neighbours on such occasions, afterward, no notice was taken of them; if a corps was found, passengers would cross the street, if in a narrow passage, go back again, and seek some other way. The bodies were left till the officers came to fetch them away, or till the drivers of the dead-carts took them up at night, and those undaunted officers failed not to search their pockets, and strip the well-dressed'.[294]

In his *Directions for the prevention and cure of the plague fitted for the poorer sort,* the physician and anatomist Thomas Wharton (1614-1673) outlined some guidelines for the burial of plague victims:

Also that there be especial care had about Burials of the Dead of the Plague. First, that none be buried in the Churches. Secondly, that they be buried very deep in the earth. Thirdly, that no Grave that hath been made since the first appearing of this Plague be digged up, or another made very near it, lest the venemous reeks of the body break forth at the place opened, and infect the Air. In case there be not room enough in the Church-yard, some other ground-must be allotted and provided without the City and Suburbs, where the Dead may be buried distinctly, and not heaped one upon another, because when many are buried together, their putrid ferment will easily grow to that strength, that the Earth will hardly be sufficient to suppress the steems of it. Fourthly, that the constant Bearers be admonished not promiscuously and needlesly to mingle themselves with others, nor entertain discourses with heedless Boys and Children, who may easily receive harm from them.[295]

Like most plague industry tasks, the burial of the deceased was extremely dangerous. W. Kemp noted in his treatise on the plague that 'there have been Bearers and Buriers that have stood in need of the same Office to be done for them, which but very lately they did do for others'.[296] They used a cart or a barrow to transport the deceased to their graves, and likely informed others of their presence by ringing a bell and by calling 'Cast

---

[294] Anonymous, *An historical narrative of the plague at London, 1665; with an abstract of the most common opinions concerning the causes, symptoms and cure of that fatal disorder. And some account of other remarkable plagues, ancient and modern* (London, 1769).
[295] Thomas Wharton, *Directions for the prevention and cure of the plague fitted for the poorer sort* (London, 1665).
[296] W. Kemp, *A brief treatise of the nature, causes, signes, preservation from, and cure of the pestilence collected by W. kemp* (London, 1665).

out your dead' or 'Haue you anie dead bodies to burie'.[297] The impression given by contemporary English literature is that they were not well-liked.[298] Thomas Dekker described them as 'nasty and slovenly' whilst Wither referred to them as 'shameless undertakers'.[299] This may have been due to the fact that some believed that corpse bearers would steal from the deceased. It also may have been due to their close proximity to the disease. Buriers of the dead shared the stigma of plague alongside its victims. In Salisbury, for example, bearers of the dead had to swear to 'carefully shun and avoid … coming into company not infected with the plague' and to always carry a red staff in their hands so others may identify and avoid them.[300] In York, the individuals instructed to remove the deceased from the town were instructed to 'carie in their hands a whit rodde of a yard longe' and to 'have a light before theym...to thentent they shalbe knowne from others'.[301]

The duties of buriers of the dead were frequently combined with other plague industry roles, such as cleansing. In May 1569, for example, civic officials in Edinburgh ordered that the cleansers meet each night at 9 o'clock throughout the summer months at the town wall gate near Greyfriars and remain there until the baillies or officers arrived to collect them. Thereafter, the cleansers would enter the homes of the infected to cleanse their dwellings and the goods. Before this labour could commence, however, they were instructed to bury any dead, and remove infected persons to pesthouses. This work continued until 4 in the morning, when a small drum or 'suasche' would be struck, possibly to alert the town that they had finished their work for the evening, and it was now safe to begin their day.[302]

In contrast to Italian cities such as Venice, where body clearers were employed by secular authorities on permanent contracts, such positions in towns in northern England and Scotland were provisional and were

---

[297] John Davies, *Humours Heau'n on Earth; With The Ciuile Warres of Death and Fortune. As also The Triumph of Death: Or, The Picture of the Plague, according to the Life; as it was in Anno Domini. 1603,* (London, 1609), p. 223; Thomas Nashe, *The Vnforvnate Traveller. Or, The life of Iacke Wilton* (London, 1594).

[298] See F.P. Wilson, *The Plague in Shakespeare's London,* p. 46.

[299] Thomas Dekker, *Gods Tokens of His Fearefull Judgements* in F. P. Wilson (ed.), *The Plague Pamphlets of Thomas Dekker* (Oxford, 1925), p. 144; George Wither, *Britain's remembrancer containing a narration of the plague lately past, a declaration of the mischiefs present; and a prediction of the judgements to come* (London, 1628), p. 112.

[300] Slack, *Impact of Plague,* pp. 273-4.

[301] A. Raine (ed.), *York Civic Records,* Vol V, The Yorkshire Archaeological Society (1944), p. 72.

[302] ERBE, Vol 3, p. 261.

filled only during outbreaks of plague.[303] York was among the first towns in England to meet the need for

salaried buriers of the dead appointed in the mid sixteenth century.[304] Then, on 22 April 1552, the corporation

agreed to appoint four individuals to 'wynde, beare and burie all suche corpses as herafter shall chanse to die

from the plague within thie Citie or suburbes'. The manuscript indicates that there was some discussion about

payment per corpse wound, born and buried, but the remainder of this sentence is blank, and no amount is

given. The following sentence, however, states that the buriers were to receive a minimum of twenty pence

per week for their services. This, writes Palliser, equates to approximately the average wage for an ordinary

labourer.[305] They were instructed to 'keep them selfs in a solytarie place from company' in designated houses

'at the common cost' at 'Tofte green ende', a street across the river away from the city centre. They were

instructed to be 'ready at all tymes' to bury corpses 'without dylay' and, like the Edinburgh plague workers,

required to sweep and cleanse the infected dwellings and to burn the clothes and rubbish within.[306]

The burial of plague victims is also the first instance I encountered that suggested that there were

discrepancies in gender representation within the plague industry. Whilst in England, this role appears to have

been carried out exclusively by men, in Edinburgh, several women are listed in the Burgh records, some

alongside their husbands, others as buriers in their own right. On 15 October 1568, for example, two men,

Jhone Leggat and Alexander Frensche, and two women, Joney Wylie and Agnes Broun, were appointed to

bury the dead. As one would expect, women were still paid less for performing what appears to be the same

role. The men were to receive £5 per month and the women to receive £3.[307] The following year, Jhone had

seemingly been promoted as when the danger had ceased, the council instructed a 'Jhonn Legait', no longer

simple burier of the dead but now a 'maister of the foull mvre' to be brought home and his outstanding wages

paid.[308] This was not the only instance of upward mobility as a result of plague work in Edinburgh. In 1646,

---

[303] From as early as 1432, the Venetian Republic employed at least two permanent *Pizzigamorti* or body clearers. These were then supplemented by additional temporary workers during plague epidemics. See Jane Stevens Crawshaw, 'The Beasts of Burial', p. 572.

[304] Slack, *Impact of Plague*, p. 202

[305] Palliser, Epidemics in Tudor York, p. 58.

[306] York Civic Records, V, pp. 74-5

[307] EBRE, Vol 3, pp. 253-4.

[308] EBRE, Vol 3, p. 265.

John Dickieson, the overseer in charge of the disinfection of infected houses was 'admitted burgess and gild-brother gratis for his services in plague-time'. [309] The records do not offer any indication as to why the city of Edinburgh decided to employ women, or why they were paid less for the same role. It may have been that the roles were slightly differentiated. The records do not provide much detail concerning the treatment of the dead. It is possible that the women recorded here undertook the work more commonly associated with 'women's work', i.e., washing or laying out the dead, whilst the men handled transportation and burial of the corpses. This would potentially explain the differentiation in pay, as women's work was in general undervalued in this period.

3.2 Cleansers

Cleansing was also an essential part of plague management in the early modern period. Without the proper cleansing of infected dwellings and belongings, 'all other labours are taken in vayne'. The pestilence would return, perhaps even with 'new strength'. These quotes are taken from a 1583 London tract entitled *The duetie of a faithfull and wise magistrate.*[310] It was originally written in Latin by the German physician Johannes Ewich (1525 – 1588) and was later translated into English by John Stockwood. As the title would suggest, the text contains detailed instructions designed to help contemporary magistrates prevent and control outbreaks of plague in their towns. Few details of the methods used by cleansers to disinfect households now survive, although it was universally regarded as an essential defence against the spread of the disease. Chapter six of Ewich's text, 'Of the cleansing of houses, and things infected', allows us to at least gain a sense of the practice of cleansing. For example, Ewich recommends that houses be properly ventilated by opening all doors and windows. He suggests that fires of oak, juniper, beech, or willow are kept burning throughout the house and the walls are scraped with 'tooles of yron for the purpose' and be 'done ouer with new lime & whited'. Items of small value such as old garments or clothing of little worth must be cast into the river or burnt, preferably

---

[309] Marguerite Wood (ed.), *Extracts from the Records of the Burgh of Edinburgh, 1642-1655* (Edinburgh, 1938), p. 89.
[310] Johann von Ewich, *The duetie of a faithfull and wise magistrate, in preseruing and deliuering the eommon [sic] wealth from infection, in the time of the plague or pestilence in two books* (London, 1583), pp. 88-9.

away from inhabited areas. Valuable items such as expensive clothing or bed linen must be washed with care, beaten, and hung out to dry in the fresh air. Finally, the house must be purged of infection with the perfumes of dried oak leaves, berries or frankincense and the floors must be strewn with sweet-smelling herbs and flowers such as sage, lavender, basil, rue, rosemary, roses, violets, and vine leaves.[311] Shrewsbury has stated that the final stage of the disinfection process was a prolonged airing and ventilation of the dwelling, followed often by the limewashing of the whole interior. 'Takin' the sey', an assay or trial period of infected goods, was also regularly practised. According to Shrewsbury, a person who claimed that his goods were free of infection could be confined with them for a specified length of time under the surveillance of municipal officials.[312]

In both England and Scotland, cleansing was a role that required some level of expertise. It was professionalised in the sense that there were specific individuals who were known to possess these skills, and their services were repeatedly called upon. It was not uncommon for cleansers to be sent from town to town. On 27th April 1604, amid a severe outbreak of plague in York, the Lord Mayor was requested to source a cleanser and a viewer, 'skilful in viewing infected persons and cleansing infected houses' from Newcastle.[313] Similarly, in Edinburgh, on 10 May 1585, the 'clengers' known as Alexander Fraynche and Jhonn Speir were sent for from the town of Dysart near Kirkcaldy. The pair were sent for 'incais the towne haif ado with thame'.[314] In some cases, international assistance was required. On 17 September 1585, four Flemish cleansers and 'cureis of the pest' were maintained at the town's expense for 15 days to provide their expertise.[315]

Who paid for this essential service? If inhabitants of an infected household had contracted the disease and recovered from it, they were charged by Ewich to cleanse their dwellings themselves. He recommended

---

[311] Ibid., p. 91.
[312] Shrewsbury, *A History of Bubonic Plague,* p. 429.
[313] R. Davies, 'The Plague at York in the Seventeenth Century', *Annual Report of the Yorkshire Philosophical Society* (London, 1873), p. 6.
[314] EBRE, Vol 4, p. 416.
[315] ERBE, Vol 5, pp. 435-456.

magistrates impose a penalty for those who did not undertake these tasks with the level of care and attention they required. This was a policy we can see implemented by the York City Council. On 7 November 1631, the corporation ordered:

> that hardy and his household be examyned vpon oath in what maner they have Clensed their house and to declare the same to the Clenser and take his opinion whither he thinke the same sufficient, and also that Clark be conderred wthall what Course he tooke in Clensing of his house and mr Slinger advise also to be take therein and that vpon Certificatt at the next Court further order may be given.[316]

Here we see evidence of the corporation asking a household to prove, to a 'professional' cleanser, that they had sufficiently rid their home of infection. Often, however, the services of an external cleanser were required, and the cost of these services fell to the local authorities. In Lancashire in 1652, for example, upon finding his child was infected with the plague, one Richard Pemberton fled with his family to a nearby village. Under the cover of night, Pemberton 'carryed away with them all theire Cattell and household goods of any worth, leaving only some Chests, Bedstids and such lyke lumber'. Unfortunately, nearly the entire family, including Pemberton himself, then perished. His house remained uncleansed and, in the eyes of the local authorities, a danger to the town's residents as it was situated on a main road between Warrington and Liverpool. The town had asked permission to sell the remaining contents of Richard Pemberton's home, with the profits intended to contribute 'towards pay fo the Cleansers thereof'.[317] It was not uncommon for authorities to use the contents of an infected home to pay towards the plague effort. As described in the previous chapter, for example, on 22 June 1645, the Kirk Session of South Leith ordered that any money found in a house after it had been cleansed was to be handed over to the baillies who would in turn pass it to the treasurer 'for ye use of ye poor'.[318]

---

[316] Explore York Library and Archives, York Corporation House Books Y/COU/1/1/35, f. 137v.

[317] Lancashire Archives, (hereafter LA), QSP/11/19. Only his eight-year-old daughter was living when the petition was written, and it was noted that she was also infected with the disease.

[318] National Records of Scotland (hereafter NRS), South Leith Kirk Session Minutes (1643-1650) CH2/716/5, p. 112.

In such instances, when all the inhabitants of a household perished, Ewich recommended that these duties be carried out by 'those whome wee before haue named Buriars, Carryars forth, and Sockers or Dressers and layers forth of the dead'.[319] In Ewich's view, therefore, cleansing was an extension of those positions already typically associated with the infected. This is mirrored in the surviving evidence concerning plague cleansers in towns in northern England and Scotland where the role was frequently combined with tasks like burial and watching. A close reading of the surviving evidence reveals stark contrasts in the ways in which these roles were perceived and carried out across these regions. In northern England, cleansers made little impact upon the historical record, their efforts were rarely acknowledged beyond an occasional payment in a will or inventory. The surviving evidence suggests that this was typically a role performed by women. In Newcastle, for example, Ann Bell received five shillings from the executor of John Laverrock's will 'for klensinge his clothes and for her part in klensinge the house' as well as a further shilling 'paid for hot watter to hir severall tymes' and another 'for carr[y]ing his cloths afield' for airing.[320] Also in Newcastle, one Margaret Hudson was referred to as 'a hirelinge…to Clense' a plague-infected home and in York, one Elizabeth Axe was given twenty shillings 'for her paynes takeinge in cleansinge of howses visitted'.[321] The work appears to have been undertaken sporadically, and paid for variously by the estate of the affected household or, in the case of Elizabeth Axe, by the York Corporation.

In Edinburgh, however, cleansing was an office bestowed largely on men of middling status and was accompanied by substantial rewards. In 1585, providing that he was 'trew and diligent' in his duties as a cleanser, Alexander Fraynche was to be rewarded with a house 'mailfrie' or rent-free alongside a lifetime pension.[322] Cleansers such as Will Rae, George Stewart, James Galoway and Alexander Stobo were paid substantial wages in Edinburgh in 1499, 'because thair lawbouris ar heavy and dayngerous'.[323] As this entry

---

[319] Ewich, *The duetie of a faithfull and wise magistrate,* p. 91.
[320] Durham University Library (hereafter D.U.L.), DPRI/1/1636/C5/2-4.
[321] D.U.L., DDR/EJ/CCD/2 Depositions Loose (1637) undated, p. 30; Explore York Libraries and Archives (hereafter EYLA), York Corporation House Books, Y/COU/1/1/32, f. 363v.
[322] EBRE, Vol 4, p. 417.
[323] ERBE, Vol 1, pp. 76-77.

demonstrates, the dangerous nature of the role was acknowledged, and cleansers were well compensated for their sacrifice. Similarly, in the one recorded instance we have of a man performing cleansing duties in York, his responsibilities are clearly outlined, and he received a regular wage that far exceeded the amount paid to the female workers. In September 1631, one Robert Thompson was ordered by the Corporation to come to the city from Walton and was provided with sixteen shillings per week 'for all the tyme of his implyment…and for 3 weekes after'. He was instructed to:

> …doe his best endeavoure helpe and assistance as well for the helpe ease and Care of the sick & visited people within this Citty…as for the washing smoaking airing and Clensing of their houses and Cloths and all other things whatsoever therein Conteyned, and safely keepe the same for the owners therof, without taking conveying or inbesling of them or any of them…and shall lodge in a house that shalbe provided for that purpse'.[324]

Thompson's services were so in demand that he was briefly 'loaned' to the nearby village of Huntington 'to helpe them to Clense' on the condition that they sent someone 'to guyde him thither and to return him back againe'.[325] The language used to describe these individuals within these records is particularly revealing in how it reinforces gendered distinctions. Robert Thompson is consistently referred to as 'the cleanser' in the York Corporation minutes. This designation marks an occupational title, a formal recognition of his role or office, similar to the cleansers in Edinburgh. In contrast, the women cleansers in Newcastle and York are not granted such titles of recognition. Instead, they are described in terms of the work they perform, either in the form of payment of their labours or dismissed as 'hirelings'. The men *are* cleansers whilst the women *do* work associated with cleansing. Despite the similarity of the roles, this distinction underscores how the same role was perceived very differently depending on whether it was carried out by a male or female worker. The absence of occupational titles for women is one of the main drivers behind the 'verb-oriented approach'

---

[324] EYLA, York Corporation House Books Y/COU/1/1/35, f. 123r.
[325] Ibid., f. 126v.

pioneered by Sheilagh Ogilvie and Maria Ågren.[326] There will be a more substantial discussion of this approach in the following chapter on plague nursing, but it is worth acknowledging here that the language used to document women's work has had a profound effect on how their contributions are understood and valued. This verb-oriented approach helps to reveal these biases by highlighting how women's roles were often defined by their actions rather than by titles, contributing to the broader erasure of women's formal economic and professional identities.

Male or female, the role of cleansing was exceedingly dangerous. It put one in direct contact with the dwellings and belongings of the infected. However, it was not only dangerous to the individual. A royal proclamation issued in Edinburgh on 14 April 1645 sought charity after a routine plague cleansing in Kelso went awry. At approximately 8 o'clock in the morning, cleansers were fumigating a house in the town of Kelso when fire took hold. The houses 'on all sides and corners' of adjoining streets, 'in effect', the proclamation states, 'the whole body of the town', were destroyed in the inferno along with the goods belonging to the inhabitants. The text stated that no fewer than 2000 people were left homeless by the blaze which had caused thousands of pounds worth of damage.[327] This incident may have been the motivation behind the decision of South Leith Kirk Session two months later to introduce a new policy that required that a large cask of water was standing by 'qn ever yr be any house to be cleansed…for fear of fur [fire]'.[328]

In terms of their actual duties, the routine of an Edinburgh cleanser is clearly stated in the Burgh records. An entry on 22 September 1518, for example, provides instructions for James Smyth to begin his work at 9 o'clock in the evening and to work throughout the night until 5 in the morning.[329] A later entry, in May 1569, shows that cleansers still met at 9 o'clock throughout the summer months. They were instructed to wait at

---

[326] Sheilagh Ogilvie, *A Bitter Living: Women, Markets and Social Capital in Early Modern Germany* (Oxford, 2003); Maria Ågren, 'Making Her Turn Around: The Verb-Oriented Method, the Two-Supporter Model, and the Focus on Practice', *Early Modern Women* Volume 13, No. 1 (2018), pp. 144-152.
[327] Anonymous, "At Edinburgh the 14. day of April 1645. Forasmeikle as upon the first of this instant, about eight a clock in the morning, certain cleansers in Kelso being cleaning ane house ... the fire took hold of that house, and by occasion thereof, the whole houses of that town from that down-ward ..." *In the digital collection Early English Books Online 2. https://name.umdl.umich.edu/B05250.0001.001. University of Michigan Library Digital Collections.* Accessed March 19, 2025.
[328] NRS, CH2/716/5, p. 113.
[329] EBRE, Vol 1, p. 100.

the town wall gate near Greyfriars and remain there until the baillies arrived to collect them. Thereafter, the cleansers would enter the homes of the infected and cleanse both the dwellings and the goods contained within. The cleansers were overseen by two baillies and their role appears to have been organised into a structured hierarchy, again emphasising that for the duration of the outbreak at least, the male Scottish cleansers held a respected office, as opposed to the women cleansers of Newcastle and York who carried out this work sporadically. We have already been introduced to John Dickesoun who was admitted as a burgess and gild brother for his services to the plague industry. His role during the plague had been an 'oversier of the clenging of the particular houses within this burgh and for overseing the taking away of the fuilye and muck'. The role also came with significant authority, as he was given 'power to him to puinishe the disobeyeris of his ordouris'.[330] Similarly, in November 1574 Jhonn Forrest, an Edinburgh shoemaker, was elected to 'maister clenger' to the infected individuals housed in pest houses on the town moor. His duties included keeping the infected from socialising with non-infected people in the town and cleansing their goods. Forrest was paid the substantial sum of £6 per month for as long as he served the people of the moor. Although the position came with substantial rewards, it also carried enormous responsibility. A note detailing Jhonn Forrest's rise to 'maister clenger' also stated that if he were to fail in his duties, and infection broke out as a result of 'insufficient clengeing', he would be sentenced to death.[331]

More detail concerning the hierarchy and duties of Scottish cleansers can be found in the records of the South Leith Kirk Sessions. The session records that chronicle the events of the 1645 outbreak are unparalleled in their attention to detail. On 17 June 1645, the kirk ordered that cleansers were to receive forty-eight shillings worth of meat and drink every day for their 'ordinarie Intertainment', but warned that they should not overindulge in 'muche stronge drinke'.[332] The authorities in South Leith appear to have distinguished between 'clean' and 'foul' cleansers, although it is unclear what characteristics defined this difference. In general, the term 'foul' appears to refer to something infected or contaminated whilst clean indicated freedom of

---

[330] ERBE, Vol 9, p. 77.
[331] EBRE, Vol 4, p. 30.
[332] NRS, CH2/716/5, pp. 109-110.

infection. There are several instances in the South Leith minutes where individuals are instructed to remove 'foul gear' from infected dwellings and an act of Parliament released from Perth on 2 August 1645 lamented that 'the number of the dead exceeds the number of living, and amongst them it cannot be decernit quha are clean and quha are foulle'. The distinction between 'clean' and 'foul' cleansers, then, could refer to individuals who were themselves infected or had survived the disease, compared to those who were free from infection. However, it is more likely that the distinction indicated differentiated roles. It is possible that the 'clean' cleansers held a supervisory role, whilst the 'foul' cleansers undertook the 'dirty work'. References to 'foul' cleansers certainly revolve around work which put the individuals into close contact with the infected, whilst references to 'clean' cleansers are a little vaguer. On 19 June 1645, for example, Matthew Mitchel promised to lend the kirk his cauldron for cleansing the goods of the infected housed in temporary pesthouses on Leith Links. Before it was sent to the Links, however, 'foul cleansers' were sent to his home to cleanse the cauldron. Foul cleansers also appear to have been responsible for transporting and occasionally burying the deceased. On 8 July 1645, for example, the foul cleansers were ordered to return from the Links 'to carrye out ye dead corpsis out of ye toune...seing some lyeth long unburied'. [333] Interestingly, both the foul and clean cleansers were seemingly provided for. On 4 July 1645, one David Stoup was appointed as a 'constant onwaiter upon ye foul cleansers' and was offered three pounds, six shillings and eight pence per week for his service. Similarly, John Traill was sworn to be 'constant onwaitter upon ye cleane cleansers' and was offered three pounds weekly. Perhaps the extra six shillings and eight pence was given as it was more dangerous to work in close proximity to the foul cleansers than the clean ones.[334]

Up until 6 August 1645, all the names given of those appointed both foul and clean cleansers are male. On this date, however, the record states that twelve women were appointed 'to com to ye towne To mucke out and reid ye houses to be cleanged'. Each woman was paid four shillings for their 'ordinarie intertainment', significantly less than the forty-eight offered to the male cleansers. As this entry is taken from August, at the

---

[333] NRA, CH2/716/5, pp. 117-8.
[334] Ibid. Traill was also instructed to hand over the keys of the houses to the baillie once they had been cleansed.

height of the mortality, one explanation for the sudden inclusion of female workers could be that there were simply no more men to be found to take these posts. The consistent appointment of cleansers is certainly well documented throughout the text, suggesting that they were frequently replaced.[335] If this was the case, the smaller sum offered to the women may show that their work was literally valued less than the work of the male cleansers. Again, rather than referring to the women by their occupation, they are listed simply as 'women' or 'wemen'. They *do* whilst the men *are*. Another explanation could be that women carried out this 'dirty work' throughout the outbreak, clearing the infected homes of rubbish before the male cleansers carried out their work of cleaning and fumigating the properties. Either way, it remains clear that this work was valued less when it was undertaken by female workers. We may then ask, *why* did these women agree to work under such dangerous conditions for so little compensation? The answer, for the Leith cleansers at least, appears to be that they had very little choice in the matter. In October 1645, James Barnes, a local baillie, instructed his officers to 'put all ye women in prisone who will not worke at ye publicke worke qo are ordainit to worke'. The need to threaten imprisonment for non-compliance highlights the undeniable value of the work carried out by these women, although contemporary authorities appear to have viewed it rather differently. Even when performing 'dirty work', the male cleansers were given occupational titles, they were paid appropriately and provided for, to the point where they were even cautioned against overindulging in 'strong drink'. Despite the shared risk of infection across all roles, only the women's work was devalued, suggesting that the honour or dishonour linked to the trade was intrinsically linked to the gender of the worker.

Part Two - Keeping the Diseased: Provision, distribution and plague policy enforcement

---

[335] This certainly appears to be the case for treasurers in Leith, who saw a high turnover during the summer of 1645. On 10 July, there is a reference to treasurer named James Seatone. On 22 July, however, Robert Murro is voted in to temporarily replace Seatone as 'his woman is fallin seek of ye infection'. There is no reference to either Murro or Seatone again, but instead on 26th July, we see William Rudoch named as 'thesuarer'. By 14 August, a new treasurer, Alexander Broune is elected, but this was again short-lived. By the end of August, James Steinsone is chosen, 'Alexr Broune being upo[n] dead bed'. NRS, CH2/716/5, pp. 118-128.

3.3 Distributors

An anonymous pamphlet published in 1769 stated that 'the ruin of the whole city' of London during the 1665-1666 outbreak was caused by the necessity of obtaining provisions. The infection spread into the homes of London citizens 'by means of their servants...who going through the streets, into shops and markets, it was impossible but that they should meet with distempered persons, who conveyed the fatal breath to them, and they brought it home to the families to which they belonged'. 'Some', the author continued, 'suspected that even the provisions were sometimes teinted'.[336] Although written a century after the final major outbreak of plague in England, the quote conveys the critical need to find safe methods for delivering essential provisions such as food and medicine to the infected. This was particularly true of households that had been 'shut up' or quarantined by authorities. Inhabitants of these households were forbidden from leaving their homes for fear of spreading the disease, and many had their doors literally shored up with timber and nails.[337] Hitherto, it has not always been clear how individuals 'shut up' in their homes were able to obtain necessary provisions like food, drink and medicine. According to Evelyn Lord, once a day, water and food were brought and the window shutters were removed so that occupants could receive the victuals. If they had any cash, the coins would be dropped into a bowl of vinegar held out by the watch, and occupants might also use this opportunity to make requests for medicine and other necessaries.[338] However, Lord's work, as stated in her preface, is largely a work of 'faction', and although based on primary archival research, this particular section does not appear to be referenced. In Newcastle, Keith Wrightson found that Ambrose Barnes, after the flight of his master and the death of two maids, remained 'shut up in an empty large house near the Exchange without any living creature besides himself, but they rapt at the door when they brought him meat, and he himself came and took it in'.[339] The following section aims to illuminate who 'they' were, be they neighbours and friends acting out of Christian charity or neighbourly obligation or more formally employed by authorities.

---

[336] Anonymous, *An historical narrative of the plague at London, 1665; with an abstract of the most common opinions concerning the causes, symptoms and cure of that fatal disorder. And some account of other remarkable plagues, ancient and modern* (London, 1769).
[337] For more information on the policy of shutting up, see Kira L. S. Newman, 'Shutt up: Bubonic Plague and Quarantine in Early Modern England', *Journal of Social History,* Vol. 45, No. 3 (2012), pp. 809-834.
[338] Evelyn Lord, *The Great Plague: A People's History* (New Haven, 2014), p. 99.
[339] Wrightson, *Ralph Tailor's Summer*, p. 63.

Unsurprisingly, these individuals are difficult to find in historical records. In his extensive study of the impact of plague in England, for example, Paul Slack found only one example of what he termed 'providers' in London.[340] It has previously been assumed that this was a role that was generally filled intermittently by friends and neighbours living close to those shut up in their homes. It is certainly true that some individuals were offered one-off payments for risking their health. For example, a Lancashire woman was paid 2d for carrying a letter to Liverpool when the town was infected with plague.[341] There are some examples from northern England, however, of a more formalised procedure. In April 1552, for example, the corporation in York agreed that one 'mete and honest persone', or more if required, should be appointed to administer meat, drink and other necessaries to the infected. In return, they were to receive a weekly salary of 8 pence.[342] The 1578 London plague orders also recommended the appointment of 'certaine persons…to prouide and deliuer all necessaries of victuals, or any matter of watching or other attendance'. Like the advice issued for cleansers and buriers of the dead, those appointed to deliver food and drink to plague victims were similarly ordered 'not to resort to any publique assemblie during the tyme of such their attendance, as also to weare some marke on their vpper garment, or to beare a white rod in their hande, to the end others may auoyde their companie'.[343]

In Edinburgh, this role was even more formalised. In 1585, William Logane, messenger, was appointed 'distributer of the meitt and drynk' to those housed in the lodges on the moor and those within the town that were quarantined within their homes in the town under suspicion of the plague. As with the Edinburgh cleansers, the Burgh acknowledged the danger inherent in his position. '[I]nconsideratioun that the said office will be veray paynfull and chairgeabill to the said William', they wrote, 'thay gif and grant vnto him the sowme

---

[340] Slack, *Impact of Plague,* p. 217.

[341] Esther M.E. Ramsay and Alison J. Maddock (eds.), *The Churchwardens' Accounts of Walton-on-the-Hill, 1627-1667,* Printed for the Record Society of Lancashire and Cheshire (2005), p. 83.

[342] York Civic Records, V, p. 74.

[343] *Orders Thought Meete by her Maiestie, and her priuie Councell, to be executed throughout the Counties of this Realme, in such Townes, Villages and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same*, (London, 1578).

of sex pund monethlie in the name of stipend for his seruice'. [344] In Leith, men were appointed to investigate,

or, as the record states, 'have a care', which individuals were in need of provisions. On 20 July 1645, Robert

Alexander was appointed to travel through the 'Ludges' or the temporary pesthouses on Leith Links to create

a report whilst George Porters was instructed to do the same through the town. There is clearly a sense here

that this was a duty that fell upon the Kirk authorities to ensure that all sufferers were provided for. Later

that month they also instructed a woman, Isobell Robertsone, to brew ale 'for ye use of ye publicke'. [345] In

general, then, the responsibility for ensuring that the sick poor were provided for appears to have been

largely assumed by local authorities, rather than relying solely on the support of neighbours and friends. Of

course, the latter may also have played a significant, but undocumented role. Regardless, the duty was

particularly evident in the records of the Leith Kirk sessions, whose actions would likely have been driven by a

sense of Christian obligation and charity.

3.4 Plague administration and enforcement

In addition to the roles which met the specific, immediate needs of the community, the introduction of

emergency measures involved a considerable amount of administration and plague policy enforcement. In

London, it fell upon the constables to shut up and mark infected households, to report the number of plague

deaths to the Lord Mayor, and to arrest wandering beggars. [346] This role carried significant responsibility. In

July 1637, the privy council issued a warrant for the arrest of an alderman in London after he failed to renew a

warning sign on a plague-infected house. The privy council had issued instructions for the doors of all infected

dwellings to be identified with a red cross and the words 'Lord haue mercie vpon vs'. The warrant stated that

the cross of one particular dwelling, however, 'hath bin defaced and obscured' for one week, 'and noe care

taken to renewe...the same'. [347] This interesting case raises more questions than it answers. We do not know,

for example, whether the cross had been obscured deliberately, as a form of protest against the policy of

---

[344] ERBE, Vol 4, p. 426.
[345] NRA CH2/716/5, p. 121.
[346] F.P. Wilson, *Plague in Shakespeare's London,* p. 18.
[347] British Library, Add MS 46845 D.

shutting up, or if it had simply fallen into disrepair. Additionally, we do not know how news of the incident had reached the lofty heights of the privy council. Nevertheless, the constable bore the brunt of responsibility, facing severe repercussions after just one week, suggesting that central authorities had little tolerance for noncompliance. Evidence from northern England demonstrates that constables during plague outbreaks were assisted by lower-level officers who helped ensure that policies were adhered to by reporting offences and monitoring the behaviour of their neighbours. In Manchester in October 1625, in light of the 'great perell of theis contagious tymes, and the fearefull miseries whereunto the poore inhabitants...are like to be exposed', the court ordered twelve individuals 'to be aydinge and assistant to the constables'. They were appointed to enquire about the persons or goods which had entered houses, if anyone in the town was suspected of having the plague, and see to it that the danger of contagion was removed as swiftly as possible. They also were instructed to see that able-bodied persons were supplied with work.[348]

One letter written by the previously mentioned Walter Ettrick intimately recounts the woes of such an officer. On 18 July 1665, Walter Ettrick, one of eight individuals appointed to prevent the spread of plague in Sunderland, wrote to John Sudbury, Dean of Durham and local Justice of the Peace to complain about the difficulties in carrying out their tasks. A gentleman and freeman of Sunderland, Ettrick was appointed collector of customs at the port of Sunderland and, by patent of Bishop Cosin, registrar of the Bishop of Durham's court of admiralty.[349] Ettrick died in Bath in 1702, aged 72, and would therefore have been 35 during the 1665-6 outbreak. In his letter to the Dean, Ettrick and his colleagues complained that the cost of inspecting and guarding the ships arriving from Yarmouth and other infected places had become 'intollerable' and asked that the cost of their inspections be borne by the ship's masters. Secondly, they complained that Rebecca Brown, a widow and ale brewstress of Sunderland 'hath kept in her house all night long such p[er]sons as are supposed to have relation to the infeccoun. And have in the night time exceedingly abused the Constable and the watch

---

[348] R. Sharpe-France, 'A History of the Plague in Lancashire', *Transactions of the Historical Society of Lancashire and Cheshire,* Volume 90 (1938), p. 58.

[349] Jeremiah William Summers, *The History and Antiquities of Sunderland, Bishopwearmouth, Bishopwearmouth Panns, Burdon, Ford, Ryhope, Silksworth, Tunstall, Monkwearmouth, Monkwearmouth Shore, Fulwell, Hylton, and Southwick. From the earliest authentic records down to the present time,* Volume I (Sunderland, 1858), p. 124.

and had such p[r]actise of lewd people as made the watch afrayd to ingage them'. Consequently, Ettrick and

his colleagues requested that the 'vncivill' alehouse be suppressed. Thirdly, they recounted that John Litle of

Sunderland had 'much abused' the constable after he had had been ordered by Ettrick to shut up his sister's

house. Litle's sister, Ettrick writes, had 'stripped the Cloathes of the ship man who first dyed of the plague and

still remains in a dangerous Condicon'. They asked that Litle be bound over to the assize or sessions court to

face punishment. Finally, and perhaps most interestingly for the present discussion, Ettrick asked the Dean to

increase the powers at his disposal. He asked for 'an order to us the above named 8 p[er]sons empowering us

to act for the supressing of the Plague at Sunderland'. This request suggests that these officials may not have

had a formal, written declaration of their duties, and perhaps Ettrick needed such an order to carry out his

office more effectively. Ettrick ends the letter by asking for an additional ten pounds to continue his attempt

to control 'persons soe wretchedly vngou[er]nable'.[350]

The response to this letter has been lost, so we are unable to know if Walter Ettrick and his colleagues

received the additional powers and payment they sought for their services. The letter is important for several

reasons. Firstly, like the evidence relating to the distributors, it acts as a missing link between policy and

provision, providing rare insight into how plague policies were enforced on the ground. Secondly, it provides

valuable evidence concerning the way communities were policed. Lastly, it demonstrates that not all roles

within the plague industry can be regarded as 'dishonourable'. Here we can see that a range of supervisory

roles were carried out by wealthy, respected individuals.

Part Three - Clothing the plague industry

3.5 Plague Doctors and Plague Worker 'Uniforms'

---

[350] DUL, Cosin Letter Book 1B, 126.

This chapter has surveyed the 'key workers' of the plague, alongside the roles they performed to ensure the survival of their communities during outbreaks of plague. Barring the efforts of the plague nurses who will be discussed in the following chapter, there is, of course, one notable absence. Most of us are familiar with the image of a plague doctor: the ominous figure dressed in a long cloak, gloves, and the iconic beak-shaped mask that has become symbolic of the disease. However, despite locating a wealth of evidence recording the activities of other plague workers, I found very little to support the idea that plague victims were generally treated by doctors, and no evidence at all to suggest that they wore the traditional masks. There are very few references in either the York or the Edinburgh council minutes to any kind of doctors working during even the most severe outbreaks of plague in these cities. In York, we have just one surviving reference, recorded on 30 April 1606 in which stated:

> And nowe it is agreed that Mr Edmond Deane phisition shall have given hym forthe of the common chambre xxvjs viijd as well for his advise and paynes that he did   take in the tyme of the late infeccon & visitacon in this Cittye in prescribeinge medicynes and antidotes for the poorer sorte, as also for that he did at my Lord Maiors appointment that then was goe to my Lady Maies howse, and ther forthe of a window a farr did veiww Hector Rutledgefolkes who was then suspected to have the plague, and for that as he saieth he went likewise to the Horsfaire to the visited that were ther and did give them direccons so longe as he staide in this Cittye.[351]

This relatively short record does, however, provide substantial insight into the work of Edmond Deane, plague doctor, which we can use to interpret the role more generally. It reveals, firstly, that he was paid twenty-six shillings and eight pence for his work which included advice and the prescription of medicines and antidotes for the poor. The record also states that the payment was to him to examine an individual, at a distance, through the window of 'Lady Maies howse' at the request of the Lord Mayor. The isolation of this reference, along with the very specific circumstances mentioned, suggests that this a rare and exceptional occurrence. Unlike the European plague doctors, who were typically retained on salary to care for the sick and

---

[351] EYLA, Y/COU/1/1/33, York Corporation House Books, f. 12v.

impoverished, Deane's involvement appears to have been a one-time payment for a unique situation rather than part of an ongoing role.

This is in stark contrast to the handful of references we have from Edinburgh. We have already been introduced to Edinburgh's most famous plague doctor, John Paulitius, who was appointed in December 1644 to visit all those suspected of contracting the disease in Edinburgh. Although he initially appears to have been appointed in the capacity of searcher, later entries suggest that his duties expanded. For example, in June 1645, he is recorded as 'attending and visiteing' the sick and dying, possibly suggesting that by this stage, in an effort to curb the rising levels of disease, he was now forced to administer treatment as well as simply identify and record the numbers of the deceased. These increased duties are reflected in his salary. Upon appointment in December 1644, he was allocated 'for his paines' £40 per month. By April 1645, as the infection began to increase, this sum was increased to 'fourscoir pundis' or £80 and by 6th June, this sum increased to one hundred pounds per month.[352] This increase is also a reflection of the town council's acknowledgement that the role was increasingly dangerous to the doctor's health and wellbeing. The appointment of a new doctor, George Rae on 13th June, just a few days after this final increase, suggests that Doctor Paulitius had sadly succumbed to the disease.[353]

The discrepancies and pay and frequency of the work indicate that the role of the plague doctor varied significantly across different administrations. In Edinburgh, this was a formal office. Their administration appointed a dedicated plague doctor who received a substantial monthly salary to serve throughout the duration of the epidemic. In contrast, in York, the role was far less structured, with evidence suggesting that doctors were called upon for one-off tasks as needed, rather than holding a continuous post.

---

[352] ERBE, vol. 9, pp. 60, 67 and 70.
[353] Ibid., p. 70. Rae was also compensated at the increased rate of £100 per month.

When it comes to their attire, both the records and the scholars who have previously surveyed them are largely silent. W.G. Bell mentions the appearance of the plague doctor but does not mention the beak or the other items typically associated with the 'plague doctor' aesthetic. Instead, he wrote:

> 'There you may picture him, the tidiness in dress of the professional man - long coat, knee-breeches, and cravat - undisturbed by the horrors among which he moved, the gold-headed cane, which as he walked out-of-doors was the sign of his calling, resting in a corner'[354]

Many of the images which have since assimilated into popular imagination originate from continental European sources, and it appears that there is little evidence to suggest that such clothing was worn elsewhere. This is not to say, however, that plague workers did not wear distinct 'uniforms'. Clothing played an essential role in responses to plague. It was understood to be one of the primary carriers of the disease and was therefore carefully monitored by authorities. This danger is something that we can see reflected very clearly in Edinburgh's response to plague. The final section of this chapter will analyse references to clothing, particularly in the richly detailed Edinburgh Town Council minutes in order to assess what plague workers actually wore during their work and what this can tell us about how these individuals were perceived by others.

Some of the earliest policies put in place to prevent plague in Edinburgh concerned the movement of cloth and clothing. As early as 1498, council minutes stated that English cloth was forbidden to enter the town.[355] The following year, a further order instructed inhabitants to cleanse their clothing at the port near Leith, and at no other water sources, or risk the destruction of their goods.[356] After that, each time plague visited the town, a fresh set of policies was mandated in an attempt to control the disease. These frequently included references to textiles. For example, in July 1584, neither merchants nor passengers were permitted to

---

[354] Walter George Bell, *The Great Plague,* Folio Society (2001), p. 95.
[355] ERBE, I, p. 74
[356] Ibid., p. 77

transport garments, bedding or household goods from Flanders, for fear of transporting the infection which was rising there with it.[357] In May 1530, servants were forbidden from washing clothes belonging to anyone other than their masters, for fear of further spreading the infection. This policy was repeated in December of that year, this time under penalty of a lifetime banishment.

It was not only the movement of cloth and clothing that was carefully monitored by authorities. The clothing of infected inhabitants of the town posed a serious threat to the health of the community. The council ordered that the individuals housed in pesthouses were to be provided with clothing, and their own was to be burnt. [358] However, even the council understood that clothing was an expensive commodity, and not all of it was destroyed in the name of plague prevention. In November 1574, the council ordered their treasurer, James Ros, to purchase a cauldron and other necessary items suitable for cleansing the infected goods of the inhabitants of the moor.[359] Individuals were prohibited from removing any of their goods from the cauldron, on pain of death.[360] The following February, as the danger had passed, the records include orders to Ros to deal with the removal of the timber used for the temporary lodges, the cauldron, and other items which furnished the pesthouse. In May 1585, however the plague had returned to Edinburgh, and the council once again ordered Ros to purchase a cauldron to cleanse the clothing belonging to the infected.[361]

As we saw in the previous chapter, several of the offences listed in the Burgh records centred around clothing-related infractions. These records help us to understand the essential role that clothing played in the town's overall response to the disease. In 1529, a woman named Margret Cok was convicted after she travelled to Edinburgh from St Andrews with possessions thought to be infected with the plague. As punishment, she was branded on both cheeks, her clothes were burnt, and she was banished from the town

---

[357] ERBE, IV, pp. 344-5.
[358] ERBE, IV, p. 416.
[359] Ibid., pp. 30-1.
[360] ERBE, III, p. 255.
[361] ERBE, IV, p. 418.

forever.[362] Preventing potentially infected goods from arriving in a town was evidently a priority for early

modern authorities. There are many contemporary references to clothing being held responsible for initiating

a local outbreak. Across the border in the Cumbrian town of Dalton, for example, we have already seen that a

local parish clerk George Postlethwaite lamented how a 'miserable, accursed, abandoned, vile fugitive named

Lancaster' arrived in the town from London with his wife in 1631 'bearing his own shafts of death enclosed

amongst garments and precious jewels'.[363] Similarly, in Sunderland, a woman was shut up within her home

after stripping the clothing from a deceased sailor who had arrived on a ship known to have brought the

plague to the town.[364]

In addition to highlighting authorities' fixation on clothing, the minutes also provide some hints as to what

plague workers wore during the course of their duties. On 15 October, 1568, it was ordered that every baillie,

cleanser and burier of the dead was to have a gown of grey cloth with a Saint Andrews cross in white adorning

both the front and the back of the garment. They were also to be provided with a staff with white cloth on the

end 'quhairby thai may be knawin quahaireuer they pas'. Evidence that plague workers carried a white wand

or staff can be seen in Edinburgh as early as the turn of the sixteenth century, when five cleansers were

appointed and instructed to carry 'a littill qhute wand iii quarteris lang with a hupe of qhute irne at the end'

which was to be displayed 'in thair hands openly'.[365] In May 1585, the council ordered their treasurer to

deliver the four 'fowle' cleansers on the moor a black 'jowpe' or jacket with a band of white cloth sewn onto

the garment 'for designing and knowing of thame by vthers'.[366] This motif of black or grey and white textiles

became synonymous with the plague in Edinburgh. In 1568, the Burgh ordered two closed biers to be made,

covered with black cloth, and with a white cross and a bell at the head of each to warn people that they

carried plague corpses.[367]

---

[362] ERBE, II, p. 19.
[363] George Postlethwaite, *Lugubrious Lines* (1631).
[364] DUL, Cosin Letter Book 1B, 126.
[365] ERBE, I, pp. 77-8.
[366] ERBE, IV, p. 419.
[367] ERBE, III, p. 254.

The Edinburgh records do not give any suggestion of the type of fabric used for the uniforms worn by plague workers; however similar garments provided by a parish in Bristol might offer some indication as to the materials used. In December 1603, St Mary Redcliffe parish provided a parochial nurse and a burier of the dead each with a black buckram uniform. The parish paid 4s 6d for four and a half yards of black buckram to make coates 'for such as were appointed to carry the infected carce[s] [corpses] to the church' and an additional 3s 4d was spent on a further two and a quarter yards to make 'a wastcote for a woman that was appointed to looke to the sick folke'.[368] The term 'buckram' is today applied to stiff textiles, generally linen or cotton, made by impregnating a plain-weave fabric with fillers and stiffeners, and is used for objects like waist bands and book bindings. In the early modern period, however, it was frequently used for clothing and was likely chosen because it was cheap and durable. This can be contrasted to the kinds of garments worn by plague workers on the continent. Recent work by Marina Inì has demonstrated that staff working inside Genoese plague hospitals wore waxed robes and gloves as wax provided a smooth surface which was not considered subject to contagion.[369]

None of the references to plague worker clothing, however, resemble the image of the typical 'plague doctor'. In theory, the beak-shaped masks such as the ones we can see in the image below have been said to prevent contaminated air from reaching and infecting the wearer. There is no evidence, in the Edinburgh records at least, to suggest that any such item was worn by contemporary plague workers. A recent article by Professor Marion Ruisinger concluded that the beak-shaped plague mask is not mentioned before the mid-seventeenth century, and then only in Italy and Southern France.[370] There is no evidence, she argues, of its use during plague outbreaks elsewhere. How, then, did the mask become so symbolic of the plague? The first visual representation of a plague doctor dressed in this manner was published in a 1656 broadside in Rome which

[368] Bristol Archives, P.St MR/ChW/1/c, f.55.
[369] Marina Inì, 'Materiality, Quarantine and Contagion in the Early Modern Mediterranean', *Social History of Medicine* (2020).
[370] Marion Maria Ruisinger, 'Die Pestarztmaske im Deutschen Medizinhistorischen Museum Ingolstadt' in *Pest! Eine Spurensuche*. Exhibition catalogue published by the LWL-Landesmuseum für Archäologie, Westfälisches Landesmuseum Herne, Darmstadt 2019, pp. 266–274.

can be seen below. The text accompanying the print gives the following description of the clothing depicted in the image:

> *The doctores medici thus set out from Rome, when visiting people infected with the plague, to tend to them and wore as protection from the poison a long garment of waxed cloth, face masked, large crystal lenses for their eyes, a long beak filled with sweet-smelling spices in front of their noses, carrying in their gloved hands a long rod, with which they pointed at what the patients should do and the things they needed.*

Figure 1: A broadside on doctors in Rome and their protective clothing against the plague, with an engraving after an Italian broadside showing a figure dressed in a long coat, gloves, mask and hat, holding in the right hand a stick with a winged hourglass, in the left background the same figure and children running away, in the right background a view of an Italian city, with engraved title and text. (Nuremberg, 1656).

This, and other contemporary written and visual examples provide evidence that plague masks *were* used in the seventeenth century in Europe. There is no evidence, however, that they were used in Britain. Unlike the image of the well-protected plague doctor, the surviving evidence from Edinburgh suggests that much of the protective clothing worn by plague workers in this period was designed to protect the *community*, rather than the wearer. Clothing was designed to be easily identifiable, so that others may avoid them in public, but it offered the wearer little protection against the disease. Can we argue, therefore, that, as Foucault suggests, the lack of protective clothing in such dangerous roles means that plague industry workers were 'left to die'? Possibly. However, in Edinburgh, where many of these roles were more formalised than in England, these items also were likely designed to be an indication of officeholding, to set the workers apart from but also to some level above ordinary society. The fixation of the Edinburgh authorities on infected clothing also suggests that during an outbreak of plague, contemporaries viewed clothing primarily as a vector for the disease, rather than a source of protection from it. The attitude of the council may not, therefore, have been that plague workers were not worthy of protection or protective clothing, it may simply be that their clothing was not necessarily designed with protection of the wearer in mind.

Conclusion

The enforcement of the emergency measures introduced to combat plague relied on an extensive network of individuals from a range of backgrounds. Their work encompassed a range of tasks including identifying and burying the deceased, cleansing dwellings of infection, ensuring the sick poor were accommodated and provided for as well as monitoring and enforcing plague legislation. All of these tasks ensured that individuals were forced to work in close proximity to the disease, but not all of the individuals faced equal levels of stigma or dishonour for their labour. Without new evidence, we are unable to ascertain whether the stigma of the dishonourable tasks endured after the plague had ended in England. What we can discern, however, is that surviving work in the plague industry often resulted in upward social mobility for Scottish men. Those who took on dangerous roles and lived through the epidemic could expect to receive pensions, secure senior

positions within local governance, and gain the respect of their communities. However, this advancement appears to have been limited to male plague workers, and early modern women did not experience the same opportunities. Whilst the revelation that men's and women's work in this period was valued differently is not new, it is noteworthy that despite performing similar, and in some cases identical tasks, the contributions of women were consistently undervalued compared to their male counterparts. Moreover, the work itself was deemed 'honourable' or 'dishonourable' depending on whether it was carried out by a male of female worker. Ultimately, this chapter has demonstrated that just as each administration took different approaches to policies and the punishment of plague-related offences, they took vastly different approaches to the employment of the workers they trusted to enact and uphold these rules. In general, Scotland seems to have taken a much more formalised approach. Their plague industry consisted of mostly men organised into structured hierarchies whose work was recognised and rewarded. England, by contrast, operated on a more ad-hoc and informal manner, relying on temporary workers, offering less formal recognition or compensation for their efforts.

A key question remains: why do we see evidence of upward social mobility for men in Scotland, but not in England? Chapter two demonstrated that England and Scotland approached plague management differently in this period, with Scotland's policies incorporating much stricter language and harsher punishments. One possible explanation, therefore, could be the differences in attitudes towards plague work and public service. Unlike England's more informal approach, Scotland's structured plague industry created a recognised hierarchy that formalised roles and reinforced a sense of duty and honour in this line of work, thereby creating clear pathways for social mobility. This formalisation likely contributed to a greater sense of community respect and trust in plague workers, positioning their efforts as a form of civic duty rather than mere labour for hire. In Scotland, the contribution of male plague workers was recognised as a form of public service, one that was seen as worthy of reward even after the crisis had subsided. In England, by contrast, we

have little evidence to suggest that plague workers received the same level of recognition, with many

struggling even to secure payment for their work.[371]

---

[371] The struggle faced by plague workers to secure payment for their labour after an outbreak has subsided will be discussed in more detail in the final chapter of this thesis.

Chapter Four: The Role of Nursing in Plague Epidemics

On 28 June 1654, four women stood before George Hellier, then Mayor of Bristol, and recounted the traumatic events that had occurred nine years prior. The city had experienced a severe outbreak of plague. John Potter's pregnant wife had been assaulted by an unnamed individual who kicked her in the stomach. She quickly became 'verry sicke' and 'distracted'. After about three weeks it became clear that she was suffering from the plague. She suffered for sixteen weeks before she recovered from the disease. During this time, her neighbours were 'fearefull to goe to visitt her for feare of infeccion'. At the 'height of her sickness', her husband attempted to find someone to care for her, offering five shillings to 'any person' willing to sit with her 'but could not procure any to doe it'. Without any assistance, John Potter's wife gave birth prematurely and alone, tragically resulting in the loss of the child. The following night, two of the deponents, Anne Diddall and Ann Grigg, 'did adventure to goe into the Chamber', where they found her 'in a verry sad distracted condicion lying on the bedd as though she had beene dead with her hair loose and the child then lying dead on the ground by her'. The child, they noted, was not bruised except for 'a little scarr on the side of the brow'. The record of this event likely exists only because it pertains to an assault. The court case probably focused on establishing whether the kick caused the miscarriage, while the adequacy of care and attention she received during her illness appeared to be of little concern to the authorities. The extent of the mother's distress can be seen in the fact that she did not remember delivering the child, 'not till the said deponents told her of it uppon her recovery', which was about two months after the ordeal.[372]

This deposition underscores the crucial role played by plague nurses, who entered the homes of the infected when no one else would. It also illustrates the dire consequences and suffering that ensued when such individuals were unavailable. This chapter consolidates existing scholarship on plague nurses in early modern England and contributes fresh evidence to several outstanding questions about their roles during outbreaks of

---

[372] H.E. Nott and Elizabeth Ralph (eds.), *The Deposition Books of Bristol, Vol II, 1650-1654* (Bristol, 1948), p. 164.

plague. Who were these individuals? What sorts of tasks did they perform? Who, in general, hired them? Why did they take on such dangerous roles? How were they described by their contemporaries? And most importantly, how 'professionalised' was this role? Were there individuals specifically recognised for their skills in plague nursing, whose services were repeatedly sought out? Or was this role considered a natural extension of traditional 'women's work', which any woman could perform?

Scotland has been intentionally left out of this study as I was unable to uncover any evidence of plague nursing in the sources consulted for the rest of the thesis. This may be because plague nursing was never formally introduced in Scotland, that the expectation was that individuals would care for one another on a much more informal basis and therefore did not meet the threshold of 'official' documentation, or it may be that there is still evidence elsewhere recording the practice. The restrictions placed on archives by Covid prevented me from returning to explore a broader range of material, but this would certainly be a fertile area of enquiry for future research. Ultimately, this chapter seeks to piece together fragmentary evidence from a range of English sources, including court records, wills and inventories, in order to build a clearer picture of the practice of plague nursing, particularly in the north of England, and the role nursing played in outbreaks of plague.

We know that paid sick nurses were relatively prevalent in the early modern period. Ian Mortimer found that after 1660, more than half of all interventions in non-contagious cases included payments for nursing. This number increased further in the cases where contagious illnesses such as plague or smallpox were concerned. Mortimer found that in such cases, almost all the dying were attended by (usually female) helpers, attendants and nurses, with just fourteen per cent receiving medical care without any form of nursing aid.[373] Contemporary sources also attest to the widespread flight of licensed physicians from affected areas during outbreaks of plague, meaning that sufferers were unlikely to secure their services. Some, such as the Oxford physician George Castle, openly admitted to fleeing the disease: 'the Plague…coming to the Town where I liv'd

---

[373] Ian Mortimer, *The Dying and the Doctors: The Medical Revolution in Seventeenth-Century England*, (Suffolk, 2009), p. 203.

forc'd me from my House and Studies, having not (I confesse) courage enough, to expose myself and Family

to the mercy of so dismall a Disease, against which, flight is the onely infallible preservative'.[374] Although not

all physicians fled – the astrologer-physician Simon Forman, for example, proudly stated that he did not leave

London, like most physicians, during an outbreak - the medical landscape was nevertheless radically

changed.[375] Plague was perhaps the only disease which left the sufferer and their household bereft of the

authority to direct and manage their own care. Instead, plague victims relied on the medical assistance and

care provided by those left behind, unable to flee the disease, such as their neighbours, friends and parish-

appointed attendants.

If the overwhelming evidence suggests, then, that most plague sufferers would have received care from some

form of plague nurse or attendant, why do we not know more about them? Mary Fissell has identified two

interconnected problems which continue to shape our understanding of early modern female healers of all

kinds.[376] Firstly, women's healthcare work is vastly under-documented. The highly gendered nature of early

modern record-keeping means that men are much more frequently identified by occupational titles than

women. Women's occupations also varied considerably by the day, week, season and stage of the life cycle.

Consequently, the extent of their activities is only beginning to be uncovered. Secondly, Fissell has

persuasively argued that many historians continue to value hierarchical and often anachronistic boundaries

between the medical and the palliative. Early modern medical scholarship has previously been dominated by

developments in academic medicine while few ailments were actually 'cured' in this period. Most often,

patients were nursed until they either recovered or succumbed to their disease. The insistence on relying

upon these distinctions between medicine and care, therefore, severely distorts our understanding of the

experience of morbidity in this period.

---

[374] George Castle, *The chymical Galenist a treatise, wherein the practise of the ancients is reconcild to the new discoveries in the theory of physick, shewing that many of their rules, methods and medicins, are useful for the Curing of Diseases in this Age, and in the Northern parts of the World* (London, 1667), A3 v.

[375] B. H. Traister, *The notorious astrologer physician of London: works and days of Simon Forman* (Chicago, 2001), p. 45.

[376] Mary Fissell, 'Introduction: Women, Health, and Healing in Early Modern Europe', *Bulletin for the History of Medicine,* Spring 2008, Vol. 82, No. 1, Special Issue: Women, Health, and Healing in Early Modern Europe (Spring 2008), p. 5.

Over the past fifty years we have seen great advances in the study of medical provision in early modern

Britain. Studies which primarily focused on the tripartite hierarchy of physicians, surgeons and apothecaries

have now given way to more balanced discussions which include a range of licensed and unlicensed

practitioners competing for custom in a diverse 'medical marketplace'.[377] This conceptual turn was facilitated

by the rise of the social history of medicine in the 1970s which sought to uncover history of medicine 'from

below'. Rather than chronicling the changes in elite, academic medical practices, this new scholarship

comprised a range of themes including the politics of professionalisation, irregular healers, the study of

patient narratives and experiences, the development of public health strategies, constructions of sexuality

and gender, mental health, disability as well as medicine in literature and art.[378] Works such as Margaret

Pelling's and Charles Webster's pioneering study of medical practitioners in sixteenth-century England, for

example, helped to blur the distinction between 'professional' and 'empiric' by expanding the definition of

'medical practitioner' to encompass 'any individual whose occupation is basically concerned with the care of

the sick'.[379] This definition, however, falls victim to the issues outlined by Fissell as it fails to capture the extent

of activities performed by female healers, whose work was inherently temporary, and perhaps therefore

better conceptualised as one element of the 'economy of makeshifts' described by Olwen Hufton in 1974.[380]

To help combat these issues, therefore, Monica Green brought us closer to a more comprehensive definition

in her seminal 1989 essay by describing female medical practitioners as 'women who at some point in their

lives would have either identified themselves in terms of their medical practice or been so identified by their

contemporaries'.[381] This definition removed the requirement for medical practitioners to be defined by a

---

[377] See Mark S. R. Jenner and Patrick Wallis P, 'The Medical Marketplace' in Jenner M.S.R., Wallis P. (eds), *Medicine and the Market in England and its Colonies, c. 1450–c. 1850* (London, 2007), pp. 1-23.

[378] See, for example, Rinaldo F. Canalis and Massimo Ciavolella (eds.), *Disease and Disability in Medieval and Early Modern Art and Literature* (Turnhout, 2021); Helen King, *The Disease of Virgins: Green Sickness, Chlorosis and the Problems of Puberty* (Oxfordshire, 2004); Margaret Pelling, *Medical Conflicts in Early Modern London: Patronage, Physicians and Irregular Practitioners 1550 – 1640* (Oxford, 2003); Roy Porter, *The Greatest Benefit to Mankind: A Medical History of Humanity* (New York, 1999).

[379] Margaret Pelling and Charles Webster, 'Medical Practitioners', in Charles Webster (ed.), *Health, Medicine and Mortality in the Sixteenth Century* (Cambridge, 1979), p. 166.

[380] See Olwen H. Hufton, *The Poor of Eighteenth-Century France, 1750 – 1789* (Oxford, 1974). Hufton introduced the concept to describe the strategies and resources that ordinary people, particularly the poor, used to survive during times of economic hardship.

[381] Monica Green, 'Women's Medical Practice and Health Care in Medieval Europe', *Signs 14* (1989), pp. 445-46.

single medical-related occupation. However, there remains some dispute over what actually 'counts' as 'medical practice'. To combat this second issue, and to better understand women's contribution to health and healing in this period, Mary Fissell herself conceptualised sick nursing as a form of 'bodywork', placing it along a continuum of other paid and unpaid tasks in order to gain a sense of these essential practices operating both inside and outside the realm of economic exchange. Many of the duties performed by plague nurses such as food preparation and provision, laundry and water carrying may sit outside the realm of 'medicine' but well within the realm of 'bodywork'. Fissell's essential intervention allows us to 'start at the bedside of the sufferer, attending to the physical labor entailed in the care of the sick'.[382] A combination, therefore, of both Green's and Fissell's definitions will be applied here as it is more inclusive of female healers like plague nurses, whose work was inevitably temporary and involved tasks which may have fallen outside what has typically been recognised as medical work.

All these interventions and approaches are part of a much broader discussion about the value of women's work in this period. In her article for *Past and Present*, Jane Whittle highlighted how our failure to consider the complexities of work and labour has led the histories of housework and care work, most often completed by women, to be overlooked. At the heart of this problem, she writes, lie two overlapping definitions of work, and only one of these definitions would have been familiar to individuals in early modern England. That is the definition which places 'work' in opposition to leisure or idleness.[383] Modern definitions, however, view 'work' as activity which contributes to 'the economy'. It is what we do whilst we are at 'at work', either as an employee or self-employed, in order to earn an income. Our insistence on viewing work according to these more modern definitions has ensured that the vast amount of unpaid domestic work, including housework and caring for family members has been excluded from discussions of work in this period.[384] This omission has

---

[382] Fissell, 'Introduction', p. 10.

[383] For more discussions on early modern understandings of work and leisure, see Peter Mathias, 'Time for Work, Time for Play: Relations Between Work and Leisure in the Early Modern Period', *VSWG: Vierteljahrschrift Für Sozial- Und Wirtschaftsgeschichte* 81, no. 3 (1994), pp. 305–23; Keith Thomas, 'Work and Leisure in Pre-Industrial Society', *Past and Present,* No. 30 (1965), pp. 96-103; Peter Burke, 'The Invention of Leisure in Early Modern Europe', *Past and Present,* No. 146 (1995), pp. 136-150.

[384] Jane Whittle, 'A critique of approaches to 'domestic work': women, work and the pre-industrial economy', *Past and Present,* no. 243 (May, 2019). Whittle also raises the important point that this problem extends to the present day, with unpaid domestic and care work continuing to be undervalued and underreported in contemporary societies, even though this work remains 'necessary and time-

also led to an underestimation of women's contribution to other areas of the pre-industrial economy such as agriculture, food processing and textile production.[385] Men's work, she argues, is always considered as part of the wider economy even when it is unpaid, but women's work is not. This chapter contributes to these discussions by highlighting plague nursing as a critical yet often-overlooked aspect of women's work, one that challenges conventional distinctions between unpaid caregiving and paid labour, revealing that there is no fixed line between the two. The chapter is divided into three sections. First, we will explore how plague nurses were represented in contemporary literature. Next, we will explore the ways in which we can recover traces of plague nursing from other sources and compare the two bodies of evidence. Together, these two sections will help to provide a more comprehensive view of the practice, and help us to understand who these women were, what their contemporaries thought about their work and why they decided to take on such dangerous occupations. The third and final section will discuss the level of 'professionalisation' in plague nursing and assess whether this work was valued as a distinct pursuit, separate from the skills and knowledge that were ordinarily expected of contemporary women. Ultimately, it argues that plague nursing was, to some extent, regarded by contemporaries as a specialised occupation. Certain women were indeed recognised as possessing the skills and experience necessary for this work, setting them apart from the general population. This does not mean, however, that this work was necessarily valued by the broader medical community. As the following section will show, contemporary literature portrayed these women in an overwhelmingly negative light, often depicting them as ignorant, wilfully neglectful, or even criminal. Nevertheless, this image is not universally supported by other sources. By piecing together fragments of accidental or incidental references to plague nursing in contemporary wills and court records, this chapter argues that many of the individuals who sought the help of these women appreciated and valued their contributions to their communities.

---

consuming, involves skill and physical exertion, and is essential for the functioning of the market economy'. Whittle, 'A Critique', pp. 35-6.

[385] Whittle, 'A critique of approaches to 'domestic work'', p. 37.

4.1 Representing Plague Nursing

Deborah Harkness's 2008 article, 'A View from the Streets: Women and Medical Work in Elizabethan London', demonstrated the significant position Elizabethan women occupied in London's medical marketplace, both as consumers of medical services and as practitioners. She also highlighted the extent to which male medical authors of the period objected to the presence and practices of these women.[386] As academic medicine became an increasingly consolidated and protected body of knowledge throughout the sixteenth and seventeenth centuries, attempts were made by university-educated physicians to force 'silly' women, 'old wyves', and 'toothess, wrinkled, chattery, superstitious taper-bearing old women' to the margins.[387] Plague nurses were no exception, and endured some of the harshest criticisms in print. The Elizabethan dramatist and pamphleteer Thomas Dekker appears to have played a significant role in solidifying the negative stereotypes surrounding the women who served as plague nurses. Chapter 15 of his *English Vilanies,* published in 1632, instructed his readers to pray for an 'honest carefull conscionable and good keeper', for many 'were as shee wolves which howl'd every night at the Mune'. 'They are called keepers', Dekker continued, 'because whatsoeuer they get but hold of, they keepe it with griping pawes neuer to let it goe'.[388] In fact, the term 'keeper' in this context appears to have originated in 1583, in Johann von Ewich's treatise *The duetie of a faithfull and wise magistrate.* Ewich refers to 'the keepers' as 'such as sit by [the infected]. The term 'keeper' to denote 'one who has charge, care of oversight of any person, or things', however, has been in use since the start of the fourteenth century.[389] According to Dekker, however, in addition to ransacking the homes of the deceased, a plague nurse would devise false medicines and even hasten a patient's death by pulling away his pillow. He later qualified some of his stronger statements by arguing that he does not refer to

[386] Deborah Harkness, 'A View from the Streets: Women and Medical Work in Elizabethan London', *Bulletin for the History of Medicine* 82 (2008), pp. 52-82.

[387] Andrew Wear, *Knowledge and Practice in English Medicine 1550-1680* (Cambridge, 2000), pp. 62-4.

[388] Thomas Dekker, *English Villanies: Six Several Times Prest to Death by the Printers; But (still reviving againe) are now the seventh time (as at first) discovered by Lanthorne and Candle-light, And The helpe of a New Cryer, called O-Per-Se-O: Whose lowd voyce proclaimes to all that will heare him, Another Conspiracie of Abuses lately plotting together, to hurt the pece of this Kingdome; which the Bell-man (because hee then went stumbling i'the darke) could Never see till Now* (London, 1632), Chapter XV.

[389] Johann von Ewich, *The duetie of a faithfull and wise magistrate, in perseruing and deliuering the common wealth from infection, in the time of the plague or pestilence* (London, 1583), p. 20. See also *Oxford English Dictionary,* s.v., 'keeper' (n.), (March, 2024), https://doi.org/10.1093/OED/9434343977. Date accessed, 20/08/2024.

all keepers: '[h]eaven forbid, a number of them are motherly, skilfull, carefull, vigilant, and compassionate women: good nurses indeed, necessary helpers in time of such extremity'.[390] However, he evidently held some extreme concerns about the women who undertook the role. In earlier publications, for example, Dekker referred to 'the villanies of that damnd Keeper, who kild all she keept', the 'Women-keepers' who'd 'rob you of your Goods' and 'hasten you to your End' and the 'Women-sleepers' who'd 'leaue gaping for thy Linnen, thy goodes and thy money'.[391]

Similar portraits of plague nursing can be found in other contemporary publications. For example, the claim that nurses would steal from their patients can also be found in the 1626 anonymous publication *Lachrymæ Londinenses*. Here, the author refers to 'Nurses, and such like keeping-Creatures going away with the best part of such Goods as left in the Houses whilst Friends and Neighbours harken after the right Inheritours'.[392] Their alleged ignorance is also repeated in several contemporary publications. Nathanial Hodges, an English physician who remained in the city during the 1665-1666 outbreak in London, argued that the observations of 'ignorant nurses...do surpass the Pest itself in destructiveness'.[393] Similarly, the author of a 1665 plague treatise questioned the diagnostic ability of plague nurses, stating that the marks or dark spots known as 'tokens' were not always certain indicators of the disease, nor imminent death 'as some ignorant Nurses, nay most Nurses, imagine'. William Russell, a contemporary physician, argued that these spots caused many nurses to abandon their posts prematurely. Upon seeing them, he argued, 'Nurses and Tenders of the Sick...were seized with so great amazement, that they forsook all their former Care, insomuch as they gave up

---

[390] Dekker, *English Villanies,* Chapter XV.

[391] Thomas Dekker, *The Wonderfull yeare. 1603 Wherein is shewed the picture of London, lying sicke of the plague. At the ende of all (like a mery epilogue to a dull play) certaine tales are cut out in sundry fashions, of purpose to shorten the liues of long winters nights, that lye watching in the darke for vs* (London, 1603); Thomas Dekker, *The Black Rod and the White Rod: Justice and Mercie Striking and Sparing London* (London, 1630) and Thomas Dekker, *London Looke Backe at the Yeare of Yeares 1625 and Looke Forward Vpon This Yeare 1630* (London, 1630) in F. P. Wilson (ed.), *The Plague Pamphlets of Thomas Dekker* (Oxford, 1925), p. 190; 271.

[392] Anonymous, *Lachrymæ Londinenses: or, Londons lamentations and teares for Gods heauie visitiation of the plague of pestilence* (1626).

[393] Nathanial Hodges, *Loimologia: or an historical account of the Plague in London in 1665: with precautionary directions against the like contagion ... To which is added an Essay on the different causes of pestilential diseases, and how they become contagious: with remarks on the infection now in France and the most probable means to prevent it spreading here.* (London, 1720). (Wellcome Collection Online)

their Patients for dead'.[394] This charge would have been all the more scornful to an early modern reader, given

contemporary Christian notions of care as a virtue and duty.[395] It is therefore unsurprising that the idea that

nurses were widely feared by contemporaries can be seen in the clergyman Thomas Vincent's *God's Terrible*

Voice in the City (1667). Vincent described the 'hideous' scene awaiting sufferers of plague 'when their doors

have been shut up and fastned on the outside...and none suffered to come in but a Nurse, whom they have

been more afraid of, then the Plague itself'.[396]

A particularly scathing depiction can be found in the well-known anonymous 1665 pamphlet *The Shutting up*

of Infected Houses as it is practised in England Soberly Debated. This pamphlet criticised the practice of

shutting up households, claiming that the policy increased the death toll during outbreaks. It refers to the

carelessness of nurses, most of whom 'being possessed with a rooking avarice...watch their opportunity to

ransack' the houses of their patients, 'the assured absence of friends making the sick desperate on the one

hand, and them on the other unfaithful'. Nurses are described in the text as 'the off-scouring of the City' and

'dirty, ugly and unwholesome Haggs'. Lastly, the author sympathises with those forced to 'lye at the mercy of

a strange woman'.[397] And finally, to return to Nathanial Hodges, in addition to commenting on the ignorance

of plague nurses, like Dekker, Hodges accused them of murdering their patients in the following graphic

passage:

> '...what greatly contributed to the Loss of People thus shut up, was the wicked Practices of Nurses (for
> they are not to be mention'd but in the most bitter Terms): These Wretches, out of Greediness to
> plunder the Dead, would strangle their Patients, and charge it to the Distemper in their Throats;
> others would secretly convey the pestilential Taint from Sores of the infected to those who were well;
> and nothing indeed deterred these abandoned Miscreants from prosecuting their avaritious Purposes
> by all the Methods their Wickedness could invent; who, although they were without Witnesses to
> accuse them, yet it is not doubted but divine Vengeance will overtake such wicked Barbarities with
> due Punishment.

---

[394] M.R., *The meanes of preventing, and preserving from, and curing of the most contagious disease, called the plague with the pestilential feaver, and the fearfull symptoms, and accidents, incident thereunto. Also some prayers, and meditations upon death* (London, 1665), p. 5; William Russell, *A physical treatise grounded, not upon tradition, nor phancy, but experience, consisting of three parts* (London, 1684), p. 82.

[395] See Ole Peter Grell, 'The Protestant imperative of Christian care and neighbourly love' in Andrew Cunningham and Ole Peter Grell (eds.), *Health Care and Poor Relief in Protestant Europe, 1500-1700* (London, 1997).

[396] Thomas Vincent, *God's Terrible Voice in the City* (London, 1667), p. 7.

[397] Anonymous, *The Shutting up of Infected Houses as it is practised in England Soberly Debated* (1665), p. 9.

He also claimed that they attempted to defraud the process of searching diseased bodies and the process of quarantine:

> 'some of the crafty Nurses would put the dead Body immediately into wet Cloaths, whereby they stopped the further Fermentation of the Juices, and restrained such Eruption, in Order to elude the Magistrates Notice and Power, to shut up the Houses'.

Hodges' work appears to be unique in that he offers a real-world example of alleged crimes committed by plague nurses, rather than writing exclusively in broad generalisations like the other writers surveyed above:

> 'one particularly amongst many, as she was leaving the House of a Family, all dead, loaded with her Robberies, fell down dead under her Burden in the Streets: And the Case of a worthy Citizen was very remarkable, who being supposed dying by his Nurse, was before-hand stripped by her; but Recovering again, he came a second time into the World naked.[398]

Instances of real-world examples or anecdotes concerning plague nursing are rare in early modern published literature. In fact, the only instance of a named plague nurse that I was able to identify in popular printed material was Elizabeth Lillyman. The trial which found Elizabeth guilty of the murder of her husband, and therefore petty treason, was printed anonymously in 1675. In the details of the trial, Elizabeth is described as being 'very busie a Nurse-keeping, or tending persons Visited with the plague'. In doing so, she received 'enough to help maintain her since'. According to the writer of the anonymous text, Elizabeth was 'from thence-forwards generally called Nurse', she 'pretended sometimes to take in Cloaths to Wash, yet she did not do any considerable matter of work' and instead she 'lived a life somewhat extravagant and expensive for one of her condition'.

Although only briefly outlined above, the collective works of early modern dramatists, physicians and pamphleteers paint a vivid picture of contemporary female plague workers. They emerge from these sources

---

[398] Hodges, *Loimologia* (1672), pp. 8, 136. It is worth noting here the Christian conceptions of a 'second coming' in the context of the plague sufferer who, once presumed dead, recovers and rises from his sickbed. This almost miraculous recovery is contrasted with the actions of the plague nurse, who is blamed for the individual's suffering, emphasising both her malevolence and, by association, that of all other plague nurses.

as, at best, ignorant and unreliable, and at worst, predatory. These stereotypes also applied to the women

who worked as plague searchers, tasked with viewing the bodies of the deceased and reporting their findings

to the local parish clerk. They, like plague nurses, were accused of incompetence and dishonesty. In

Shakespeare's *Romeo and Juliet* (1595), for example, plague searchers are responsible for the delay of Friar

Lawrence's messenger, meaning that Romeo fails to receive notice of Juliet's plan, thereby sparking the chain

of events that lead to the deaths of the young lovers. The messenger recounts:

> 'the searchers of the town,
> Suspecting that we both were in a house
> Where the infectious pestilence did reign
> Sealed up the doors, and would not let us forth'[399]

Searchers were also heavily criticised by the English statistician, John Graunt, generally considered to be the

founder of the science of demography. Graunt criticised both the judgement and the moral standing of the

plague searchers. 'Old women Searchers', he asserted, 'after the mist of a Cup of Ale, and the bribe of a two-

groat fee, instead of one, given them', would wilfully confuse one death with another.[400]

Not all printed references to plague nurses were overwhelmingly critical. Of the twenty-six publications that

mention plague nurses, most are negative. Ten, however, contain what we might term 'neutral' depictions.

Some of these depictions even offer insight into the duties of a plague nurse. For example, Thomas Thayre's

1603 *Treatise of the pestilence* advised that the 'keeper must take great heede that the sicke person sleep

not: for whosoever is infected with the sicknes, must be carefully be kept from sleepe, untill they have bled'.

They must also 'take heede how to bestow the plaisters that come from the sore'.[401] In addition to the

---

[399] William Shakespeare, *Romeo and Juliet*, Act 5, Scene 2, Lines 8 -11, René Weis (ed.), Arden Shakespeare Third Series (London, 2012), p. 319.

[400] John Graunt, *Natural and political observations mentioned in a following index and made upon the bills of mortality* (London, 1661). For more information regarding the searchers' involvement with the London bills of mortality, see Will Slauter, 'Write up your dead: The bills of mortality and the London plague of 1655', *Media History,* 17 (2011), pp. 1 -15.

[401] Thomas Thayre, *A treatise of the pestilence vvherein is shewed all the causes thereof, with most assured preseruatiues against all infection: and lastly is taught the true and perfect cure of the pestilence, by most excellent and approued medicines* (London, 1603), p.42.

important work of the nurse in ensuring the sufferer was well fed and clean, here we can see that they

participated in what we might consider more strictly 'medical' activities, monitoring sleep and dressing sores.

Most of the neutral depictions of plague nurses, however, concern their supposed immunity to the disease. It

was noted by several physicians that those who attended the sick appeared to die in fewer quantities than

others, and the pamphlets which do not slander them are largely concerned with why this was the case. In

most cases, plague nurses were used as a literary device to advance the writer's own aims and agendas. For

example, the English clergyman Arthur Hildersham's 1633 *Doctrine of fasting and praier* observes that many

physicians, surgeons, nurses and keepers 'visit the infected, to sweat them, to dresse their sores, to wash

their linnen...conversed with them, and lyen in bed with them' and yet escape the infection, when many who

are careful to avoid the infection, and use all manner of recommended preservatives have been taken by the

disease.[402] Similarly, the clergyman William Chibald noted that 'those which keep them that are sick of [the

plague]...that sweat them and dresse their sores, and wash their linnen that coms from them, polluted with

the filthy corruption that comes out of their sores, yea which lie with them that have sores running on them,

and are continually in their breath, and drinke after them in the same cup' are preserved from the disease.

This, he argues, was because God knows 'that without tending of them that are thus visited, many would

pinch miserably, and if all should be infected that ca[r]e neere them that were visited, there would be few or

none to tend them'.[403] The writer and astrologer John Gadbury unsurprisingly believed the phenomenon to be

caused by the stars. After commenting on the volume of physicians, surgeons, apothecaries and nurses in

daily contact with the disease that not only escaped death, but the disease itself, he argued that 'a good

Nativity, is the certainest Amulet or Antidote that a man can have'.[404]

---

[402] Arthur Hildersham, *The Doctrine of Fasting and Prayer, and Humiliation for Sinne,* (London, 1633), p.12.
[403] William Chibald, *A cordiall of comfort To preserue the heart, from fainting with griefe or feare: for our friends, or our owne visitation, by the plague. Also a thankes-giuing to almightie God, for staying the visitation in London, and the suburbs thereof. Both which may be of vse to Christians in other places, that are cleere, visited, or recouered* (London, 1625), p. 38.
[404] John Gadbury, *London's Deliverance Predicted: In a Short Discourse Shewing the Causes of Plagues in General and the probable time (God not contradicting the course of second Causes) when this present Pest may abte* (London, 1665), p. 24.

Despite the handful of neutral depictions we have seen, it is remarkable how long the negative stereotypes

have endured. Until recently, plague nurses were rarely included in larger histories of the disease. Where they

are included, many scholars opted to uncritically repeat the claims made by some of the authors above. F.P.

Wilson, for example, referred to plague nurses as 'dishonest' and 'indiscreet', whilst Bell repeated the claims

of Hodges and other anonymous pamphleteers before concluding that 'they were fortunate who had not a

thief for their nurse-keeper'.[405] The reputation of plague searchers, at least, was rescued by Richelle

Munkhoff's landmark essay in 1999.[406] Munkhoff sought to re-evaluate the contribution of searchers by

drawing attention to their paradoxical relationship to authority. Forced into these roles through economic

dependence, searchers were subject to the dangers of infection. However, they also wielded the colossal

power to dictate matters of life and death. Munkhoff argues that it was this power, combined with the

searchers' close association with the disease, that intersected with early modern society's deepest anxieties

about women, 'anxieties more familiarly figured in witches, prostitutes and midwives'.[407] Later, Deborah

Harkness's previously cited article demonstrated that negative stereotypes of female healthcare workers of all

kinds were the result of elite practitioners who consciously sought to undermine women's medical work to

privilege their own. The ease with which historians have accessed the opinions of these physicians and elite

surgeons has ensured that these voices have remained prominent. The same is true of plague nurses. If we

assess the printed material outlined above, the named authors are all physicians, clergymen, or other elite

men, all of whom arguably had a vested interest in devaluing the work of these women, whether they were

conscious of this act or not. Harkness revealed that, contrary to what some representational sources would

have us believe, Elizabethan women, including plague workers, were part of organised systems of community

healthcare. They were competent caregivers who were knowledgeable and skilled in the healing arts. She, like

Munkhoff, urged future historians to consider a range of sources in their studies of female healthcare workers

in the hopes that the negative stereotypes produced by polemical printed texts may be reconsidered. The

---

[405] F.P. Wilson, *The Plague in Shakespeare's London* (Oxford, 1963), p. 67; Walter George Bell, *The Great Plague in London in 1665* (London, 2001), p. 184.
[406] Richelle Munkhoff, 'Searchers of the Dead: Authority, Marginality, and the Interpretation of Plague in England, 1574-1665', *Gender & History,* Vol 11 Issue 1 (1999).
[407] Ibid., p. 2.

second section of this chapter therefore aims to continue this work by assessing how our understanding of these women and their activities shifts when we explore a different set of sources.

4.2 Recovering Evidence of Plague Nursing

This section will provide the first comprehensive assessment of source material in the north of England relating to plague nursing. Additionally, it consolidates the findings discovered by scholars concentrating on plague nursing elsewhere in England and conducts a comparative analysis of the source materials. This will help us to contextualise the evidence outlined above taken from more representational sources, allowing us to establish a more well-rounded understanding of the practice. It will argue that where we find the fragments, and where we do not, is important. The discernible silences and gaps in the sources compel us to ask new questions about the material, providing valuable insight into the practice of plague nursing in England. To date, scholarly work on plague nursing remains quite limited. The most extensive study of plague nursing appears in Ian Mortimer's *The Dying and the Doctors: The Medical Revolution in Seventeenth-Century England* (2009). Based on a survey of over two and a half thousand probate accounts in East Kent covering the years 1570-1719, Mortimer's work persuasively argues that the seventeenth century witnessed a profound revolution whereby the dying increasingly sought medical assistance or purchased physic in the final days and weeks of their lives. However, some of Mortimer's most significant and illuminating claims derive from the chapters on the provision of nursing care in the seventeenth century. As the only quantitative study of the practice of plague nursing, and the only study to work on the practice of plague nursing outside of London, it is worth repeating some of the main findings of his study here. We have already seen that Mortimer's work illustrates the significant role played by nursing in cases of contagious diseases such as plague.[408] His research also shows that plague attendants performed many of the same duties as attendants in non-contagious households such as watching in the night, cleaning and helping with household chores. However, in addition

---

[408] Mortimer, *The Dying and the Doctors*, p. 203.

to this work, in some cases nurses acted as what he terms 'plague-physicians', directing the care of their charges by seeking and fetching medicines from physicians and apothecaries and administering them to their patients.[409]

While the work of Ian Mortimer, Richelle Munkhoff and Deborah Harkness has thus far succeeded in rescuing the reputation of female plague workers in early modern England, recent work by Lara Thorpe has investigated why the prospect of receiving care from a plague nurse was so feared by contemporary writers.[410] Thorpe's chapter concludes that nurses were vilified due to their socio-economic marginality, their close association with a much-feared disease, and because of the role they played in the deeply unpopular public health measure of quarantine. The depiction of plague nurses as, at best incompetent and, at worst, murderers and thieves, is, Thorpe argues, completely unfounded. For source material, Thorpe draws on surviving London churchwarden accounts. St Margaret's churchwarden kept a separate book filled with expenses related to plague, and also referred to plague nurses by name. She finds that as many as 414 women were employed by the parish of St Margaret's between 29 May 1665 and 5 November 1666. This was care work on a near-industrial scale.

Unfortunately, no comparable records survive for the north of England. Few churchwarden accounts survive from severe outbreaks of plague, and there is a lack of plague-related evidence in the ones that do. In London, the disease appears to have created *more* administrative records, but in northern England recording often ceased altogether. For example, the vestry minutes for the Lancashire parish of Prescott are generally very complete, and yet the receipts for the years 1652-3, and 1653-4, are missing. This is likely due to the disruption caused by the severe epidemic that swept the region during these years. To date, our knowledge of plague nursing in England is limited to these few studies concerning London and East Kent. The subject of plague nursing, therefore, reflects a small but growing body of scholarship which has been influenced by the

---

[409] Ibid., p. 197.
[410] Lara Thorpe, 'At the mercy of a strange woman': Plague Nurses, Marginality and Fear during the Great Plague of 1665', in Hopkins, L. and A, Norrie (eds.), *Women on the Edge in Early Modern Europe* (Amsterdam University Press, 2019), pp. 29-44.

development of new methodologies in the interconnected histories of women's work and female healing. In

short, we are beginning to understand who these women were, and we have a reasonably good

understanding of how they were perceived by the medical elite, but there is much left to discover. The history

of plague nursing in England, like the history of all forms of women's work in this period, is characterised by

invisibility. Whilst trying to uncover evidence of their actions, I have searched 600 wills from Cumbria, 300

from Lancashire and an additional sample of 100 from Yorkshire to little avail.[411] I have also searched through

court and parish records in York and Durham. I was particularly surprised to find no mention of the practice in

the York Corporation Records. These records will be discussed at length later in the thesis but for now, it will

suffice to note that the minute books are full of evidence relating to the plague in York. Numerous pages

intimately detail public health measures and the punishment of lawbreakers, and yet there is virtually no

evidence of plague nurses. The only instance which we may interpret as a plague nurse being paid for her

services can be found in an entry written into the minutes of December 1631, when one Grace Graves 'that

was in Smyths house in Goothramgate' was allotted 2s 8d. 'for her paines in looking to Marleys daughter and

the other wench that were there'.[412] Although this entry is brief, it remains exceedingly illuminating. Grace

Graves is described by Diane Willen as 'the most affluent of the [weaver's] widows'.[413] She was one of

seventeen 'masters' listed in 1626 and one of only three who could boast three or more journeymen. Her

wealth and status shatter the image of plague nurses being only derived from the poorest sections of English

society. In general, however, plague nurses suffer from the same problems of identification discussed earlier

in this introduction. We know that these women existed, we know that they played an essential role in the

response to plague during this period, but the records offer only glimpses into their experiences. The

remainder of this chapter aims to address some of the gaps in our knowledge about the role of plague nursing

by focusing on surviving evidence in northern England. It will then compare this evidence with what scholars

---

[411] Two wills held in the Borthwick Institute for Archives (hereafter BIA) contain references to keepers. See BIA 1714, Will of Georg Westmerland and BIA MF1715, Will of Phillip Watman.
[412] EYLA, York Corporation House Books, Y/COU/1/1/35, f. 146r.
[413] Diane Willen, 'Guildswomen in the City of York, 1650-1700', *The Historian,* Vol. 46, No. 2 (1984), p. 216.

have already unearthed about the practice in London and Kent. This comparison allows for a richer, more accurate understanding of how plague nurses engaged with their local communities.

One area which proved fruitful was the Chester Court of Quarter Sessions. In 1648, two plague nurses from Manchester, Ellen Davenham and Margarett Walker, petitioned the court for arrears of pay. Their petition tells us that they were sent roughly 35km south to Middlewich by the 'Constables and other Inhabitants' of the town. Their role, they wrote, was to see to 'the orderinge and the better lookinge unto the sick p'sons there' as well as 'the dressinge of meate and keepeinge cleane of the Clothes of the infected p'sons and alsoe for the Cleansinge and makinge habitable their houses'. They agreed to undertake these tasks for seven shillings per week in wages in addition to their 'diett' or basic maintenance. The nurses informed the court that they had performed their duties 'carefullie and honestly' but had received only seven pounds between them for their wages. This sum, they argued, 'hath not done much more than maintained them with the provision of victualls...things beinge att soe great a scarcitie'. They added that they were both 'far from their friends' and 'where their Imploym[en]t most lyeth', and asked that 'some speedy Course be taken for the payment' of the arrears. Later, we meet the same nurses who once again turn to the court, this time having received clipped money for their services. Margaret Walker and Ellen 'Danham' (likely an abbreviated version of Davenham above) repeat their earlier statements that, having resided in Manchester, they were sent for by the constables of Middlewich to attend the town as plague nurses. They explain that they 'receved some money', but 'much of it clipt and not passable'. They had also 'beene put off from time to time and been forced to make many journeys' at great personal cost, finally reporting that they had 'spent more than they receved'.[414] The question remains, why, then, did Ellen and Margaret agree to it? We know from the first petition that this work had left them unable to support themselves, as they were 'far from friends' and usual employment, and a distinct lack of respect can be inferred from the number of times authorities had put off paying them what was owed. However, it is clear that some element of profit had been expected as a result of

---

[414] J. H. E. Bennett and J. C. Dewhurst (eds.), *Quarter Sessions Records with other Records of the Justices of the Peace for the County Palatine of Chester 1559-1760 together with a few earlier miscellaneous Records deposited with the Cheshire County Council,* The Record Society of Lancashire and Cheshire, Volume 94 (1940), pp. 127, 137.

this employment. Both Margaret and Ellen had expected to be supported during their stay and paid for their services when they departed.

A similar example can be found in the records of the Westminster Quarter Sessions. In 1645, Helen Ricketts, 'a poore Nursekeeper' and 'widdow' petitioned the court for her wages for eight weeks of service in the home of a Russell Street bookbinder named John Hance. The petition informs us that the house was 'visited', meaning that it was infected with plague. It is unclear how many individuals resided in the home, but we learn that all except the maidservant succumbed to the disease and died. This explains why Helen was unable to receive payment for her service. Unlike the depiction of plague nurses we see in the representational sources above, Helen's petition refers to her 'carefull and diligent attendance' in the home, as well as the 'care and pains taken therein'. A note in another hand towards the bottom of the petition states that the matter is to be referred to a Mr Carter and Mr Edwardes 'all in one' with the that of Elizabeth Hunt. Elizabeth Hunt, 'a poor servant' had also petitioned the same court for a year and a half's wages after her employer, John Alsoone, and his family had died of plague. It appears that Elizabeth had also contracted the disease, but was 'turned out of dores' after she had recovered, and the home she once worked in was locked up by an overseer. She asked the court to satisfy her outstanding wages, and included the names of four neighbours who were willing to testify as to the validity of her claim.[415] Whilst we do not know the status of Margaret and Ellen, the Chester plague nurses, the status of the London plague nurse, Helen Ricketts is clear. She describes herself as a poor widow, and interestingly, she also refers to herself as a 'Nursekeeper'. This is one of the few examples that I have encountered where the term is used almost as an occupational title. In this context, it appears to define her identity, rather than simply describing her actions or past work. Regardless, Helen Ricketts was a poor widow who likely had limited options for supporting herself. Her situation may help us to understand hers and other nurses' motivation for taking on such a dangerous task.

---

[415] London Metropolitan Archives, WJ/SP/1645/011 and WJ/SP/1645/012.

Court records, especially petitions, are one of the few sources in the north of England which render these women visible to the historical record. However, arguably the richest and most detailed references to plague nursing in the region can be found in the depositions of the Durham Consistory Court Records. These courts oversaw a wide range of cases including matrimonial disputes, morality cases e.g., adultery and illegitimacy, tithe litigation, non-conformity and recusancy and accusations of defamation and witchcraft.[416] Most relevant to our present search, however, are the many probate disputes which dealt with contested estates of the deceased, many of whom are recorded as having died of plague. Before we explore these materials in more detail, it is important to acknowledge the work of Keith Wrightson in first drawing our attention to these sources in this context.[417] His work also introduced us to many of the women who populate the remainder of this chapter. We know from his work, for example, that these women were drawn from the poor of Newcastle and the surrounding areas, most of them were widows, some of them perhaps widowed by the plague.[418] He tells us that Anne Pullame was sixty years old and described herself as 'hard of hearing'. Barbara Hall and Anne Whaw were widows, aged thirty-five and forty-four respectively, and had both been left in debt by the death of their husbands. Some were spinsters, others married, and the majority of the nurses called as witnesses in the records had known the parties involved for several years.[419] However, as Wrightson was pursuing more of a holistic representation of the city at a time of crisis, it remains worthwhile to analyse the references pertaining to plague nursing in a little more detail here for two main reasons. Firstly, there are several important references in the Durham Consistory Court records that Wrightson did *not* include in his work, and secondly, virtually each reference provides a small, but essential piece of evidence which helps us to build up a clearer picture of the practice. Using the methodologies outlined in the introduction, by centring the women and their actions, by paying attention to verbs and incidental references to their healthcare-related activities, this section aims to provide a new perspective on the practice of plague nursing.[420]

---

[416] Extracts from these sources have been published in James Raine (ed.), *Depositions and other ecclesiastical proceedings from the courts at Durham, extending from 1311 to the reign of Elizabeth,* Publications of the Surtees Society (London, 1845).

[417] DUL, DDR/EJ/CCD/2, fos. 26 (Edward Holmes) and 9 (Clement Curry), quoted in Wrightson, *Ralph Tailor's Summer*, p. 49.

[418] See above on page 17 for an example of a wealthy widow taking on these responsibilities.

[419] Wrightson, *Ralph Tailor's Summer*, pp. 102-3.

[420] The methodology of using a 'verb-oriented' approach is inspired by the work of Sheilagh Ogilvie and Maria Ågren. In 2003, Ogilvie used evidence of work from court documents to reconstruct gendered divisions of labour in rural Württemberg for the period 1650-1800. In 2011, the methodology was further refined by Ågren as the 'verb-oriented approach' in the 'Gender and Work' project

However, although these sources form an essential piece of the puzzle, it is worth remembering that, as Bronach Kane and Fiona Williamson have argued, court officials 'recorded, interpreted and mediated female speech in ways that reflected contemporary thought on gender and prescribed forms of behaviour'. Therefore, when we explore this material, we must remain conscious that these records do not faithfully represent women's 'voices', but rather offer insights into female encounters with the law.[421]

Many of the depositions which contain evidence relating to plague nursing concern testamentary disputes. For example, in the loose depositions dating from July 1637, we meet Elizabeth Walker, called as a witness to testify about the last wishes of Thomas Ayton. By her own description, Elizabeth 'was hired to be a keeper' to Thomas during 'the time of the sickness'. He was at the time dying of the plague, but Elizabeth reported that she did not enter his home until the Thursday before his death, on which day he also decided to declare his last will and testament. Elizabeth deposed that Thomas 'departed this life' on Saturday morning, and she attended his burial the same afternoon. The remarkably short time between death and burial likely reflected contemporary beliefs about contagion, and the desire to avoid further spreading the disease. It is interesting to note, however, that Elizabeth attended the funeral herself. The depositions do not provide any information about the relationship between Elizabeth and Thomas prior to her being hired as a keeper, so it may be that they had a pre-existing relationship that would explain her attendance. The unfamiliarity of the some of the other deponents, however, the remainder of Thomas's friends who visited him in his final days, suggests that this may not have been the case. They all refer to Elizabeth as 'his keeper', as opposed to a neighbour or friend. If Thomas and Elizabeth did not have a pre-existing relationship, her attendance may reflect the strong bonds forged between keeper and patient during periods of quarantine, a phenomenon also discovered by

---

examining pre-industrial Sweden. Most recently, Jane Whittle and Mark Hailwood developed this approach further to demonstrate how women's work, despite being crucial for household survival, was undervalued and marginalised. See Sheilagh Ogilvie, *A Bitter Living: Women, Markets and social Capital in Early Modern Germany* (Oxford, 2003); Maria Ågren (et al.), 'Making Verbs Count: the research project 'Gender and Work' and its methodology', *Scandanavian Economic History Review,* Vol 59, Issue 3 (2011), pp. 273-293; Jane Whittle and Mark Hailwood, 'The gender division of labour in early modern England', *The Economic History Review,* Volume 73, Issue 1 (2018), pp. 3-32. See also Barbara Hanawalt, *Ties That Bound: Peasant Families in Medieval England* (Oxford, 1986), as the first to compile data of this type. Hanawalt looked at medieval coroner's inquests from the thirteenth and fourteenth centuries to observe gendered differences in the location and type of tasks men and women were engaged in when an accident occurred.

[421] Bronach Kane and Fiona Williamson (eds.), *Women, Agency and the Law 1300-1700* (Oxfordshire, 2015), p. 2.

Wrightson.[422] Elizabeth is described in the deposition of a local grave maker, again as a 'keeper' to Thomas Ayton. Upon hearing that Ayton was infected with the disease, the grave maker travelled to his house one Friday evening to enquire about his health. Elizabeth answered that he was 'very sick', and by Saturday, when he called again, the man had died.[423] For women and men as sick as Thomas Ayton, their keeper, it seems, acted as their mouthpiece, carefully relaying their dying wishes to the neighbours and friends who gathered outside locked doors and open windows. Elizabeth Browne is another keeper who acted as the mouthpiece of her patient. The deceased was a man named William Grinwell. Part of the manuscript is damaged and missing, but we can make out that one of the deponents, Henry Rowmaine, declared that Grinwell delivered his nuncupative will to a scribe named John Netherwood. The particulars of this will were, he wrote, declared to Netherwood 'out of a window' from 'the mouth of Elizabeth Browne...keeper'.[424] Oftentimes this would be an individual's only way of communicating with the outside world.

Several of the keepers referenced in the Durham consistory court records act as witnesses to verify the dying wishes of those they cared for. This is the case of the contested estate of Anthony Robson, which also features a rare instance of a documented male plague nurse. Anthony Robson, 'being visited w[i]th the plague whe[n] he dyed' had been removed to the lodges near Newcastle, likely those erected on the Town Moor. Like many of the depositions in this collection, the manuscript is damaged, and some sections are now lost. As it stands, we can make out that William Gardiner of Newcastle had been 'requested by Joh... to be his keep[er]'. Although we cannot be certain, this may refer to John Hall, later named in the deposition as Robson's executor, who we may assume was a relation or close friend. According to Gardiner, approximately twenty days before his death, Robson declared his wishes for the settling of his estate 'of his owne accorde' and had the same set down in writing by one of the watchmen. These events were confirmed by the second witness in this case, Anne Stevenson, who was 'likewise visited' with the plague and was at the time residing in the lodge next to Anthony Robson. She deposed that she had witnessed Robson declare his last will in the

---

[422] See Wrightson's chapter 'Bequests and Legacies' in Wrightson, *Ralph Tailor's Summer*, pp. 87-97.
[423] Durham University Library Archives and Special Collections (hereafter DUL), DDR/EJ/CCD/2, pp. 23-26.
[424] DUL, DDR/EJ/CCD/2, Consistory Court Depositions (loose), May-June 1637, p. 4.

presence of herself and Anthony Gardiner, and had nominated John Hall to be his executor, 'who then tooke

great Care of him'. It is not wholly clear if this statement refers to John Hall, the executor, or Anthony

Gardiner, Robson's keeper. After leaving the lodges, both Gardiner and Stevenson were summoned once

again by Hall to set their marks upon the second 'fayre' copy of the will. In this instance, and those above,

keepers were viewed by the families, friends and courts as reliable witnesses, capable of relaying honestly the

dying wishes of their patients. The claims outlined above that plague nurses were untrustworthy, then,

appear largely unfounded, although this is not true of all plague workers. In the case of William Robson for

example, the testator wished to outline his intentions for his goods 'fearing the Cleansers should deceive him

or his'.[425] Whilst it is true that in some cases the role of cleansing and nursing could be combined, in this

instance they appear to have been completed by different individuals. Robson declared his wishes to his

keeper, Anne, and Isabell Bewick, his then servant. His wife, Alice, was reportedly also sick and lying in

another room in the house.

Another notable example of the honesty of plague nurses can be found in the case of Margaret Hyndmers,

who was sent for on 8 September 1636 to be a keeper to the merchant John Stobbs, he 'being a widower and

havinge noe body in his house'. Her deposition tells us that, upon arrival, Margaret knocked at the door and

John 'spoke to her out of a chamber and told her that he was not able to come and open the dore'. Instead he

'willed her to goe to a Smyth and get his helpe to put her in att a window of the same house, which she did

accordinglie'. Once inside, Margaret found John 'satt upon the chamber floare not able to get to his bed

without helpe, and soon after she helped him to his bedd his leggs failinge him'.[426] This remarkable case is

unsurprisingly cited by Wrightson and others. However, an even more interesting part of this deposition

occurs *after* John's death, and, to the best of my knowledge, has not been cited in a scholarly work before.

Margaret explained that she was visited by a man named Thomas Watson, who, at the behest of another, one

George Lamb, asked her to falsify her deposition to the court. John had settled his estates and goods jointly

---

[425] DUL, DDR/EJ/CCD/2 Consistory Court Depositions (loose) 1637, pp. 5-7.
[426] DUL, DDR/EJ/CCD/2 fo. 33.

upon his nephew, John Stobbes (the younger) and his apprentice, Robert Fenwick. However, Thomas Watson asked Margaret to depose that she saw another will, one in which George Lamb and John Stobbes the younger were named joint executors of the estate. Watson told Margaret that he intended to 'pay her Royally as ever she was paid her life' if she agreed, but she refused. Here, then, we see an example of a plague nurse who refused to lie, even when she would have benefitted greatly from it.

Closely linked to the probate disputes we find in the consistory court depositions are the wills of those who died during the outbreak. These are another valuable source for the practice of plague nursing. They provide more detail on the logistics of the practice, telling us how long these women worked as nurses and how much they were paid for their services. Agnes Peireson, for example, received twelve shilings 'for her paynes' whilst keeping or caring for William Grey and his family for nine weeks along with a further twenty-two shillings and six pence for her 'meate and drinke the said nyne weekes'.[427] Alice Dickson's keeper received three shillings a week for eleven weeks and 16s. 6d. was allotted for their meat and drink during this time. Unusually, Alice Dickson's inventory also shows that three additional shillings were allotted 'for a woman to help the keper', presumably for one week, although this is not specified. What this woman's role was, and why Alice's keeper needed extra assistance, also remains unclear.[428] The wills also provide some qualitative evidence for the relationship between the sufferer and the nurse in the form of legacy gifts. It was not unusual in this period for the dying to bequest small sums of money or goods 'for a token' to individuals outside of their immediate family.[429] Wrightson has already documented the significance of 'tokens', small gifts that reflected the emotional bonds between families, neighbours and friends, many of which had been established by the experience of the plague itself.[430] Similarly, Olivia Formby has further emphasised the emotional significance

---

[427] DUL, DPR1/1/1585/G1/1-4.

[428] DUL, DPR1/1/1606/D6. A note accompanying her inventory states that Alice was 'one of the pore which was mantaned [maintained] of the maidlenes', meaning that she was maintained by the Hospital of St Mary Magdelen. Her inventory also states that prior to contracting the plague, Alice had also suffered from 'the James' sickness' or leprosy.

[429] J.S.W. Helt, 'Women, memory and will-making in Elizabethan England' in B. Gordon and P. Marshall (eds.), *The Place of the Dead: Death and Remembrance in Late Medieval and Early Modern Europe* (Cambridge, 2000), p. 199.

[430] See Wrightson's chapter 'Bequests and Legacies' in Wrightson, *Ralph Tailor's Summer*, pp. 87-97. See also Keith Thomas, *The Ends of Life* (Oxford, 2009).

of plague wills.[431] It is therefore noteworthy that individuals chose to recognise their keepers alongside their other family members and friends. John Laverrock, for example, bequeathed five shillings to Ann Bell 'for her paynes' in nursing him. This was in addition to the eight shillings already allotted in his inventory 'for a kepper keppinge him…when he was sik for xvi dayes' and the ten shillings allotted 'for vittelle[s] for the kepper'. Similarly, Ann Milborne thanked her keeper Jane Foster with twenty shillings, two sheets and two 'happins'. Unfortunately, the debts Ann owed at her death, besides her funeral experiences, are not recorded in her surviving inventory, so we are unable to confirm whether or not this sum was offered in addition to or as part of her standard wages. The fact that these items were bequeathed in her will, and specified 'as a token', in addition to the example of John Laverrock above, however, suggests that they may have been a gift.[432] Where the charges listed in inventories such as John's reflected the formal wages owed to keepers for their services and maintenance, the additional sums recorded in their wills reflect the sufferer's desire to show their gratitude and appreciation. If Wrightson and Formby are correct, we can assume that these gifts were intended to demonstrate appreciation and reflect a significant emotional bond between sufferer and nurse.[433]

The evidence outlined above helps us to build a clearer picture of who these women were and the kinds of roles they played in end-of-life care, but how did they come to be in these spaces? Who, in general, hired these individuals? We have already seen that one keeper, William Gardiner, was likely appointed by John Hall, the executor of the deceased's estate. Another deposition provides more compelling evidence that these individuals were hired by the families and friends of the sufferer. Barbara Hall appears as a witness in multiple probate disputes in 1637, suggesting that her services were frequently sought out. Barbara's story is also enlightening as to what may have compelled these individuals to work in such a dangerous role, having at one stage informed the court 'that her husband is lately dead and left her in debt but how much she knowly

---

[431] Olivia Formby, 'The emotional evidence of early modern English plague wills', *Historical Research,* Volume 94, Issue 266 (November, 2021), pp. 782-805.

[432] DUL, DPRI/1/1636/M6/1 (Jane Foster) and DUL, DPRI/1/1637/L4/1 (John Laverrock).

[433] The practice of leaving small sums of money or gifts for a keeper is not restricted to the north east of England. I would like to thank Olivia Formby for drawing my attention to the following example in a Lincolnshire will: Ann Roucksby (widow) of Louth, for example, bequeathed Widow Fisher, referred to as 'my keeper', 7d. Lincolnshire Archives D&C Wills, Will of Ann Roucksby, Louth, 7 Oct. 1631.

not'.[434] In one instance, Barbara informed the court that she 'was requested by William Cooke to be keeper to his wife...she then layinge sick of the plague'. Barbara reported to the household the following day, by which time 'the said William fell sicke of the plague himself', and she informed the household that she 'would keep to them both'. Here, then, we can see that a plague nurse was initially appointed by a husband to care for a sick wife, before he fell ill himself. The following Monday, when William desired to declare his will, his neighbours 'came to before the dore of his house', and Barbara noted that William was 'lyinge in bed w[i]th his wife' when he 'desired [her] to make his mynde known unto them'.[435] In another example, Isabel Lawson informed the court that Elizabeth Wrigham, 'after her husbands death desired [her] to be her keeper', she then 'being sick of the plague'. Two days later, Wigham declared her will in the presence of Isabel Lawson and Margaret Hills, 'then a servant in the same house'. Here, we can see that once again, the keeper was hired directly by the infected household. Elizabeth Wrigham had sought out Isabel Lawson's services after the death of her husband. Interestingly, we see that Wrigham also employed a female servant, and yet opted to employ Isabel in addition.[436]

In summary, what do the Durham references tell us about the role of plague nursing in early modern plague epidemics, and how do they compare to the evidence found by scholars elsewhere in England? They tell us that in many cases, plague nurses were familiar faces, rather than strangers. Many of the women employed as keepers had known the households they cared for for several years. Even when individuals were seemingly left, as the anonymous pamphlet cited above stated, 'at the mercy of a strange woman', we have evidence to suggest that sufferers formed intense emotional attachments to their keepers, opting to reward them for their service with tokens and gifts. They tell us that keepers were the mouthpiece of the quarantined, carefully relaying the dying wishes of those they cared for, and that their testimony was trusted enough for it to be relied upon in court. They tell us that, unlike in London, keepers in Newcastle were hired directly by the infected household, rather than appointed by parish authorities, suggesting that this was, in general, a much

---

[434] DUL DDR/EJ/CCD/2 Loose Depositions 1637, p. 8.
[435] Ibid., p. 7.
[436] Ibid., p. 58.

more informal, community-based arrangement.[437] And finally, we do not see any evidence of the vitriol that we can see in the representational texts outlined above. Why is this the case? Why might we see such a stark disparity between the way plague nurses are represented in printed literature compared to the way they are portrayed by those who had first-hand experience of their efforts? The answer may lie in the experience of the sickroom, specifically in the act of touching a patient. Laura Gowing has recently provided a nuanced analysis of the role of touch in shaping seventeenth-century gender relations, power relations and social hierarchies: 'Seventeenth-century bodies', she writes, 'existed in a different conceptual world'.[438] She finds that women's bodies in this period were objects of 'official regulation, informal surveillance, and regular, intimate touch by women and men'.[439] Men's bodies, by contrast, were not controlled or policed by touch in the quite the same way. In the context of the plague encounter, however, women, sometimes strange women, were thrust into intimate situations touching the bodies of men. They would sweat them, dress their sores, and in many ways act in a more 'medical' capacity, thereby subverting the usual order. In theory, this was an exceedingly distressing thought. I would argue that it is this theory that produces the bitter criticism of plague nurses that we see in the printed material. In practice, however, the act of touch was much more acceptable, even welcome. To the individuals actually receiving this essential care, it was likely that there was less emphasis placed on the theory of propriety or gender roles, and more focus on the immediate need for comfort and healing. The practical realities of the situation made such intimate interactions necessary, and the care provided by these women was probably seen as vital, regardless of the social norms that were otherwise being challenged.

4.3 The 'professionalisation' of plague nursing in early modern England

The term 'professionalisation' is possibly a little anachronistic in this context. No one outside of the elite could claim the title 'profession', and among the wide variety of medical practitioners active in early modern

---

[437] There are some examples from London which suggest that plague nurses were hired directly by the infected household. See Helen Ricketts and Elizabeth Hunt discussed above on pp. 18-19. London Metropolitan Archives, WJ/SP/1645/011 and WJ/SP/1645/012.
[438] Laura Gowing, *Common Bodies: Women, Touch and Power in Seventeenth-Century England* (New Haven, 2003), p.6.
[439] Ibid., p. 16.

England, only one group, physicians, self-consciously considered itself to be 'professional'.[440] The term 'profession' was applied by and to physicians in order to represent their work as a higher occupational pursuit, one that allowed them to align their authority with their colleagues in church and law. Here, instead, we are using the term to assess the level of formalisation of the role of plague nursing, focusing on the skills and tasks associated with the role, and whether or not contemporaries perceived these to be in some way specialised or distinct, as opposed to the degree of formal or institutional recognition. In short, this third and final section aims to assess whether the evidence outlined above suggests that plague nurses in early modern England possessed specific abilities and knowledge that distinguished them from more general caregivers.

Unlike physicians, plague nurses did not have any institutional training, there were no formal guidelines to follow and no process by which they could qualify and confirm their skills to others. As we have seen above, the gendered nature of early modern record keeping means that we have only fragments of evidence consisting of incidental references to their work. Nevertheless, it remains clear that the small details that we have been able to obtain about their activities hint a much larger picture of professionalisation within the practice of plague nursing. Firstly, it is worth remarking on the fact that even in houses in which wives and female servants were present, a plague nurse was still employed. In the case of William Robson described above, for example, Robson employed the services of a keeper to care for him despite the fact that both his wife and female servant were present inside the home. This suggests that the role of a keeper extended beyond the typical duties of female caregivers within the home, and external assistance would be obtained. Secondly, we have evidence to suggest that the same individual would be hired repeatedly to care for multiple families. For example, Barbara Hall gives evidence in multiple probate disputes, each time describing her work as a keeper. Again, this hints at a broader picture of professionalisation or specialisation as it suggests that there were individuals who were seen to possess the skills required to complete this work, whose services were repeatedly called upon. Thirdly, although in most cases a plague nurse appears to have been hired

---

[440] Harold J. Cook, 'Good Advice and Little Medicine: The Professional Authority of Early Modern English Physicians', *Journal of British Studies,* 33 (1994), p. 2. See also Wilfred Prest (ed.), *The Professions in Early Modern England* (Oxfordshire, 1987), especially Margaret Pelling's chapter, 'Medical Practice in Early Modern England: Trade or Profession?'.

directly by the infected household, we have evidence to suggest that when authorities did decide to intervene, they may have recruited individuals from other towns. The petitions of Ellen Davenham and Margarett Walker, cited above, tell us that the 'Constables and other Inhabitants' of the town of Middlewich specifically called upon these women. If this role was merely an extension of ordinary female caregiving duties, it would not have been necessary to recruit plague nurses from outside the community, especially at a time when movement between infected areas was closely monitored and policed. Perhaps these two women were known to possess the necessary skills required to carry out the role effectively. Perhaps no one in the infected town could be persuaded to carry out the role. Either way, this evidence suggests that plague nursing was, in many ways, a specialised role.

And lastly, despite the fact that many of the representational sources listed above sought to discredit plague nurses, they do demonstrate the wide range of skills and knowledge related to the practice. For example, several printed texts refer to the practice of nurses sweating patients and dressing their sores. They also refer to nurses washing linen and keeping rooms clean and free of infectious materials. In addition, there are other tasks, such as conversing with patients, watching over them, and monitoring their sleep. Thomas Thayre's plague treatise, for example, advised that the keeper was responsible for ensuring that the infected remained awake until after they were bled. These tasks in and of themselves may not be too far removed from the ordinary household caregiver, but the fact that they are continually repeated in these texts as the duties of a plague nurse, suggests that these were in some ways separate. A female servant could have ensured that their employer was fed and that linens were clean, but the employment of a dedicated plague nurse suggests that the added threat of the disease warranted specialised assistance that the ordinary servant could not, or could not be persuaded to, provide.

Conclusion

We began this chapter by acknowledging the wealth of recent developments in medical history and the history of women's work. At each stage in their development, these closely linked bodies of scholarship have

sought to redefine what 'counts' as work, both medical and otherwise, and thereby uncover the wealth of activities operating beyond traditional occupational titles and paid employment. It is hoped that this chapter has contributed fresh evidence to these discussions by centring plague nurses and their work, by looking at the incidental references to their activities in administrative records and analysing the surviving fragments. In conclusion, evidence of plague nursing in northern England is rare, but not unheard of. We are most likely to uncover evidence of their activities in court records, especially consistory court records relating to disputed probate, as well as wills and inventories. This a symptom of the period, where their work was poorly valued and largely unrecorded.

What little evidence does survive tells us not only that this practice happened, but also that it may have operated differently in the north than it did in London. Unlike those in London, plague nurses in the north of England appear to have been hired directly by the infected household with little intervention from parish authorities. Plague nurses were, in general, drawn from the poorer sections of society, many of whom were widowed. They were responsible for a range of tasks, some of which leaned more towards what we might typically imagine as 'medical' duties, i.e., monitoring sleep, dressing sores and sweating patients, and others which fell more under the tasks of 'bodywork', e.g., washing linen and providing food. Contemporary printed literature such as plague treatises, pamphlets and plays depicted these women as at best, ignorant, and at worst, criminal. By piecing together fragments of evidence from a broader range of sources, however, a different picture emerges. Rather than objects of fear and disgust, plague nurses emerge from the records, in many cases, as trusted, diligent care workers, many of whom formed strong bonds with their patients. And finally, this chapter has argued that plague nursing was, to some extent, a 'professionalised' practice. There were individuals who were specifically recognised for their expertise, skills, or general willingness to perform these tasks, distinct from the general population. In doing so, this chapter underscores how plague nursing problematises conventional categories of labour, revealing it as a form of work that defies traditional boundaries by combining elements of paid and unpaid care, medical skill, and social duty in ways that complicate our understanding of women's roles in early modern society.

Chapter Five: Life after the Plague in Early Modern Lancashire

At the Lancaster Sessions on 9 January 1632, it was reported that 'the Towne of Dalton hath beene this longe tyme infected with the plague' but now, fortunately, 'itt hath pleased almighty God to withdrawe his visiting hand'. However, the author also informed the justices that 'theire remained both many poore persons in the same Towne, and the charge of clenceing and dressing the same Town wilbee great'.[441] Once the immediate threat of the disease had dissipated, communities began the difficult process of returning to 'normal' after an outbreak of plague. Attending to the poor and cleansing the town of infection represent two small parts of this process. Whilst much scholarly attention has been paid to the broader social and economic impact of plague, particularly with reference to the mid-fourteenth-century outbreaks known as The Black Death, the immediate aftermath of an outbreak has received comparatively little attention.[442] This is due in large part to the shortage of source material on the subject. As Ann Carmichael has observed, most written accounts of plague were composed well after the events they claim to witness, thereby imposing 'a narrative order on a past plague, assigning its beginning, middle, and end, and selecting which facts and memories are needed to capture the essence or meaning of the plague'.[443] Scholars of English plagues may look to diarists such as Samuel Pepys and John Evelyn as contemporary witnesses to the disease and its aftermath. However, as these accounts necessarily record only the ways in which the plague impacted the lives of their elite, male authors, they fail to show us how ordinary people began to rebuild their lives following a severe outbreak. In an entry written on 3 September 1665, for example, having got up and put on his 'very fine' coloured silk suit and new periwig, Samuel Pepys pondered 'what will be the fashion after the plague is done, as to periwiggs, for nobody will dare to buy any haire, for fear of the infection, that is had been cut off the heads of people dead of the

---

[441] R. Sharp-France, 'A History of the Plague in Lancashire', *Transactions of the Historical Society of Lancashire and Cheshire* Volume 90 (1938), pp. 77.

[442] See, for example, Lawrence Raymond Poos, *A Rural Society After the Black Death: Essex 1350-1525* (Cambridge, 2004); Alan Kissane, *Civic Community in Late Medieval Lincoln: Urban Society and Economy in the Age of the Black Death, 1289-1409* (Suffolk, 2017); Mark Bailey, *After the Black Death: Economy, society and the law in fourteenth-century England* (Oxford, 2021).

[443] Ann G Carmichael, 'The last past plague: the uses of memory in Renaissance epidemics', *Journal of the History of Medicine and Allied Sciences*, (1998), p. 134.

plague'.[444] Such entries demonstrate that elite men like Pepys likely had radically different concerns to those of ordinary people. This chapter aims to gain access to those concerns by using a series of petitions to the Lancashire Quarter Sessions court to re-create a street-level perspective of what it meant for people from a range of socio-economic backgrounds to pick up the pieces after an outbreak of plague.

The chapter aims to make three main contributions. Firstly, it aims to demonstrate the usefulness of petitions as sources for accessing responses to plague from a range of perspectives, many of which are typically under-represented such as women and the poor.[445] Secondly, it contributes to the rapidly expanding interdisciplinary field of disaster studies, by exploring and challenging the concept of 'resilience'. Within the social sciences, scholars have drawn attention to the potential for understandings of resilience to perpetuate inequalities. Consequently, many are moving away from a definition of resilience that includes or revolves around a sense of personal responsibility (i.e., those that treat resilience as a skill that anyone from any background can build) towards a wider definition that considers 'broader, person-environment interactions'.[446] When analysing how early modern societies fostered resilience, we should not limit our analysis exclusively to the arrangements implemented by large institutions and governing bodies. Responses to plague were formed at a variety of levels. At the macro-level, we have the general plague orders produced by central governments. Much more influential, however, were the administrative responses implemented by local government. Lastly, at the micro level, we have community and individual responses.[447] This chapter argues that it is on this level that we find the most dominant form of welfare and assistance. The usual forms of poor relief sanctioned by the crown were unable to cope with the extraordinary demands of a plague outbreak. Resilience and recovery, in the first instance, were largely enabled at the parish level by neighbours, friends and family members. It was only when these bonds were pushed to breaking point that individuals

---

[444] Henry B. Wheatley (ed.), *The Diary of Samuel Pepys M.A. F.R.S.* Volume V (London, 1897), pp. 184-185, p. 64.

[445] Some of the petitions and themes discussed in this chapter appear in an article recently published in the American Historical Review. See Rachel Anderson, 'The Lancashire Plague Petitions: Life After the Plague in Early Modern England', *The American Historical Review,* Volume 129, Issue 4 (December 2024), pp. 1640-1667.

[446] Angie Hart (et al.), 'Uniting Resilience Research and Practice with an Inequalities Approach', *SAGE Open,* 6 (4), (2016).

[447] For a detailed discussion of support structures at different levels in the context of elderly care in eighteenth-century England, see Susannah R. Ottaway, *The Decline of Life: Old Age in Eighteenth-Century England* (Cambridge, 2004), especially chapters four to six.

would petition local authorities for assistance. The petitions discussed in this chapter reveal the point at which community support was no longer sufficient and demonstrate a series of unique needs and essential interventions made by the Court of Quarter Sessions. More importantly, however, they also offer rare and valuable insight into the bonds that sustained early modern communities prior to them seeking institutional assistance. And lastly, the final contribution of this chapter is to provide some answers to the question 'when do epidemics end?'. The epidemiological 'end' of an epidemic, i.e., when the disease itself has died out, does not necessarily coincide with its social 'end', i.e., when the disease ceases to be a major factor shaping or influencing an individual's daily life. Recent developments within the field of disaster studies have demonstrated that often disasters do not kill but still have long-lasting disruptive effects on societies and institutions.[448] This chapter will use petitions to assess the ways in which plague continued to impact the lives of ordinary people long after the disease had relinquished its grip upon a town.

The Sources

Recent scholarship has demonstrated the ubiquitous nature of petitions in early modern England and their potential for accessing the concerns of traditionally marginalised communities.[449] Jonathan Healey, for example, has commented that the value of poor relief petitions lies in the 'startlingly evocative qualitative picture they present of the lives of the poor'.[450] Their use to explore experiences of and recovery from outbreaks of plague, however, has hitherto been underexplored. The petitions selected for this chapter were all submitted to the Lancashire Courts of Quarter Sessions. They were sent by a variety of people, including women and the poor, many of whom would likely have been obscured from the historical record entirely if not for these requests. In most cases, they were written not directly by the petitioner themselves, but on their

---

[448] See, for example, A. T. Brown, Andy Burn and Rob Doherty (eds.), *Crises in Economic and Social History: A Comparative Perspective* (Suffolk, 2015) or Bas van Bavel (et al.), *Disasters and History: The Vulnerability and Resilience of Past Societies* (Cambridge, 2020).
[449] See, for example, https://petitioning.history.ac.uk/about/. See also Stewart Beale, 'War widows and revenge in Restoration England', *The Seventeenth Century*, 33:2 (2018), pp. 195-217; Laura Flannigan, 'Litigants in the English "Court of Poor Men's Causes," or Court of Requests, 1515–25', *Law and History Review*, 38:2 (2020), pp. 303-337; Steve Hindle, *On the Parish: The Micro-Politics of Poor Relief in Rural England c.1550-1750* (2004); R.A. Houston, *Peasant Petitions: Social Relations and Economic Life on Landed Estates, 1600-1850* (2014); Alison Thorne, 'Women's Petitionary Letters and Early Seventeenth-Century Treason Trials', *Women's Writing*, 13:1 (2006), pp. 23-43.
[450] Jonathan Healey, *The First Century of Welfare: Poverty and Poor Relief in Lancashire, c. 1620-1730* (Suffolk, 2014), p. 171.

behalf by a local scribe. Olivia Weisser therefore reminds us that whilst this means petitions of this kind offer 'rare insights into the lives of illiterate men and women', they arrive to us mediated through the words of others. [451] The scribes who drafted these petitions adhered to formulaic legal phrases and deferential language, rather than repeating the petitioner's words verbatim. Nevertheless, where these petitions may not provide a window into the actual words of ordinary people, they were at the very least a collaboration between a scribe and a petitioner, meaning that the concerns and desires expressed in these petitions can be regarded as reliable.

Dating between 1631 and 1653, the thirty petitions explored in this chapter allow us to reconstruct the immediate concerns of ordinary people following an outbreak of plague through a series of deeply personalised narratives. They include requests for maintenance and relief for plague widows and orphans, a request for a license to bake and brew following the death of a husband and brother and claims concerning damage to homes commandeered as pesthouses. They also show the difficult process faced by authorities in chasing up relief payments in arrears long after the outbreak had ended. Each one can be seen as a micro-history of an individual, a household or a community recovering from a moment of crisis. They help us to understand the networks that simultaneously sustained and controlled the poor, their interdependence on others for recovery and the interventions required to ensure the resilience of their communities.

5.1 Plague orphans

One of the most common petitions to the quarter sessions courts in the aftermath of a plague outbreak concerned the maintenance of orphaned children. Children who had lost their families to the disease were placed into the care of surviving relatives, and when no such individuals could be found, neighbours and friends. For example, Peter Lealand, 'a poore Chylde' whose parents 'dyed of the great infectious sicknes of the plague in Pennerdome near Preston' had been 'releived and kept' by his grandfather, John, since his

---

[451] Olivia Weisser, *Ill Composed: Sickness, Gender and Belief in Early Modern England* (New Haven, 2015)*,* p. 163.

parents' passing. His grandfather's death, however, had left Peter 'destitute of frendes' and in need of

relief.[452] In a similar case, the 'humble peticone of Anne Ashawe, widowe' tells us that the wife of James

Leyland died leaving behind a one-year-old infant. After his wife's death, Leyland had asked our peticitioner,

Anne, to 'keepe that Child for a quarter of a yeare wth premisse to satisfy her sufficientlie & fynde it clothes'.

Anne was given seven shillings 'in hande' for her services, but within nine days of this agreement, Leyland

himself had died of the plague along with his apprentice leaving Anne with the orphaned child. She provided

the child with 'meate drinke & all other necessaries fittinge', but told the court that she was 'a pore woman'.

Consequently, she was 'not onlie vnable to forbeare her paym[en]te but alsoe desirous to bee Rid of the Child

in respecte shee is aged & hath received great losses'.[453] Anne's case, therefore, offers insight into the

community bonds, assistance and support that sustained the Leyland family following one tragedy, but were

rendered insufficient when an outbreak of plague decimated the family further. The loss of one parent could

be accommodated by placing the child into Anne's care, but the loss of a second parent meant that Anne was

unable to continue and was forced to petition the courts for help.

It appears that in many of these cases, neighbours and friends were happy to take immediate charge of

orphaned children, but appealed to the courts for a more permanent arrangement. Many petitioners also

expected to be reimbursed for any expenses already incurred on the child's behalf. In July 1632, for example,

John Clifton informed the court that John Griffin, his wife, and all their children save one had died in the

recent outbreak of plague. Clifton had taken the sole surviving child, Elizabeth, into his care for the previous

nine months. During this time, Clifton 'hath of his owne p[ro]per costs and charges releeved the said child wth

all necessaries'. Now, he writes, he is 'vnable to keepe & maintayne the said childe anie longer' and asks the

justices to 'take order for the child' and also 'to take consideracon of this pet[itione]rs charge for the time

past'. A note at the bottom of the petition in a different hand states that the matter had been turned over to

the churchwardens and overseers of the poor.[454] The petition does not provide any evidence that would hint

[452] LA, QSB/1/166/89.
[453] LA, QSB/1/102/72.
[454] LA, QSB/1/105/51.

at the relationship between Clifton and Griffon. However, a similar case can be found in 1647, in which the relationship is explicitly stated. The petition concerned a request for the maintenance of a boy, aged around six, who, like Elizabeth, had been the only survivor when plague struck his family. In this instance, we are told that the petitioner, John Duckeworth, was the owner of the child's family home. Following the death of the boy's family, Duckeworth 'did move fo[u]re neighboures to prize the said goods' and that the boy had previously been maintained on the proceeds of this appraisal. 'The goods being spent', however, Duckeworth now sought assistance from the courts. He states that the churchwardens refused to take in the boy without orders from the court.[455] A note at the bottom of the page tells us that the overseers were to provide for the child, who had no goods of his own.

Not all petitioners desired to be rid of the children in their care, however. One poignant example demonstrates that some grew fond of their charges, and simply wished to have support from the court to help them to keep them in their custody. Ellen Anderton petitioned the Wigan sessions in 1650 for the maintenance of the children of Thomas Starkie (or Starkey). We are told that Thomas Starkey and his wife had both died 'of the sicknes' in the recent visitation of plague. Parish registers provide a little more detail. Thomas Starkey had died on 4 April 1649 'att the Cabins'. His death was one of 17 others 'at the cabins' in April of that year alone. His wife, Elizebeth Starkey, had died 5 days earlier on 30 March. Elizebeth was one of sixteen deaths in March explicitly listed in the register as 'Plague' deaths.[456] We do not know how old the children were, only that they are described in the petition as 'litle infantes'. When Elizebeth and Thomas died, their children were left 'destitute and altogether voyd of frends helpe and releiffe' and 'vpon the brincke of overthrow'. The alderman, then Mayor, had asked Ellen 'to come and live with the said Children and looke to them' ensuring her that 'shee should have both Manteynance for them all and wages for paines'. Accordingly, Ellen 'came to the said Children and abode wth them'. She even 'treated them whylst they had all the sickness', by which, she wrote, 'the youngest wench is now laymed'. '[E]ver since', the petition continues,

---

[455] LA, QSB/1/297/44.
[456] Wigan Archives Service, All Saints Parish Records, DP/24/1/1.

'shee hath taken loue [love] to them and they to her soe that shee hath continued wth them to this p[re]sent',

despite the fact that she had not received the maintenance or other payments she was promised. Her

situation had left them in such a 'miserable poore and famishing condition', that she would be forced to leave

them 'which willbee to their utter overthrowe and undoinge'.[457] This example is unique, not only because it

offers insight into the mechanics and the logistics of maintaining plague orphans, i.e., Ellen's relocation to live

with the children, and her role in providing medical treatment for them, but also because it offers valuable

insight into the emotions and bonds formed by such an experience.

Although emotions have long been centred in the fields of sociology, anthropology and psychology, the study

of emotions within history is a relatively new but rapidly expanding field.[458] Before its development, the

history of emotions had in the past been considered at best, impossible to write or at worst, unworthy of

scholarly attention.[459] Now, historians are using a wide range of sources to recover the emotions of past

societies. Ellen's petition is a source that offers a rare insight into the emotions of a woman experiencing a

potentially life-altering change of circumstance. In her petition, she states that she loved these children, and

was loved by them in return. Olivia Formby's study of the emotional content of plague wills reminds us that

whilst the historian 'cannot hear words that were only spoken and never scrivened', early modern emotions

'were often embedded within actions and symbols'.[460] Both the choice to include the above-mentioned

phrase, along with the act of appealing to the courts to keep the children when many in her situation had

asked for other arrangements to be made, suggests that the love felt between Ellen and the orphaned

children was felt very strongly. We cannot know for certain whether or not Ellen had any prior relationship

with the orphaned children, but the statement at the start of the petition, that the children were left

'altogether voyd of frendes', combined with the fact that Ellen was to receive not only maintenance for the

children, but also wages 'for her paines', suggests that she likely did not, and was employed as an emergency

---

[457] LA, QSP/27/18.

[458] For a range of examples of the use of emotions in historical studies see Andrew Lynch and Susan Broomhall (eds.), *The Routledge history of emotions in Europe, 1100-1700* (Abingdon, 2020), p. 10.

[459] Jan Plamper, *The History of Emotions: An Introduction* (Oxford, 2012), pp. 40-59.

[460] Olivia Formby, 'The emotional evidence of early modern English plague wills', *Historical Research,* Volume 94 (2021), p. 805.

measure when no relatives or family friends could be found. This makes her petition to keep the children within her care even more noteworthy. This example also makes important points about the ways in which resilience was fostered, in that recovery may not necessarily be a return to 'normal' or life before a crisis, but it may be the ability to forge a completely new way of life.

Ellen had been placed into the home of the orphaned children by authorities, however, it seems that other arrangements were made on a less formal basis. One final petition offers insight into the dangerous work of plague cleansers and demonstrates how the need to accommodate plague orphans could intersect with existing childcare arrangements. The petition, made to the Ormskirk sessions in 1631 and addressed to John Bridgeman, Bishop of Chester (1577-16522), was for the maintenance of the children of Elinor Johnes, one of whom had been orphaned by the plague. Although not the petitioner, Elinor is very much the focus of this story. From the limited details we can glean about her life we learn that in September 1631, Elinor was employed by the parish of West Leigh to 'dresse and cleanse' the home of her neighbour, James Dunster, after the death of his family due to plague. She was to receive fifty shillings for undertaking this exceedingly dangerous task. Before doing so, she had left her 8-year-old son in the care of the petitioner, Richard Wrinston and his wife. Ellinor, we are told, 'died therin', suggesting that she became infected during the course of her role as a plague cleanser. After Ellinor's death, authorities not only refused to take in Ellinor's son but also failed to pay the fifty shillings that Ellinor was owed by the parish.[461] Wrinston and his wife had also taken in another child of Ellinor's, an illegitimate girl named Mary, but informed the Bishop that Mary's father, James Lowe, still lived, and he could prove that he had fathered the child. Lowe had previously paid for Mary's 'table' or food and drink, but following Ellinor's death, had since refused to take his child or to pay for her maintenance.[462] Wrinston asked the court to examine his situation concerning the orphaned boy, and to send for James Low so he might prove him to be Mary's father, presumably so Low could resume paying for her maintenance. This example shows us how emergency measures taken during the plague might extend

---

[461] LA QSB/1/102/69.

[462] The term 'table' here has been interpreted as the provision of food for meals or board. See "table, n.". OED Online. June 2022. Oxford University Press. https://www.oed.com/view/Entry/196785?rskey=kYY04e&result=1 (accessed June 24, 2022).

into the period after its disappearance. Ellinor's son had been placed into the care of Richard Wrinston and his wife as a temporary measure whilst she completed the dangerous task of cleansing an infected home. Although all parties must have understood that some risk was involved, neither Wrinston nor his wife would have expected to take on the responsibility for two children permanently, having agreed initially to care for one child over the course of a few days.

In addition to arranging care and maintenance for plague orphans, some authorities would provide specific, one-off payments for necessary items such as clothing or food. There are no examples of such payments in Lancashire quarter sessions records, but we can assume that they existed given similar evidence elsewhere as this example from Kent demonstrates. Thomas Hammon, a young boy from Maidstone who lost his family in an outbreak of plague in 1603, was provided with a new outfit when the infection had ceased. He was given two and a half yards of fustian for breeches at 3^s 4^d, half an ell of canvas to line his doublet, two and three quarter ells of cloth at 1^s 8^d for a shirt, a pair of shoes for one shilling, three quarters of a yard of broadcloth at 6^s 6^d and two dozen buttons and a skein of silk at 10^d to make a jerkin. Spinning the wool and knotting two pairs of stockings cost 2^d 4^d; the total cost of his outfit was 15^s 8^d.[463] In summary, then, the above examples demonstrate that orphaned children were a significant concern for both communities and authorities in the aftermath of a plague outbreak. In all the above cases, the unexpected arrival of an orphaned child or children led to a need for intervention from the courts. However, these examples also show us the structures that existed within early modern communities which allowed societies to function during times of crisis. In each case, an emergency solution had been found, and it was only when these solutions proved inadequate, through an unexpected death, or a further change of circumstance, that communities would turn to authorities to provide further assistance or establish permanent arrangements for orphaned children.

---

[463] Maidstone, Centre for Kentish Studies, PRC21/16/21; PRC21/16/371; PRC21/17/21; PRC21/17/120; PRC21/17/130.

5.2 Plague Widows

Another common theme found among the Lancashire plague petitions is the plight of plague widows. Women who had been widowed by the disease were a concern for local authorities, as households that had at one time been self-sufficient might now be expected to rely upon the parish for maintenance. On 8 October 1652, Thomas Williamson, then Mayor of Liverpool wrote to John Fox, a local magistrate, describing the severity of their situation:

> Inde[e]d it hath beene sore with 2 Famillyes upon the hilles For the month past, First Luke Harisones wife and one of his Children died of the pest, since Luke himselfe died, As allsoe one Stringer, a Cobler, died and 2 of his Children. Luke hath 3 Children left, and the Coblers wife and one Child are left, all which are well as yet, blessed bee god. I hope his promis will bee made forth to theare comfort that hee will bee a husband to the widdow and a father to the fatherless. Their is one Rich: Widowes Confined to a cabin on the hills for some miscariges, but wee hope noe danger in him. Wee desire the Lord to Inlarge our hartes with Thankfullness, and desire you and all good Cristians to joyne with us thearein, to which good god I comit you, and Rest, Sir, youre Afectionate Frend to use whilst Tho: Williamson.

Williamson hoped that, in time, God would be 'a husband to the widdow and a father to the fatherless', but immediate action would often be required in order for these households to survive. Twelve of the petitions explored in this sample concern requests for maintenance for plague widows. The majority are written by the widows themselves, struggling to recover after losing their husbands and consequently their primary source of income due to plague. For example, Dorothy Standish's husband had been 'shuttup in his own House' where he later died of the infection. Following his death, Dorothy and her five young children were removed from the town and placed into a cabin where they remained for five weeks and were later confined to their family home for a further five weeks. During this time, she explained, 'all her goods was utterly spoyld and lost, to the utter overthrow and undoing of her selfe and her poor Childer[en], haveing not any thing left to Reliefe them'. Dorothy asked the courts to grant an order to the churchwardens and overseers of the parish to 'grant what Releife shalbee by you thought fitt towards her great Losses'.[464]

---

[464] LA QSP/23/21.

Similar to this case is the request for relief from Elizabeth Melling, whose husband, Thomas, had recently

succumbed to the plague, to her 'great grief and abundant overthrowe'. Elizabeth and her four children were

placed in 'the cabons' for the space of six weeks.[465] They survived, but the inhabitants of the town of Halsall

had since caused her 'to be at the halfe Charge for the keepinge of the dressars in there Cabons...besydes the

Charge of her owne house dressinge', meaning that the town had asked Elizabeth to cover half of the costs of

her stay in the public pesthouse, as well as the entire cost of cleansing her own home.[466] This, she writes, was

'soe greate a pressure she is not able to vndergoe except to her absolut ruine and ou[er]throwe of her selfe &

smale Children'. She asked the court to 'be freed from the said pressure' and allowed to receive 'some p[ar]te

of such money Colected for the Releef of anie Infected places'.

Not all petitions were submitted by the widows themselves; some were written on behalf of the communities

who had cared for widows during the height of the infection but later expected to be reimbursed for their

efforts. For example, the town of Sutton petitioned for the reimbursement of relief paid out to Margrett

Barton, widow of the late Rowland Barton. When the plague reached Ormskirk in June 1648, Margrett, her

husband and child were 'Inforced through want to leave the said towne & to seeke relieffe being in great

danger to starve'. They arrived in nearby Sutton, where Margrett 'did there wthdraw her selfe into a private

Cabbon vntill it pleased god the danger was over past' all the while 'being there relieved by the Inhabitantes

of the foresaid Towne of Sutton duringe the sikenes tyme'. The petitioners asked the court to 'give what

allowance yor worshipps shall thinke meete out of that monie wch the Countie hath allreadie payd towarde

the releife of the poore distressed in the towne'.[467] This petition is also illuminating from the perspective of

mobility during plague outbreaks, as it shows us that, contrary to contemporary orders which largely

---

[465] LA, QSP/67/20.
[466] 'Dressar' or 'dresser' was a term also used to describe plague cleansers in this period. A contaminated home might be 'dressed' or cleansed of infection.
[467] LA, QSP/27/9.

prohibited travel, people facing particular hardship in their own town might travel to a neighbouring town or village in order to find relief.

The petitions of plague widows demonstrate that not only did families have to deal with the unimaginable grief of the sudden loss of husbands and fathers, but they also battled with the heavy financial toll of that loss. This included not only adjusting to a new way of life following the death of a household's primary wage earner, but also dealing with the charges incurred during enforced confinement. It was at this point, after they had exhausted all possible sources of relief within their community, that they turned to the courts for relief. These petitions allow us to learn more about the intervention of local authorities, and their role in enabling resilience and recovery by distributing moneys collected by the county to relieve the sick poor.

5.3 Loss of/Damage to Property

In addition to the physical and emotional toll placed on families, therefore, the Lancashire petitions reveal the material toll of plague, with some petitions listing the specific losses endured because of its appearance. As we have seen in the cases above, many of these losses arose as a result of attempts by authorities to separate infected individuals from the rest of the community by placing them in 'cabins' or pesthouses. These cabins were temporary structures built outside of towns, usually in open common areas. In addition to suffering from the violent symptoms of the disease, the unfortunate individuals placed in these cabins were also left vulnerable to theft and damage to property, often being forced to isolate away from their homes for several weeks at a time. Some turned to the courts to reimburse them for losses sustained during their confinement. The records of the Michaelmas sessions at Preston in 1641, for example, include a recommendation from the justices to ministers for a collection for Jane Singleton, widow of William Singleton, and the losses she sustained whilst isolated for plague. Jane had at one time been in possession of an estate valued at £200. During an outbreak of plague, Jane had been removed from her home and placed in a 'barne...for feare of the infecon of others' during which time 'a great quantity of her estate was stollen and Imbezild [embezzled] away'. Additionally, during 'a sudden violent spring flood', 'most or all of her said estate was taken downe into

the sea'.[468] Where Jane had once been in possession of a substantial estate, she was now unable to support

herself and her children, 'not able to subsist from dayly begging unlesse some charitable course may bee

taken'. Jane's experience, although a somewhat extreme example of a reversal in fortune, was not unique. In

a moving section of the 'true representation of the sad and lamentable condition of the County of Lancaster',

a published report first printed in London on 24 May 1649, Wigan Mayor Ambrose Jolley and his associates

described the impact of plague on the economic fortunes of Lancashire's poor:

> 'it would melt any good heart to see the numerous swarms of begging poore, and the many families that
>
> pine away at home, not having faces to beg...Very many nowe craving almes at other men's dores, who
>
> were used to give others almes at their dores – to see paleness, nay death appear in the cheeks of the
>
> poor, and often to hear of some found dead in their houses, or highways, for want of bread'.[469]

Jonathan Healey has stated that he believes the claims in the account were exaggerated, and the report's

ultimate aim was to secure charitable contributions from London.[470] The appeal for national support does

appear to have been successful, however, for a collection in Lancashire, 'much afflicted with famine and

pestilence' was noted by the Essex clergyman Ralph Josselin.[471] Jane's experience, and the 1649 report,

provide further evidence that existing institutional structures of welfare and relief were unable to cope with

the extraordinary demands of plague.

Although the sick were more commonly housed in temporary wooden structures, occasionally the need

would arise to commandeer existing structures to separate the sick from the healthy. Once the sick had been

liberated from their confinement, these holdings would then be returned to their owners. Some of these

structures, however, were damaged during their use as pesthouses, and petitioners claimed for the damage

---

[468] LA, QSB/1/253/38.

[469] George Ormerod (ed.), *Tracts Relating to Military Proceedings in Lancashire During the Great Civil War,* Remains Historical & Literacy Connected with the Palatine Counties of Lancashire and Chester, Volume II, The Chetham Society (1844), pp. 277-297. For more on the nature and scale of dearth during the 1640s, see Steve Hindle, 'Dearth and the English revolution: the harvest crisis of 1647-50', *Economic History Review*, 61, S1 (2008), pp. 64-98.

[470] Healey, *First Century of Welfare,* p. 220.

[471] E. Hockliffe (ed.), *The Diary of Rev. Ralph Josselin 1616-1683* (London, 1908), p. 67. Also quoted in Healey, *First Century of Welfare,* p. 220.

to their property. This is exemplified in the case of John Catterall, a cooper who 'lately before the sickness called the plague or pestilence fed amongst us' had taken a cottage and garden in Gudlawe Lane. The cottage had been commandeered during the plague to house the sick, some of whom, he reported, pulled down his walls and burnt his doors. It was ordered by the authorities at Wigan Court Leet that he was to have 16s 8d towards the losses 'which hee sustayned by the makeing of his house a Cabin or pesthouse for the Infected of the plague'.[472] This is not the only instance in which property was damaged during the course of a plague outbreak. An entry into the Liverpool Town Book on 9 June 1654 shows that the corporation made an order allowing Captain Thomas Croft a payment of £3 out of the Town's stock because 'his house and lands had been spoiled by infected people being put there in the time of God's visitation of the sickness'.[473] And lastly, a petition to the Chester Quarter Sessions in 1648 reveals what happened when a private plot of land was commandeered for the use of pesthouses. The petitioner, Robert Cranage of Middlewich in Cheshire, had rented a field from a Mr William Yates for the year 1647 for seven pounds. When plague struck the towns of Middlewich and nearby Newton, the constables of those towns had erected cabins on the field for the use of the infected. Cranage lost all profits of the field and 'one Load and a halfe of Hay' which had been taken to cover the cabins, in addition to one adjoining field of grass to the value of forty shillings as well as wood which had been taken to build the cabins worth ten shillings. Cranage explained in his petition that he was obliged to pay the seven pounds rent for the field, but had as yet received no compensation for the losses he sustained during the plague.[474] Most records pertaining to the building of temporary lodges, or cabins, for the use of the infected indicate that these structures were placed on large areas of common land outside of a town. This example is interesting in that it allows us to see that private land was also commandeered for this purpose. It is unclear, however, whether this land was offered voluntarily, or seized by force.

---

[472] Wigan and Leigh Archives, SR5/16/13, Court Leet Rolls, Box 1, Roll 7, f. 20.
[473] Michael Power (ed.), *Liverpool Town Book 1649-1671,* The Record Society of Lancashire and Cheshire, Vol 136, (1999), p. 59.
[474] J. H. E. Bennett and J. C. Dewhurst (eds.), *Quarter Sessions Records with other Records of the Justices of the Peace for the County Palatine of Chester 1559-1760 together with a few earlier miscellaneous Records deposited with the Cheshire County Council,* The Record Society of Lancashire and Cheshire, Volume 94 (1940), p. 134.

Even when land and property were not damaged during quarantine, the cost of confinement could be severe, and landlords claimed to recoup their losses. A brief yet moving petition to the Easter sessions in Preston in 1652 walks the reader through the whole story of quarantine to its sad end. The document reads simply: 'A true note of monies Laid out by mee and my wife for the relefe and mentainence for the space of seuenteene weekes of John Shierrs his wife and fiue children, and for burrying them at their departure in the time of the visetation'. It includes expenses for the family's meat and drink, payments to cleansers for the making of their graves and burial and, lastly, one pound is listed for 'sheets to wind them in'.[475] Another curious document located amongst the petitions to the Midsummer sessions in Ormskirk includes a list of expenses for 'the gentlemen' that 'weare shutt vp in my house being 22 daies since the 23 of June'.[476] It was possibly submitted alongside a more formal petition which no longer survives. The expenses listed in the document provide a clear breakdown of the costs incurred during the quarantine of a private household. We do not know who the owner of the house is, nor is it clear whether they were shut up with the individuals themselves or if they simply supplied the premises for their quarantine. The list includes payments for their 'dyett' (6d. per meal) and a quart of beer per meal, for the washing of six men's clothing, for candles, for three pounds of tobacco, and a further quarter of beer 'to eu[er]ie gent' in the morning and the evening. This is certainly the only instance that I have encountered of quarantined individuals being provided with tobacco. These extra provisions may be an indication of the status of the gentlemen and demonstrate that even during periods of quarantine, men of this status expected to maintain a certain standard of living, further demonstrating the ways in which plague was not experienced equally. It is also worth noting that the charges incurred by the four 'gentlemen' were largely kept separate from those of the two 'men'. Another interesting element to this short note is the implication that despite their elite status, the gentlemen could not be trusted to remain quarantined in the property without proper supervision. Funds had also been allocated to pay for 'watch & warde' about the said house' which included the wages of two men during the day and three during the night.

---

[475] LA, QSP/62/2.

[476] LA, QSP/35/45. A somewhat illegible note towards the bottom of the note appears to correct this initial statement, asserting that the men in fact arrived on the 17 June, meaning that their stay was for the duration of 28 days, not 22.

The parish of Halsall, a small village located close to Ormskirk in West Lancashire, was instructed to keep a 'strong watch' or risk suffering a hefty £100 fine.

One final claim in this category further demonstrates the material toll of plague and the range of claims that might be submitted. Within the accounts of the Manchester Constables, a payment was made on 21 September 1625 to William Scholes. He was paid seventeen shillings and four pence 'in recompence of his paynes taken in buryinge off his sonne'. Payments for burials during outbreaks of plague were not uncommon, particularly to the poor, but uniquely, this payment was also intended to go 'towards the losse of the clothes wch weare buryed with him'.[477] It is likely that William's son had been buried with his clothes in order to lessen the chance of infection, but this clothing represented a significant financial loss to William, one worthy of compensation. Reimbursements for loss and damage to property, therefore, ranged from very large outlays covering losses of annual profits and considerable parts of estates to much smaller claims concerning damage to walls and doors and even reimbursements for individual items of clothing buried with plague victims. All of these claims represent a moment at which an essential intervention was required from the courts in order for these individuals to move on following an outbreak of plague.

5.4 Resumption of Trade and Commerce

One way in which the significant losses incurred during outbreaks of plague could begin to be recompensed was through the resumption of trade and commerce. Then, as now, authorities tried to balance the necessity of business with the threat to public health and safety. Contemporaries understood that the disease was highly contagious and could be spread from person-to-person contact. A bustling market was therefore understood to be a severe threat to public health, and authorities required assurance that the disease had completely died out before agreeing to reinstate markets and fairs. A 1634 petition to the Privy Council from

---

[477] J. P. Earwaker (ed.), *The Constables' Accounts of the Manor of Manchester from the Year 1612 to the Year 1647, and from the Year 1743 to the Year 1776* (Manchester, 1891), p. 154.

the Preston company of drapers, mercers, and grocers provides insight into the impact of suspended trade, as well as those who would seek to take advantage of the suspension. The petitioners, consisting of 'very neere 80 poore persons which doe bear Scott and Lott with their neighbours', explained to the courts that the plague had been present in their town for an entire year. During that time, the petitioners had been prevented from trading, and as a result, had 'become very much impoverished and weakened in their estates'. In addition, 'divers persons boarding to the said Towne' had taken advantage of 'that woeful tyme' by trading despite not having completed the required apprenticeships and training.[478] The petition resulted in the prosecution of the parties unlawfully selling flax and linen cloth in and around Preston but does not appear to have expressly dealt with the resumption of trade.

For insight into this process, we may turn to a letter written to the sessions in February 1631 which requested permission to resume trade in Preston.[479] The signatories it seems were all wealthy, established, elite men of Lancashire. Five of the individuals, Thomas Walmesley, Henry Sudell, William Preston, John Hynde and Henry Blundell, had all served at least one term as Mayor of Preston.[480] Two others, James Starkie and William Audland, are listed as a vicar and a parish clerk respectively. In January 1632, these men combined their status and authority to influence the decision of the courts by requesting permission to resume trade in Preston following the devastation of the previous months. They began their letter by informing the sessions court of the 'many hundreths' of deaths that had occurred in Preston due to the plague, before moving on to describe the impact that the loss of trade has had on the town. They explained that many inhabitants had been driven 'unto such greate penvrie through want of our Faeres, Marketts, Com[m]on Comerce & tradeinge', and if trade was not restored quickly 'manie are like to famysh through want of allowance, the poore exceedinge in numbor the abler foulk'. The document raises important questions about the ends of epidemics. When was it safe to begin the long process of returning to 'normal'? Who decided if and/or when this was the case? The authors of this letter reassured the justices that 'there hath not any dyed of the plague or any other sicknes

---

[478] Henry Fishwick, The *History of the Parish of Preston* (London, 1900), p. 50.
[479] LA, QSB/1/98/65.
[480] Marmaduke Tulket, *A Topographical, Statistical & Historical Account of the Borough of Preston* (Preston, 1821).

within Preston for the space of seaven weeks last past' and confirmed that 'there hath beene very great care and paines taken to clense, purify, and dresse the same Towne'. It is not clear whether this seven-week term was a standard period of time to wait, or whether this was simply the opinion of the men writing to the court. Upon 'deliberate and due consideracon' of this letter, the court reinstated markets and fairs within Preston, 'provyded that this present order doe not in any wyse repugne any former order made concerning the same'.[481]

Authorities were likely hesitant to reinstate markets and fairs too quickly. Even after the immediate danger of plague had ceased, the re-importation of the disease was a persistent concern. For example, in the summer of 1637, when the disease had temporarily ceased in Lancashire, an order was made at a gathering of Justices of the Peace known as sheriff's table concerning the importing of goods from plague-infected areas.[482] Goods from London, Newcastle, or other infected or suspected areas were not to be imported into towns or villages 'untill such Tyme as they have beene putt apart into some Conuenient place remote and distant'. The severity of this policy can be seen in the punishment issued for disobeying the rules. Anyone found to be importing or receiving goods would be shut up within their homes, 'restrayned & confyned for the space of one whole month'.[483] In addition to broader requests to reinstate markets, fairs, and national trade, some petitions in this sample reflect the wishes of individuals. For example, on 14 January 1649, the widow of Robert Rosbothome petitioned the sessions for a licence to bake and brew following the deaths of both her husband and brother from plague. She informed the courts that she had been placed into a cabin for a month and three weeks, her 'meanes beinge spent in the inprisonment'. As she was 'not...practised in any other calling', and had no estate to assist her, Widow Rosbothome was forced to appeal to the courts for this licence in order to 'gett a true honest liveinge'.[484] The suspension of trade and commerce, and the consequent impact

---

[481] Sharp-France, *History of the Plague in Lancashire,* p. 78.

[482] The sheriff's table provided an opportunity for Justices of the Peace to meet during assizes week. The meeting appears to be unique to Lancashire, and served a variety of purposes. For further details, see B. W. Quintrell (ed.), *Proceedings of the Lancashire Justices of the Peace at the Sheriff's Table During Assizes Week, 1578-1694,* The Record Society of Lancashire and Cheshire, Volume 121 (1981).

[483] LA, QSB/1/187/68.

[484] LA, QSP/27/26.

that this had on one's ability to earn a wage, was a major obstacle preventing individuals from recovering swiftly from outbreaks of plague. This was one element of resilience and recovery in which individuals and communities relied entirely on the actions of authorities. In general, authorities appear to have acted swiftly, reinstating markets and fairs as soon as it was reasonably safe to do so. As the above examples show, however, there were occasions in which guilds or inhabitants felt compelled to petition the courts to act sooner.

5.5 Unpaid Wages of Plague Workers and Expenses for Plague Work

The Lancashire petitions also include several cases demonstrating the struggles individuals faced to be paid for the essential work that they completed during outbreaks of plague. In an earlier chapter of this thesis, I explored the role of plague workers and their contribution to 'plague industries' across northern England and Scotland. In the following section, I will highlight several petitions which illuminate the experiences of plague workers in Lancashire *after* the disease had ended. These records demonstrate how the disease continued to impact plague workers long after their temporary employment had ended. Some of these petitions are richly detailed and contain almost itemised breakdowns of the work performed. The petition of Lawrence Croft, for example, lists unpaid wages alongside other plague-related costs. He states that he was hired by two late constables of the town of Prescot to cleanse houses and for 'other services' during the late infection. For his service, he was to receive a weekly sum of 26 shillings and 8 pence. He was also to be paid an additional 5 shillings for every infected corpse he should bury, as well as 40 shillings for 'one monethes Cabbining'.[485] Croft explained that at the time of writing his petition, his wages, presumably for cleansing, had remained unpaid for nine weeks amounting to the sum of twelve pounds. He had also buried the bodies of 64 people, which at 5 shillings per head amounted to a total of sixteen pounds outstanding. He had also not yet received the 40

---

[485] LA, QSP/91/5.

shillings allocated for his month-long stay within the cabin, and explains that he was forced to remain in the cabin for an extra fortnight before he could procure his release 'to his greate losse'.

For some, overdue payments could be deeply distressing. In a petition to the Wigan Quarter Sessions in January 1632, John Proctor, beadle of Eccleston and Heskin informed his local justices of the peace that despite 'painefully & carefully' carrying out his duties from June to September, the following January he was still owed thirteen shillings for his services. '[F]or that', the petition states, 'he is a very poore man' and 'is not able to beare no payement of his money any longer'.[486] The petition states that the justices had ordered beadles to be appointed in several towns 'neere adioyneing to infected places', likely to aid in the speedy reporting of the disease's movement across the region. In this instance, his plea was heard, and the court was ordered to pay the beadle the outstanding amount.

Where the above two cases involved a plague worker seeking reimbursement from the courts, some petitions requested that the courts intervene on their behalf against private individuals. The following record provides rare insight into the cleansing of infected properties. It shows that cleansing was a substantial undertaking which could take several days. It also provides further evidence that those who could afford to pay for the cleansing of their own home were expected to do so, but that this process was not always straightforward. Submitted to the Wigan sessions on 15 January 1649, the document reads 'A Note of those persons which haue not payd for Clensing theyr houses & materialls in Ormskirke as it sett downe by the Clensers in the time they were heare in the Visitacion 1648 for theyr worke'.[487] This is followed by a list of names, the number of days work each home took to cleanse and the cost of the cleanse:

Thomas Moorcroft	1 day and a half vj^s
Thomas Scarisbrick house	6 dayes xxiiij^s
Robert Seftons	2 dayes viij^s
James Rivingtons	2 dayes viij^s
Widdow Cookson	one day and a halfe vj^s

[486] LA, QSB/1/98/78.
[487] LA, QSP/11/19.

Daniell Travers	three dayes xij^s
Robert Cooper	1 day and a halfe vj^s
William Atherton	one chamber iiij^s
Robert Gore	one daye and a halfe vj^s
Georg Rotherham	2 dayes and a halfe viij^s
Myles Gerrard	2 dayes and a halfe viij^s
Arthur Winstanley	2 dayes viij^s
James Rotherham for	
Hugh Rotherhams houses	3 dayes at both xij^s
Willm. Atherton	2 dayes viij^s
Widd[ow] Cooksons	1 daye iiij^s
Robt. Cooper	2 dayes viij^s

The disease had raged through the town during the summer months of 1648. This document shows that by the following January, the Ormskirk cleansers still awaited payment for cleansing seventeen homes. Fortunately, it seems that their petition was successful as a note in another hand at the bottom of the page reads 'these to pay for Clensinge of their houses or to bee bound'.

Some plague workers were able to persuade prominent individuals to intervene on their behalf. George Toulson, a Justice of the Peace and Mayor at Lancaster, sent a letter on 7 October 1651 to the constables of Cockerham explaining that he had been informed by two ex-constables of the plight of one Thomas Wilson. Wilson was a webster who had been hired during an outbreak of plague in the town to 'watch the infected people for breaking forth and to carry provision unto them'. Wilson had performed these combined duties of watchman and provider for more than twenty weeks and had been promised five shillings per week for his services. He had received only twenty shillings of the allocated amount, with four pounds remaining unpaid. Toulson ordered the constables to raise the outstanding amount from the inhabitants of Cockerham 'immediately upon receipt' of the letter 'Otherwise you are to...appeare before mee and my fellow Justices upon Tuesday to shew cause to the Contrary'. The severity of this warning is highlighted by Toulson's penultimate sentence: 'fail not hereof'.[488] Despite this stern warning, it would appear that the constables were unsuccessful in raising the money, for on 14 October, an order was issued instructing the inhabitants of

---

[488] LA, QSP/53/1.

Cockerham, 'at or before the feast day of St Martin the bishop in this winder next ensueing, pay unto Tho. Wilson of Cockerham, webster, the some of foure pounds due unto him'.[489]

The petitions of plague workers in Lancashire also include some rare examples of physicians working throughout outbreaks of plague. Robert Jenison observed in his account of the plague in Newcastle that 'the common rule of the world, as also of Physicians in the case of Pestilence, is to flee, or to withdraw a mans self quickly from places infected'.[490] A petition presented to the Wigan Court Leet in October, 1649, however, demonstrates that not all physicians opted to flee the disease. William Getenbee, physician 'and servante for yor toune in theire late distressed tymes of sicknes' stated that he had been asked by the Mayor 'to visite the sicke persons and minister them' for thirty shillings a week, and had been 'at great expense' in the process. It was ordered that he was to be given an extra £7.[491] Similarly, in a petition presented to the Chester Sessions in October, 1650, Symon Crouch of Warrington 'was moved to administer Phisick to those that were soe infected, and to make such other Provision for them as might conduce to their restoration'.[492] Thanks to a combination of his 'utmost skill and judgement' and 'the Almightie's blessinge uppon his indevours', 'all the People in all the said Townships are now well and att their libertyes'. However, his efforts had unfortunately cost him 'much trouble and many large sumes of money'. Crouch had turned to the courts for relief after acknowledging that the inhabitants of the towns he had served were 'soe very poore' although 'otherwise very willinge' to pay for his services. His claim was referred to three justices who were to examine his accounts and decide upon any payments.

In addition to petitions from plague workers themselves, the Lancashire petitions contain requests to reimburse individuals who had temporarily covered the costs of plague work as an emergency measure. For

---

[489] Sharpe-France, *History of the Plague in Lancashire,* p. 112.
[490] Robert Jenison, *Newcastle's call, to her neighbour and sister townes and cities throughout the land, to take warning by her sins and sorrows. Lest this overflowing scourge of pestilence reach even unto them also. A also a direction, how to discover such sins as are the procurers of Gods judgements by divers methods* (London, 1637).
[491] Sharpe-France, *History of the Plague in Lancashire,* p. 101.
[492] Bennett and Dewhurst (eds.), *Quarter Sessions Records,* p. 145.

example, Silver Ashcroft, constable of Ormskirk, 'in the heate of the visitacon' of 1648 and 1649 had been

forced to lay out nearly thirty pounds.[493] Recovering these types of outlays could be a lengthy process. For

example, Henry Smith, constable of Westleigh initially petitioned the midsummer sessions at Ormskirk in 1632

for reimbursement of money paid out for cleansing infected houses. Smith explained that his 'accompts have

beene vewed by the said justices & allowed' and yet he 'cannot gett his money into his hands againe', money

which amounted to thirty shillings. He had turned to the courts because the town of West Leigh, lately

'oppressed by Reasson of the said infection there are not well able to paie' him. He therefore asked that the

full amount be received 'from the hands of the Churchwardens and Cunstables' of the parish.[494]

Unfortunately, Smith was unsuccessful. Later that year, at the Michaelmas sessions in Wigan, we see the

same Henry Smith petitioning the court once again for reimbursement. Smith reiterates that he had paid

'money of his owne purse' towards the cleansing of infected houses in Westleigh. Twelve shillings and six

pence remained unpaid from the initial total of thirty shillings. The town had been taxed to pay this money,

'And yett some of the said towne doe Refuse to paie without a warrant from the Justices'.[495] It was at this

point that the court decided to step in on Smith's behalf. On 8 October, 1632, the following order was made

at the Wigan Sessions:

> 'Whereas Henry Smyth, late constable of Westleigh, did the last yere disburse certen moneys out of his owne purse for and towardes the clenceing of certen houseing infected with the plague within the Towneshipp, and was to have receaved the same againe from the inhabitantes of the said towne according to a taxacion thereof made, now for that divers of the inhabitantes of Westleigh doe refuce to repay to the said Henry Smyth the somes severally taxed upon them, amount in all to the some of xij^s vj^d, yt is therefore ordered by this Cort that if upon notice hereof any of the said Inhabitantes shalbee delinquent ... then Mr. Atherton is intreated ... to grant his warrant to distreyne the goods of such person or persons soe making default'.[496]

Smyth's case is illuminating in that it shows tensions between communities and authorities. It demonstrates

that the decision to levy an emergency tax was only part of the story, and that some towns later struggled to

meet the costs asked of them by the courts. On occasion, communal resilience would require reinforcement

---

[493] LA, QSP/151/19.
[494] LA, QSB/1/106/82.
[495] LA, QSB/1/110/68.
[496] Sharpe-France, *History of Plague in Lancashire,* p. 77.

from authorities. Here, the justices had agreed to an additional tax based on the accounts of a local constable, who had paid to cleanse the town of infection from his own pocket. Initially, Smyth petitioned the court on the basis that the inhabitants were unable to reimburse him due to the devastation caused by the disease. However, in his second plea to the courts, Smyth stated that the inhabitants *refused* to pay, without a warrant from the justices. We do not know which households were selected to pay the tax, or why they refused. It may have been due to genuine difficulties in paying the tax, at a time when many inhabitants would have been struggling to recover their finances following the plague. However, this dispute may also reflect a lack of solidarity among inhabitants or provide evidence of a disagreement regarding how publicly raised funds should be spent.

The burden of plague work fell upon the shoulders of ordinary inhabitants, as well as local constables. In 1653, the inhabitants of Tarbock informed the court at Wigan that the plague had entered the town and spread to a mansion house called 'Dacres-Bridge House'. The tenant of this house, Richard Pemberton, had fled during the night after the 'violent' death of his child. When Pemberton fled, he had 'carryed away with them all theire Cattell and household goods of any worth, leaving only some old Chests, Bedstids and such lyke lumber'. When Pemberton and his family later died, the Tarbock inhabitants asked for permission to sell these goods to pay for the cleansing of the house as a matter of 'urgent necessity'.[497] They had already expounded 'great trouble and cost' keeping constant watch since the outbreak began, protecting the house against 'Strangers and travellers' as it was situated on a direct road between Warrington and Liverpool.[498] In this instance, although the petitioners did require compensation for the work already done, their main priority seems to have been protecting the community. They asked to sell the goods left in the home, valued at £1 13d, 'Notsomuch for any considerable value of the same, but that none will (enter into the said house or) intermeddle therewith, without first Order had from your worships for feare hereafter to bee troubled for the Debts and engagements of the said Rich: Pemberton'. This case shows us that even after the disease had left a

---

[497] One of Pemberton's daughters, aged roughly eight, had survived but was infected at the time of writing the petition.
[498] LA, QSP/75/2.

particular town, uncleansed homes posed a sufficient threat that inhabitants felt the need to keep constant watch over a once-infected property. It also demonstrates that inhabitants would expend money, time and energy into the public health measures that they felt would keep their communities safe, before receiving approval or instruction from central authorities.

Overall, these cases demonstrate the impact that the disease had upon plague workers and those who employed them long after they had returned to their normal daily pursuits. Workers struggled through lengthy court disputes to be paid for their work, and those who had paid out money for plague work as an emergency measure used the courts to reimburse their towns for these payments.

5.6 Plague Relief Payments in Arrears

A central theme which can be identified in all the examples discussed in this chapter is the heavy financial burden that plague placed on towns and parishes. Healey's study of the development of poor relief in Lancashire demonstrated that parish assistance served as 'a comprehensive system of social insurance against risk' for the poor in the seventeenth century, but that this system was unable to cope with the demands of epidemic disease.[499] The final petitions we will explore in this sample will provide further evidence that the usual funds allocated to accommodate and assist the poor were insufficient in the crisis conditions created by the plague and offer insight into the process of chasing up plague relief payments in arrears.

How much did a plague cost? And who paid for it? Paul Slack has demonstrated the extemporaneous and makeshift nature of plague relief in early modern England. Relief for the poor arrived from a combination of extraordinary taxes paid by both the afflicted town's inhabitants, those within a 5-mile radius, and charitable donations. Of the £1,115 spent in Plymouth during the great epidemic of 1626, he found, an extra poor rate

---

[499] Healey, *The First Century of Welfare*, pp. 171, 253-254.

brought in only £130. The county raised £292, and more than £600 came from benevolences from merchants, local gentry, and other corporations. The council of Exeter gave £92, likely in return for the donation of £50 which Plymouth had sent when there was plague in Exeter in 1625.[500] Slack also found that in many early modern towns, the total expenditure was more than double the normal annual income of the corporation concerned, and could extend to five or six times as much.[501] The unprecedented sums that these communities were required to raise, combined with the ad hoc nature of their collection, made chasing up relief payments exceedingly difficult. It is therefore not surprising that there are several examples in the Lancashire sessions records of plague relief payments in arrears. The severe outbreak during the years 1648/9 proved to be particularly costly for Lancashire. An order made at the midsummer Prescott sessions in 1649 stated that several warrants had been issued to collect forty pounds from towns lying within a five-mile radius of Liverpool 'for the releiffe of such poore as were latly confyned & shutt vpp there by reason of ye laite sicknes'. The 'most p[ar]te' of this sum, however, remained uncollected. The order instructed all high constables within the Derby hundred to ensure the tax was collected by their subconstables in each town. Anyone refusing to pay the assessment would have their goods confiscated and sold to cover the cost.[502] One of the most significant sums for this period is listed in a Sheriff's Table order made to the Easter Ormskirk sessions in 1650. On 9 October 1649, 296 pounds 9 shillings and 10 pence had been pledged to support the sick poor of Ashton in Makerfield following a severe outbreak of plague in the town.[503] By 11 April the following year, however, this money was yet to be paid.

There also seem to have been issues with ensuring infected towns actually received the financial support that they so desperately needed. In 1652, for example, the inhabitants of Ormskirk petitioned the sessions on the basis that they had not received money that had been collected for their relief. Many of them had been confined to cabins during the outbreak of 1648. During this time of 'extreame misery', when many inhabitants

---

[500] Slack, *Impact of Plague,* p. 280.
[501] Ibid., p. 281.
[502] LA, QSP/3/4.
[503] LA, QSP/31/30.

lost their children, they also 'spent and wasted all' of their estates and were ultimately 'brought to Ruine by those sadd tymes'. Their petition states that during this time, 'Certaine Citzens and other well affected persons in London' had collected money intended to be used for those confined and infected in Ormskirk. However, 'the said Recievors of the same moneys have and do detayn the moneys soe payed over, not makeing any Account at all, which proves to the great damage of above three hundred poore people'. On 3 May 1652, the constables and all other officers who had been responsible for distributing money to the poor were ordered by the courts to provide full accounts of the money that had been entrusted to them.[504]

Various reasons were given for the non-payment of emergency plague rates. Some evidently disputed the fact that they resided within the compulsory five-mile radius. This led to an order being made at Wigan Sessions on 17 January 1653 stating that 'all...of the said Townes that by comon Acceptacion are reputed to be within...Five myles, shall, at or before Monday next, pay in their proporcionable parts of the saide Taxe with the Defaulcacion of the rest. And that untill the said day bee past noe distress to bee made'.[505] Others objected due to the impact that the disease had had on its own residents. For example, the inhabitants of Halewood and Halebank were charged to pay £3 16^s 10^d towards the use of the infected poor in nearby Prescott and Whiston. This rate, 'by reason of the great feare and suspicion of infection of the Plague' could not be collected. A fine for non-payment was then imposed, which the inhabitants petitioned to be cancelled on the grounds that they had not refused to pay the assessment, but had been unable to 'in respect that severall lately are...deceased....not onely the Constable and Leygatherer, but also all the said Inhabitants were in soe great feare, that they Durst not have familiarity or comerce with one another'.[506] They argued that they had always intended to pay the assessment, but were so stricken with fear that not even the authorities would risk interacting with others to collect it. The petition informs us that the assessment was ultimately paid, with the inhabitants simply hoping that the court would forgive the additional fines.

---

[504] LA, QSP/63/2.
[505] Sharpe-France, *History of the Plague in Lancashire,* p. 125.
[506] LA, QSP/75/3.

Some towns wilfully objected to the tax. In a petition presented to the Wigan sessions in October 1652, Robert Lathom, constable of Ormskirk explained to the court that although a 'sufficient able man' had been sent several times to the town of Ormskirk to collect payments for the poor infected in Liverpool, Bootle and Halsall, many inhabitants had refused to pay.[507] Some 'doth absolutely deny' the charge, whilst others did so with 'Evill speeches' towards the officer appointed to collect payments 'to the great Incouragement of others'. Consequently, Lathom had been compelled to pay the levies from his own purse. The petition is followed by a list of thirty-one names of those refusing to pay the tax. The court ruled that those who had 'given evil words ag[ains]t the officers' were to be bound to good behaviour, whilst the rest were to pay the tax or be bound over to the next sessions.

Some who had paid the tax later asked to be relieved from it. The inhabitants of Great Starkey, for example, informed the sessions that two families in the parish had been infected with the disease since August, and have been shut up ever since. One of these families was headed by 'a poore tradesman, a taylor, whoe lived by his trade'. Deprived of his liberty, and therefore his ability to work, the town had been forced to maintain him and his family of five. This had put the town 'to exterordinarie cost, and alltogether undon the poor man'. In addition, the inhabitants of Great Starkey were cut off from trade having been deprived of attending the market at Warrington. They asked that a proportion of the levy already collected to help the poor infected of Liverpool could be granted for the relief of their own poor infected inhabitants. The document is endorsed: 'an accompt to bee made of the charge & Certifyed upon oath to Mr Aspinwall'. We might therefore infer that the town was successful in their petition.

Money might also be moved around from other causes to meet the immediate demands of the community during outbreaks of plague. The petition of Robert Danson, late constable of Rawcliffe, for example, states that the constable had used thirty shillings set aside for the repair of a bridge towards the relief of plague

---

[507] LA, QSP/71/7.

sufferers.[508] He asked the court for permission to collect thirty shillings from the inhabitants of Rawcliffe to reimburse the funds and repair the bridge. This, and other examples of more informal or impromptu responses in this section attests to the level of flexibility towns and villages had to respond to urgent needs. Together, these examples demonstrate that the existing structures designed to relieve and maintain the poor were insufficient in the crisis conditions created by the plague and provide insight into the difficult process of chasing up relief payments in arrears. Extraordinary taxes were levied and appeals for benevolent donations were launched in order to ensure the resilience of towns, but this reflects only part of the story. These petitions demonstrate that the money pledged to relieve plague sufferers was not necessarily efficiently collected, and that which was collected was not necessarily then distributed.

Conclusion

Scholars concerned with the legacy of plague often look to its long-term social, economic, and cultural impact. The immediate aftermath of the disease is too often treated as either a small epilogue to the main event or glossed over entirely in favour of its more enduring consequences. I would argue that a deeper understanding of this time is foundational to understanding the lived experience of the disease and its impact on society and allows us to ask important questions about resilience and social relations. The contributions of this chapter are threefold. Firstly, I hope to have demonstrated the usefulness of petitions as sources not just for plague studies, but also for the rapidly developing fields of emotions, crises, and resilience studies. These petitions are windows into the visceral, immediate concerns of Lancashire society following a major crisis. They help us to reconstruct the process of returning to 'normal' following an outbreak of plague from a wide range of perspectives, many of which are typically under-represented within the historical record such as those of women and the poor. They help us to understand the material toll of plague, by providing examples of the ways in which the disease economically impacted individuals, families and communities through the loss of

---

[508] LA, QSB/1/133/28.

property, the suspension of trade and commerce, and the financial burden caused by the loss of a household's primary wage earner.

Secondly, in addition to demonstrating the material toll of the disease, the petitions allow us to re-evaluate the historical processes we think of when we think of 'resilience', encouraging us to look more closely at the bonds that facilitated recovery. These rich sources reveal, often in moving detail, the role of authorities in facilitating resilience, but also the roles of friends, family members, neighbours and the wider community. The usual systems of relief were inadequate when faced with the unprecedented demands of severe outbreaks of plague. This meant that the bonds between friends and neighbours were more important than ever in ensuring the survival and resilience of their communities. Only when these bonds were pushed to breaking point did early modern people turn to the courts for assistance. These petitions show us when and why those points were reached, and what assistance was required from authorities in order for communities to recover from plague.

Thirdly, the cases presented in this chapter allow us to reconsider our answers to the question 'when do epidemics end?'. They demonstrate that the epidemiological end of an epidemic does not necessarily coincide with its social end. In the case of Covid-19, we may argue that in the United Kingdom, we have reached the social end, reflected in the decisive push we can observe to return to 'normal', well in advance of the epidemiological end, as the virus continues to spread. These petitions demonstrate that in seventeenth-century Lancashire, the reverse was true, as communities felt the social consequences of plague long after the last person had died from the disease. Households may have needed to care for an orphan, a widow may have sought assistance to care for her family, property may have been lost or damaged during quarantine, plague workers may have needed to chase up wages and communities and towns may have struggled to pay for the cost of maintaining their poor infected inhabitants. For some households, these interventions allowed for the return to life before an outbreak, for some, they facilitated an entirely new way of life, whilst for others these interventions simply allowed them to survive. In sum, these documents show that plague continued to be a

major factor shaping or influencing daily life for many early modern people long after the disease itself had

died out.

Conclusion

This thesis set out to answer one fundamental question: how would our understanding of the plague change if we centred marginalised experiences? Through a series of smaller, more focused investigations throughout each chapter, I have answered this question by highlighting that the effects of the plague were not uniformly experienced across society. Conventional accounts of the disease which often stress social division and the breakdown of community bonds represent only one perspective and the stories of desolate, empty streets are, upon closer examination, far from representative. While there were indeed closed gates, locked doors and barricaded window casements, many of these barriers were surprisingly permeable. Lower status workers like nurses, cleansers, buriers and providers traversed the city streets and quarantined dwellings fulfilling their duties and providing essential services. Meanwhile, inhabitants of all backgrounds continued to find ways to bend and break the rules imposed by authorities to assist neighbours, maintain social connections, or provide care to loved ones. Lastly, in the aftermath of the disease, it was often community support, before government intervention, that people turned to in order to rebuild their lives. Together, this evidence presents a more complex interpretation of the plague's impact, revealing how necessity, resilience, and the bonds of community and social obligations pushed back against the restrictive measures intended to keep people apart.

Chapter one examined outbreaks of plague across northern England and southern Scotland, offering the first detailed analysis of plague occurrences in these areas during the seventeenth century. By mapping the locations of eight major outbreaks, it revealed regional differences between northern England, southern Scotland and the rest of Britain. This chapter underscored the importance of studying plague's impact in these areas, demonstrating that most contemporaries likely experienced multiple significant outbreaks in their lifetimes. It provided essential context for the thesis by establishing how deeply embedded plague was within the lived experiences of early modern communities and contributed to several ongoing discussions regarding the transmission of plague in Britain. It demonstrated that the disease rarely smouldered in the intervening

years between major outbreaks but rather was reintroduced every decade or so. When introduced, outbreaks in northern England and southern Scotland began in ports and major towns and followed main routes of communication to other urban centres. It showed that contrary to previous belief, plague was not necessarily predominantly an urban disease. It found that certain characteristics of urban towns may have helped the disease to enter the region, but communication networks between large urban centres, small market towns and rural hamlets meant that the disease frequently reached even the most isolated of villages. This was particularly true in times of famine when individuals were forced to travel long distances in search of food or during times of war when large armies covered significant ground, spreading the disease as they went.

Chapter two reviewed the plague control policies enforced by English and Scottish authorities, comparing their approaches and examining instances of policy breaches. It argued that while both English and Scottish authorities introduced similar legislation, Scotland's approach was firmer and often imposed harsher mentalities for lawbreakers. It assessed how far governments utilised the conditions created by outbreaks of plague to expand their powers, arguing that although we can see an expansion towards of powers, it fell somewhat short of Foucault's concept of total and complete control. Central governments increased the powers of local authorities, and in turn, local authorities acted above and beyond their jurisdiction. However, in many ways, not all authorities used these powers to the full extent permitted by the law. This can be seen in the approach taken by authorities in the punishment of plague policy lawbreakers. The law in England, for example, sanctioned the use of violence on the quarantined and the execution of individuals found to be wilfully breaking plague orders. However, the chapter outlined many examples of transgressions which threatened the health and safety of the town, and not one of those cases warranted execution as punishment in England. This is just one of the many ways in which our understanding of plague can be altered by shifting our perspective from the elites creating the policies to the people that they policed. Contrary to Michel Foucault's concept of social order dissolving during epidemics, this chapter argued that most transgressions reflected a survival instinct, a desire to maintain social bonds, and occasional dissatisfaction with heightened civic authority. The chapter suggested that the binary of social anarchy versus total control may oversimplify

the societal response to plague, and a strong sense of community often endured even amidst restrictive government policies.

Chapter three examined the local execution of the plague policies outlined in chapter two and outlined the roles of those responsible for maintaining order and providing essential services during outbreaks. It argued that distinct 'plague industries' existed in towns across northern England and southern Scotland and revealed significant regional variation in response strategies. This chapter also discussed the gendered aspects of plague labour, where men were granted more formal occupational titles that enhanced the perceived legitimacy of their work, while women's contributions were undervalued and largely identified by their actions. This disparity underscored how gendered perceptions reinforced existing social hierarchies, even in crisis. The chapter also examined plague workers' attire, concluding that it was designed more to visibly mark their role within the community than to protect them from infection.

Chapter four investigated the role of plague nurses in northern England, drawing on a verb-oriented approach inspired by scholars such as Sheilagh Ogilvie and Maria Agren. This method helped to reveal not only the presence but significance of plague nursing in areas outside of London. While contemporary literature often depicted nurses in a negative light, the chapter found evidence that some nurses were frequently sought after for their expertise, with some even traveling considerable distances to offer their services. This evidence indicates a degree of professionalisation within plague nursing, where certain individuals were distinguished from the general population, suggesting that the practice was more than simply an extension of 'women's work', that any woman could be expected to perform.

Lastly, chapter five examined the aftermath of plague outbreaks, making three major contributions. First, it highlighted petitions as valuable sources that capture perspectives of women and the poor, voices often underrepresented in historical records. Second, it engaged with the concept of 'resilience' from disaster studies, arguing that recovery from plague, in the first instance, relied more on local community support than

on institutional arrangements. At the parish level, neighbours, friends, and family often provided initial assistance, with petitions serving as a last resort when community bonds reached their limit. Finally, the chapter explored the question of when epidemics truly end, distinguishing between the 'epidemiological end' and the 'social end' of a plague. Petitions illustrated how the plague continued to impact daily life long after the immediate threat had passed, offering insights into the long-lasting effects of disaster on early modern communities.

Together, these chapters have contributed to a new interpretation of the plague's impact, one that emphasises the resilience and interconnectedness of early modern communities. Rather than viewing the plague solely as a force that fragmented society, this thesis has shown that crises often catalysed community cohesion and illuminated the essential roles played by ordinary individuals. There is no doubt that the plague was a violent, devastating disease that placed immense stress on families and communities. However, by examining closely how different groups navigated these hardships, this thesis reveals that survival was not merely an individual struggle, but a collective endeavour shaped by networks of care, informal support, and shared responsibilities. In re-centring marginalised experiences, this work has challenged conventional understandings of social response to epidemic crises, demonstrating that even the most restrictive measures could not entirely sever the ties of community. It brings to light the agency of those often deemed peripheral, including women, lower-status workers, and the poor, showing how they not only endured the hardships of the plague but actively contributed to the resilience of their communities.

The thesis has, therefore, made significant original contributions to several areas of historical enquiry. It has contributed to the study of social relations by revealing the resilience and adaptability of communities under crisis, particularly through the informal networks of support that emerged in response to government restrictions and the practical needs of those impacted by plague. This study has shown that, rather than dissolving, social bonds often intensified during outbreaks, as ordinary people navigated, resisted, and sometimes circumvented restrictive policies to assist neighbours, maintain connections, and uphold mutual

obligations. It has contributed to the study of gender and labour by uncovering the distinct roles men and women held within plague-response work, revealing not only the gendered division of labour but also the differences in how their contributions were valued. Despite performing similar tasks as part of the emergency response to plague, men's roles were more formalised and publicly recognised, whilst women's work was devalued. By examining the roles of nurses, cleansers, and plague buriers, the thesis has illustrated how gendered perceptions reinforced social hierarchies, even during crises, thereby deepening our understanding of how labour and gender intersected in early modern societies. Similarly, it has challenged ideas surrounding early modern women's work by offering plague nursing as a case study that problematises conventional categories of labour by combining elements of paid and unpaid care, medical skill, and social duty in ways that complicate our understanding of women's roles in early modern society. Lastly, it has contributed to emerging discussions in the field of disaster studies by illustrating that the concept of 'resilience' in early modern communities was rooted not only in institutional recovery efforts but in local networks of support and mutual aid. In the aftermath of plague outbreaks, it was often neighbours, family, and parish-level structures that provided the foundational support needed for people to rebuild their lives.

While this thesis has examined how different communities experienced outbreaks of plague, it is, therefore, at its core, a study of how people responded to crises, and how such upheavals can affect and reshape social relations. In this sense, it has only begun to scratch the surface of a vast and complex field and there remains significant potential for further study. For example, the methodology employed here, of focusing on how key workers and typically underrepresented groups navigated and responded to crises, could easily be adapted to better understand a wide range of geographical regions and historical periods. Similarly, the comparative approach taken here could be applied to other contexts to answer questions that would otherwise remain unanswerable due to a lack of source material. One of the key contributions of this thesis has been to demonstrate the effectiveness of these approaches in revealing how communities managed crises under different governance structures. Another fruitful area for further research lies in examining when and why an epidemic is deemed to have 'ended'. Building on the final chapter, there is scope for future studies to

combine methodologies from social and medical history with sociology and psychology to understand the complex interplay between medical realities and societal perceptions of disease. This could offer important insights into how and why communities in early modern Britain, and beyond, declared an epidemic 'over' and resumed normal life.

Methodologically, crises such as outbreaks of plague present the opportunity to uncover underrepresented experiences and unearth 'hidden' histories. The intensified administrative efforts that accompany these crises make otherwise invisible labour visible and expose the essential, often overlooked contributions of these individuals to their communities and broader public health efforts. This visibility sheds new light on the way different groups adapted to, resisted, and were affected by, the extreme conditions caused by these crises. Ultimately, I hope that this thesis has shown how marginalised individuals who often leave little trace on the historical record, such as women and the poor, can and must be afforded scholarly attention, and I hope that it will inspire others to continue this important work.

Bibliography

Primary Manuscript Material

Barrow Archive and Local Studies Centre
Ramden Square, Barrow-in-Furness, Cumbria, LA14 1LL

BDB 16/L/1476	'Lugubrious Lines on the destructive and violent plague which raged in Dalton and spread with rapid fury in the seventh year of the reign of King Charles I, and the year of our Lord 1631. By George Postlethwaite, Parish Clerk and Master of the Free School of Dalton (translated from the Latin) (1631)
BDHJ/220/1/13	Order from J Lowether, Justice of the Peace, to the Constable of Whitehaven to arrest Isaac Milner of Whitehaven for contempt of the order issued regarding the protection of Whitehaven from the 'plague and sicknesses' by stopping all goods which might come from any infected places
BDX 186	Poetry and commonplace book of George Postlethwaite, parish clerk of Dalton in Furness including: 'Lugubrious lines on the Great Plague, 1631'

Borthwick Institute for Archives
University Rd, Heslington, York, YO10 5DD

PR/Y/HTG	Parish Records of Holy Trinity Goodramgate
PR/Y/J	Parish Records of York St John Ousbridge
PR/Y/MG	Parish Records of St Martin cum Gregory, Micklegate
PR/Y/MCS	Parish Records of St Martin, Coney Street
PR/Y/BP.S	Parish Records of St Mary Bishophill
PR/Y/MS	Parish Records of St Michael Spurriergate
PR/Y/Den	Parish Records of St Denys with St George
PR/Y/Marg	Parish Records of St Margaret, Walmgate
PR/Y/OL	Parish Records of St Olave
YDA/11	York Diocesan Archive Probate Material

Bristol Archives
B Bond Warehouse, Smeaton Rd, Bristol BS1 6XN

P.St MR/ChW/1/c	Churchwarden Accounts of the Parish of St Mary Redcliffe, 1600- 1620

British Library
96 Euston Road, London, NW1 2DB

Add MS 46845 D.	Privy Council Warrant for the Arrest of an Alderman of London for Failure to Renew Warning Signs on a Plague Infected House 1636-37
Add MS 78317	John Evelyn Letterbook 1660-1679

City of Westminster Archives Centre
10 St Ann's Street, London, SW1P 2DE

E22	Churchwarden Accounts for St Margaret's, relief of poor visited with plague 1638-1640
E47	Churchwarden Accounts for St Margaret's in relation to the plague 1665-6
F3354	Rate for relief of the poor visited with the plague in the parish of St Martin-in-the-Fields 1625
F3355	Rate for relief of the poor visited with the plague in the parish of St Martin-in-the-Fields 1630
F3357-F3358	Rate for relief of the poor visited with the plague in the parish of St Martin-in-the-Fields 1637
F3359-F3360	Rate for relief of the poor visited with the plague in the parish of St Martin-in-the-Fields 1647
F4514	Subscriptions for the relief of sufferers by the plague (1636).
F4516	Accounts of receipts from the collectors for the poor visited, and from gifts, loans and parish and of disbursements during the time of the plague. 12 June 1636 – 16 April 1637.

Cumbria Archive Centre, Carlisle
Lady Gillford's House, Petteril Bank Road, Harraby, Carlisle, CA1 3AJ

CA/2/1	Corporation Order Book
CA/3/2/1-26	Court Leet Rolls
CA/3/4/139	Audit book
CA/4/1	Chamberlain's accounts 1 volume (1602-1603, 1605-1606, 1608-1611, 1618-1619)
DLONS/L3/1/1	Estate and general memoranda book of Richard Lowther, 1557-1673
DMH/10/7/1	Volume belonging to Heysham family of Castletown, Rockcliffe, Carlisle
Mounsey-Heysham MSS.	Vol. 1 – D/MH/10/7/1.
PROB	Wills and Inventories

Durham County Record Office
County Hall, Durham, DH1 5UL

D/X 1338/9/2	Letter
EP/Du/SG 1	St Giles Parish Register
EP/Du.SM 1	St Margaret Parish Register
EP/Du.SN 1/2	St Nicholas Parish Register
EP/Du.SN 1/3	St Nicholas Parish Register
EP/Du.SO 118	St Oswald Parish Register
EP/Gre/1	St John's Parish Register
EP/Mer 1	Merrington St John Parish Register
EP/Whm 1	Whickham St Mary Parish Register
EP/Who 1	Whorlton St Mary Parish Register

Durham University Special Collections and Archives
Palace Green Library, Palace Green, Durham DH1 3RN

Cosin Letter Book 1B 126	18 July 1665. Letter from Walter Ettrick, one of 8 persons in Sunderland appointed to prevent the spread of the plague to John Sudbury, Dean of Durham and Justice of the Peace.
Cosin Letter Book 1B 128	5 August 1665. Letter from Richard Sterne, Archbishop of York, to Bishop Cosin conveying the King's commands that collections should be made in every parish for the relief of victims of the plague
Cosin Letter Book 1B, 129	9 September 1665. Letter from Richard Sterne, Archbishop of York, to Bishop Cosin concerning the incidence of plague around York
DPRI/1	Durham Probate Records: Pre-1858 original wills and inventories
DDR/EJ/CCD/2	Consistory Court Depositions (loose)
Micketon and Spearman 9	8 April 1643. Orders observed where the [plague] is
Mickleton and Spearman 20	17 May 1666. Account of disbursements in the north-east from the moneys collected for the use of the poor people infected with plague
	c. March 1667. Certificate of Henry Maddisonne mayor of Newcastle upon Tyne respecting persons infected with plague

Explore York Library and Archives
Library Square, York, YO1 7DS

Y/COU/1/1/31	York Corporation House Minute Book (1592-1598)
Y/COU/1/1/32	York Corporation House Minute Book (1598-1605)
Y/COU/1/1/33	York Corporation House Minute Book (1605-1612)
Y/COU/1/1/34	York Corporation House Minute Book (1613-1625)
Y/COU/1/1/35	York Corporation House Minute Book (1625-1637)
Y/COU/1/1/36	York Corporation House Minute Book (1638-1650)
Y/COU/1/1/38	York Corporation House Minute Book (1663-1688)

Lancashire Archives
Lancashire Record Office, Bow Ln, Preston PR1 2RE

DDKE/HMC/16 9	Aug 1605. A list of persons who were infected, suspected or 'needers' by reason of the plague in Salford and Manchester.
DDKE/HMC/111	16 Apr-23 Jul 1631. Detailed accounts of the distribution of the contribution for the plague at Preston. 1631
QSP	Lancashire Court of Quarter Sessions Petitions
QSB	Lancashire Court of Quart Sessions Recognizances
WCW/Infra	Wills and other probate documents proved in the Archdeaconry of Chester for estates valued at less than £40
WCW/Supra	Wills and other probate documents proved in the Archdeaconry of Chester for estates valued at over £40

National Records of Scotland
General Register House, 2 Princes St, Edinburgh, EH1 3YY

CH2/716/5	South Leith Kirk Session Minutes (1643-1650)
GD1/39/5/26	Accounts of the estate of the deceased George Forrest, sometime postmaster, burgess of Haddington, who died 16 March 1627. [Includes an entry describing precautions taken against infection when, in November 1645, the plague 'daylie increasing in Hadingtoun', thw two children were taken to 'Glegornie' on 'Mertimes day' and isolated there six weeks before being allowed to return to the town.
GD3/5/383	Letter from Sir William Ross of Muriston to Margaret, countess of Eglinton; the family of William Cumynge, one of her tenants, had occupied her barn while infected with plague and magistrates of Paisley are now anxious to have it 'cleansed'. [10/3/1646]

GD/79/6/39   Charge directed to Mr. Alexander Guthrie, clerk of burgh of Edinburgh, to give extract of receipt by James Ross, treasurer of said burgh, of £201 10s 4d which had been collected from Lords of Council and other members of the College of Justice for relief of burgh of Perth, recently attacked by plague, and delivered to said James Ross, but which magistrates of Edinbrugh had not sent to burgh of Perth. [30 Dec 1598].

GD112/1/561   Discharge by John Tayllor, chirurgian, Humphrey Wilson, John Dewir, John Howge, burgesses of Perth, to Sir Robert Campbell of Glenurquhay, kt., bt., and his tenants in Bredalbine (18 Dec 1647)
For cleaning of several rooms infested at the visitation of the plague of pestilence, during their service from 15 November to 15 December 1647.

GD172/2122   Latter will and inventory of debts and goods of James Robertson, at Sanctmarie Wynd beside Edinburgh, 'seik of the pest' (23 Sept 1604)

The London Archives
40 Northampton Road, London, ECR1 0HB

WJ/SP/1645/011   Petition of Elizabeth Hunt, 1645
WJ/SP/1645/012   Petition of Helen Ricketts, 1645

The National Archives
Bessant Drive, Richmond TW9 4DU

SP 12/262, f. 17   Complaint of Dr Wm. James, Dean of Durham to Lord Burghley, January 1597.

SP 12/263, f. 74   Dr W. James, Dean of Durham to Lord Burghley, 26 May, 1597.

Tyne and Wear Archives
Discovery Museum, Blandford Square, Newcastle upon Tyne, NE1 4JA

GU.TH   Records of the Fraternity of Masters and Seamen of Trinity House, Newcastle upon Tyne

Wigan and Leigh Archives
Leigh Town Hall, Civic Square, Leigh WN7 1DY

DDZ A13/1   Bishop Bridgeman Ledger 1614 – 1642
SR5/16/13   Wigan Court Leet Rolls Miscellaneous Years 1626 - 1724

Primary Printed Material

Amelang, James S., (ed.), *A Journal of the Plague Year: The Diary of the Barcelona Tanner Miquel Parets 1651* (Oxford, 1991).

Anderson, Anthony, *An approved medicine against the deserued plague* (London, 1583).

Anonymous, *A Looking-glasse for city and countrey vvherein is to be seene many fearfull examples in the time of this grieuous visitation, with an admonition to our Londoners flying from the city, and a perswasion [to the?] country to be more pitifull to such as come for succor amongst them* (London, 1630).

Anonymous, *A True Relation of the Taking of Newcastle by Assault, on Saturday the nineteenth of October instant, 1644. Being certified in Three Letters: The truth of which is likewise certified to the Parliament, by Letters of the same date: In which Service the Scottish Army behaved themselves with great Valour* (London, 1644).

Anonymous, *An act for the charitable reliefe and ordering of person infected with the plague* (London, 1630).

Anonymous, *An historical narrative of the plague at London, 1665; with an abstract of the most common opinions concerning the causes, symptoms and cure of that fatal disorder. And some account of other remarkable plagues, ancient and modern* (London, 1769).

Anonymous, *Lachrymæ Londinenses: or, Londons lamentations and teares for Gods heauie visitiation of the plague of pestilence* (1626).

Anonymous, *Londons Lord have mercy upon us. A true relation of seven mod[ern] plagues or visitations in London, with the number of those that were buried of all diseases; viz. the first in the year of Queen Elizabeth, anno 1592. The second in the year 1603. The third in (that never to be forgotten year) 1625. The fourth in anno 1630. The fifth in the year 1636. The sixth in the year 1637 and 1638. The seventh this present year, 1665* (Edinburgh, 1665).

Anonymous, *Lord haue mercy vpon vs A speciall remedy for the plague* (London, 1636).

Anonymous, *Lord have mercy upon us preservatives and medicines as well before infection as afterwards, according to the judgement of the best physitians* (London, 1636).

Anonymous, *The Court Leet Records of the Manor of Manchester, from the year 1552 to the year 1686, and from the year 1731 to the year 1846,* Vol. III, (Manchester, 1886).

Anonymous, *The shutting up of infected houses as it is practiced in England soberly debated* (London, 1665).

Anonymous, *Orders, thought meete by her Maiestie, and her priuie Councell, to be executed throughout the counties of this realme, in such townes, villages and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same* (London, 1578[?]).

Atkinson, J. C., (ed.), *Quarter Sessions Records Volume 1*, The North Riding Record Society for the Publication of Original Documents Relating to the North Riding of the County of York (London, 1884).

Atkinson, J. C., (ed.), *Quarter Sessions Records Volume 4* The North Riding Record Society for the   Publication of Original Documents Relating to the North Riding of the County of York (London, 1886).

Balfour, James (ed.), *Accounts of the Lord High Treasurer of Scotland, Vol. IV, 1507-1513* (Edinburgh, 1902).

Bell, John, *London's remembrancer, or, A true accompt of every particular weeks christnings and mortality in all the years of pestilence within the cognizance of the bills of mortality, being xviii years* (London, 1665).

Bennet, J. H. E. and Dewhust, J. C., (eds.), *Quarter Sessions Records with other Records of the Justices of the Peace for the County Palatine of Chester 1559-1760 together with a few earlier miscellaneous Records deposited with the Cheshire County Council, The Record Society of Lancashire and Cheshire, Volume 94* (1940).

Birch, Thomas, *The Court and Times of Charles the First: Containing a Series of Historical and Confidential Letters* (London, 1849).

Bradwell, Stephen, *Physick for the sicknesse commonly called the Plague With all the Particular Signes and Symptoms whereof the most are too ignorant. Collected, out of the choycest authors, and confirmed with good experience; for the benefit and preservation of all, both rich and poore. By Stephen Bradwell, of London physician* (London, 1636).

Bradwell, Stephen, *A vvatch-man for the pest Teaching the true rules of preservation from the pestilent contagion, at this time fearefully over-flowing this famous cittie of London. Collected out of the best authors, mixed with auncient experience, and moulded into a new and most plaine method; by Steven Bradvvell of London, Physition. 1625* (London, 1625).

Brewer, Thomas, *A Dialogue betwixt a Citizen, and a poor Countrey-man* (London, 1636).

Brown, K. M. (et al.), *The Records of the Parliaments of Scotland to 1707* (St Andrews, 2007-2023).

Bruce, John, (ed.), *Calendar of State Papers, Domestic Series, of the reign of Charles I, 1631-1633* (London, 1862).

Boccaccio, Giovanni, *The Decameron*, trans. G.H. McWilliam (London, 1972).

By the King forasmuch as the Kings Maiesties our soueraigne lord is credibly informed, that the infection of the plague is at this present in sundry places in and about the citie of London (London, 1603).

By the King the care wee haue to preuent all occasions of dispersing the infection amongst our people, doeth sufficiently appeare by our former proclamations (London, 1603).

By the King Forasmuch as it hath pleased God of his exceeding goodnesse, to stay his heauy hand wherewith the last yeere hee punished our city of London by the infection of the plague ... (London, 1604).

By the King, Considering what peril oftentimes ensueth by the meanes of great assemblies of people in the time of infectious diseases (London, 1606).

By the King a proclamation declaring His Maiesties pleasure touching orders to be obserued for preuention of dispersing the plague (London, 1636).

By the Queene. *Forasmuch as the Queenes Maiestie our soueraigne Ladie is credibly enfourmed, that the infection of the plague is at this present in sundry places in and around the cities of London and Westminster ...* (London, 1618).

Castle, George, *The chymical Galenist a treatise, wherein the practise of the ancients is reconcild to the new discoveries in the theory of physick, shewing that many of their rules, methods and medicins, are useful for the Curing of Diseases in this Age, and in the Northern parts of the World* (London, 1667).

Chibald, William, *A cordiall of comfort To preserue the heart, from fainting with griefe or feare: for our friends, or our owne visitation, by the plague. Also a thankes-giuing to almightie God, for staying the visitation in London, and the suburbs thereof. Both which may be of vse to Christians in other places, that are cleere, visited, or recouered* (London, 1625).

Dalyell, John Graham (ed.), *Fragments of Scottish History* (Edinburgh, 1789).

Davies, John, *Humours Heau'n on Earth; With The Ciuile Warres of Death and Fortune. As also The Triumph of Death: Or, The Picture of the Plague, according to the Life; as it was in Anno Domini. 1603* (London, 1609).

Dekker, Thomas, *English Villanies: Six Several Times Prest to Death by the Printers; But (still reviving againe) are now the seventh time (as at first) discovered by Lanthorne and Candle-light, And The helpe of a New Cryer, called O-Per-Se-O: Whose lowd voyce proclaimes to all that will heare him, Another Conspiracie of Abuses lately plotting together, to hurt the pece of this Kingdome; which the Bell-man (because hee then went stumbling i'the darke) could Never see till Now* (London, 1632).

Dekker, Thomas, *London Looke Backe at the Yeare of Yeares 1625 and Looke Forward Vpon This Yeare 1630* (London, 1630).

Dekker, Thomas, The Black Rod and the White Rod: Justice and Mercie Striking and Sparing London (London, 1630).

Dekker, Thomas, *The Wonderfull yeare. 1603 Wherein is shewed the picture of London, lying sicke of the plague. At the ende of all (like a mery epilogue to a dull play) certaine tales are cut out in   sundry fashions, of purpose to shorten the liues of long winters nights, that lye watching in the darke for vs* (London, 1603)

Defoe, Daniel, *A Journal of the Plague Year* (London: The Folio Society, 1960).

Drake, Francis, *Eboracum* (London, 1736).

Earwaker, J. P., *The Constables Accounts of the Manor of Manchester from the Year 1612 to the Year 1647, and for the Year 1743 to the Year 1776* (Manchester, 1891).

Ewich, Johann von, *The duetie of a faithfull and wise magistrate, in preseruing and deliuering the eommon [sic] wealth from infection, in the time of the plague or pestilence in two books* (London, 1583).

Gadbury, John, *London's Deliverance Predicted: In a Short Discourse Shewing the Causes of Plagues in General and the probable time (God not contradicting the course of second Causes) when this present Pest may abte* (London, 1665).

Gascoyne-Cecil, Robert (ed.), *Calendar of the Manuscripts of the Most Hon. The Marquis of Salisbury Preserved at Hatfield House, Hertfordshire*, Part VII, Historical Manuscripts Commission (London, 1899).

Graunt, John, *Natural and political observations mentioned in a following index and made upon the bills of mortality* (London, 1661).

Green, Mary Anne Everett (ed.), *Calendar of State Papers Domestic Series, of the reign of Charles II 1664-1665* (London, 1863).

Hildersham, Arthur, *The Doctrine of Fasting and Prayer, and Humiliation for Sinne* (London, 1633).

Hodges, Nathanial, *Loimologia: or an historical account of the Plague in London in 1665: with precautionary directions against the like contagion ... To which is added an Essay on the different causes of pestilential diseases, and how they become contagious: with remarks on the infection now in France and the most probable means to prevent it spreading here* (London, 1720).

Hodges, *Nathaniel, Vindiciae medicinae & medicorum: or An apology for the profession and professors of physick In answer to the several pleas of illegal practitioners; wherein their positions are examined, their cheats discovered, and their danger to the nation asserted. As also an account of the present pest, in answer to a letter. By Nath. Hodges, M.D. Coll. Lond.* (London, 1666).

Hughes, Paul L., and Larkin, James F. (eds.), *Tudor Royal Proclamations Vol III: The Later Tudors (1588-1603)* (New Haven and London, 1969).

Hockliffe, E. (ed.), *The Diary of Rev. Ralph Josselin 1616-1683* (London, 1908).

Jennison, Robert, *Newcastle's Call, to her neighbour and sister townes and cities throughout the land, to take warning by her sins and sorrowes. Lest this overflowing scourge of pestilence reach even unto them also. As also a direction, how to discover such sins as are the procurers of Gods judgments by divers methods* (London, 1637).

Jenison, Robert, *The Citie's Safetie, or a Fruitful Treatise (and useful for these dangerous times): a treatise on Psalm 127.1* (London, 1630).

J. V., Golgotha; *Or, a Looking-Glass for London, and the Suburbs thereof Shewing the Causes, Nature and Efficacy of the present PLAGUES, and the most hopeful Way afor Healing. With an humble Witness against the Cruel Advice and Practice of SHUTTING-UP unto Oppression. Both now and formerly experienced to encrease, rather than prevent the spreading thereof* (London, 1665).

Kemp, W., *A brief treatise of the nature, causes, signes, preservation from, and cure of the pestilence collected by W. kemp* (London, 1665).

Marwick, James D. (eds), *Extracts from the records of the Burgh of Edinburgh 1403-1528*, Vol 1 (Edinburgh: Printed for the Scottish Burgh Records Society, 1869).

Marwick, James D. (eds), *Extracts from the records of the Burgh of Edinburgh 1528-1557*, Vol 2 (Edinburgh: Printed for the Scottish Burgh Records Society, 1871).

Marwick, James D. (eds), *Extracts from the records of the Burgh of Edinburgh 1557-1571*, Vol 3 (Edinburgh: Printed for the Scottish Burgh Records Society, 1875).

Marwick, James D. (eds), *Extracts from the records of the Burgh of Edinburgh 1573-1589*, Vol 5 (Edinburgh: Printed for the Scottish Burgh Records Society, 1882).

Masson, David (ed.), *The Register of the Privy Council of Scotland*, Volume VII (Edinburgh, 1885).

McClure, Norman Egbert (ed.), *The Letters of John Chamberlain* (Philadelphia, 1939).

M.R., *The meanes of preventing, and preserving from, and curing of the most contagious disease,called the plague with the pestilential feaver, and the fearfull symptoms, and accidents, incident thereunto. Also some prayers, and meditations upon death* (London, 1665).

Nashe, Thomas, *The Vnforvnate Traveller. Or, The life of Iacke Wilton* (London, 1594).

Nott, H. E., and Ralph, Elizabeth (eds.), *The Deposition Books of Bristol*, Vol II, 1650-1654 (Bristol,   1948).

Power, Michael (ed.), *Liverpool Town Book 1649-1671*, The Record Society of Lancashire and Cheshire, Vol 136, (1999).

Quintrell, B. W., (ed.), *Proceedings of the Lancashire Justices of the Peace at the Sheriff's Table During Assizes Week, 1578-1694*, The Record Society of Lancashire and Cheshire, Volume 121 (1981).

Raine, A., (ed.), *York Civic Records Vol III*, (The Yorkshire Archaeological Society, 1942).

Raine, A., (ed.), *York Civic Records Vol IV*, (The Yorkshire Archaeological Society, 1943).

Raine, A. (ed.), *York Civic Records Vol V*, (The Yorkshire Archaeological Society, 1944).

Raine, A., (ed.), *York Civic Records Vol VI*, (The Yorkshire Archaeological Society, 1946).

Raine, A., (ed.), *York Civic Records Vol VII*, (The Yorkshire Archaeological Society, 1949).

Raine, A., (ed.), *York Civic Records Vol VIII*, (The Yorkshire Archaeological Society, 1952).

Raine, James, (ed.), *Depositions and other ecclesiastical proceedings from the courts at Durham, extending from 1311 to the reign of Elizabeth*, Publications of the Surtees Society (London, 1845).

Ramsay, Esther, M. E., and Maddock, Alison J. (eds.), *The Churchwardens' Accounts of Walton-on-the-Hill, 1627-1667*, Printed for the Record Society of Lancashire and Cheshire (2005).

Richardson, Moses Aaron (ed.), *Reprints of rare tracts & imprints of antient manuscripts, &c. chiefly illustrative of the history of the northern counties, and printed at the press of M.A. Richardson, Newcastle* (Newcastle, 1844).

Russell, William, *A physical treatise grounded, not upon tradition, nor phancy, but experience, consisting of three parts* (London, 1684).

Shakespeare, William, *Romeo and Juliet*, René Weis (ed.), Arden Shakespeare Third Series (London, 2012).

Tait, James, (ed.), *Lancashire Quarter Sessions Records Vol I*, 1590-1606 (London, 1917).

Taylor, Alexander (ed.), *The Works of Symon Patrick, D.D. Sometime Bishop of Ely including his autobiography Vol IX*, (Oxford, 1858).

T. B., *A dialogue betuuixt a cittizen, and a poore countrey man and his wife, in the countrey, where the citizen remaineth now in this time of sicknesse written by him in the countrey, who sent the coppy to a friend in London; being both pitifull and pleasant* (London, 1636).

T. B., *Lord have mercy upon vs the vvorld, a sea, a pest-house, the one full of stormes, and dangers, the other full of soares and disease : the observance from these, (though especially accomodated to the times of this heavy contagion,) fitted for all times : for all men, and all times are sicke, of the cause of this sickness : Lord haue mercy vpon vs.* (London, 1636).

T. B., *The vveeping lady: or, London like Niniuie in sack-cloth Describing the mappe of her owne miserie, in this time of her heauy visitation; with her hearty prayers, admonition, and pious meditations, as the occasions of them offer themselues in her passion. Written by T.B.* (London, 1629).

Thayre, Thomas, *A treatise of the pestilence vvherein is shewed all the causes thereof, with most assured preseruatiues against all infection: and lastly is taught the true and perfect cure of the pestilence, by most excellent and approued medicines* (London, 1603).

Thucydides, *History of the Peloponnesian War*, trans. Rex Warner (London, 1972).

Vincent, Thomas, *God's Terrible Voice in the City* (London, 1667).

Wharton, Thomas, *Directions for the prevention and cure of the plague fitted for the poorer sort* (London, 1665).

Wheatley, Henry B. (ed.), *The Diary of Samuel Pepys M.A. F.R.S. Volume V* (London, 1897).

Wilson, F. P., (ed.), *The Plague Pamphlets of Thomas Dekker* (Oxford, 1925).

Wither, George, *Britain's remembrancer containing a narration of the plague lately past, a declaration of the mischiefs present; and a prediction of the judgements to come* (London, 1628).

Wood, Marguerite (ed.), *Extracts from the Records of the Burgh of Edinburgh, 1589 – 1603*, Volume 6, (Edinburgh, 1927).

Marguerite Wood (ed.), *Extracts from the Records of the Burgh of Edinburgh 1604 to 1626,* Volume 7 (Edinburgh, 1931).

Marguerite Wood (ed.), *Extracts from the Records of the Burgh of Edinburgh 1626-1641*, Volume 8 (Edinburgh, 1936).

Wood, Marguerite, (ed.), *Extracts from the Records of the Burgh of Edinburgh, 1642-1655* Volume 9 (Edinburgh, 1938).

Secondary Reading

Adamson, H. A., 'Tynemouth Castle: The Eve of the Commonwealth', *Archaeologia Aeliana*, Series 2, Volume 15 (1892).

Ågren, Maria, 'Making Her Turn Around: The Verb-Oriented Method, the Two-Supporter Model, and the Focus on Practice', *Early Modern Women,* Volume 13, No. 1 (2018).

Appleby, Andrew B.., 'Disease or Famine? Mortality in Cumberland and Westmorland 1580-1640', *The Economic History Review*, Vol. 26, No. 3 (1973).

Appleby, Andrew B., 'Famine, Mortality and Epidemic Disease: A Comment', *The Economic History Review*, Vol. 30, No. 3 (1977), pp. 508-512.

Bailey, Mark, *After the Black Death: Economy, society and the law in fourteenth-century England* (Oxford, 2021).

Barnes, Henry, *Visitations of the Plague in Cumberland and Westmorland* (Kendal, 1890).

Bavel, Bas van, (et al.), *Disasters and History: The Vulnerability and Resilience of Past Societies* (Cambridge, 2020).

Beale, Stewart, 'War widows and revenge in Restoration England', *The Seventeenth Century*, 33:2 (2018).

Bell, Walter George, *The Great Plague*, Folio Society (London, 2001).

Benedictow, O.J., 'Morbidity in Historical Plague Epidemics', *Population Studies*, 41 (1987).

Bennett, Judith M., *Ale, beer and brewsters in England: women's work in a changing world, 1300-1600* (Oxford, 1996).

Bennett, Judith M., *History Matters: Patriarchy and the Challenge of Feminism* (Philadelphia, 2006).

Booker, John, *Maritime Quarantine: The British Experience, c. 1650-1900* (Aldershot, 2007).

Bradley, L., 'Some Medical Aspects of Plague' in *The Plague Reconsidered* (Local Population Studies Supplement, 1977).

Brown, A. T., Burn, Andy and Doherty, Rob (eds.), *Crises in Economic and Social History: A Comparative Perspective* (Suffolk, 2015).

Burke, Peter, 'The Invention of Leisure in Early Modern Europe', *Past and Present*, No. 146 (1995).

Cabré, Montserrat, 'Women or Healers? Household practices and the categories of health care in late medieval Iberia', *Bulletin for the History of Medicine* 82 (2008).

Calvi, Giulia, *Histories of a Plague Year: The Social and the Imaginary in Baroque Florence* (Berkeley, 1989).

Campbell, Alex, *The History of Leith from the Earliest Accounts to the Present Period with a Sketch of the Antiquities of the Town* (Leith, 1827).

Canalis, Rinaldo F. and Ciavolella, Massimo (eds.), *Disease and Disability in Medieval and Early Modern Art and Literature* (Turnhout, 2021).

Carmichael, Ann G., *Plague and the Poor in Renaissance Florence* (Cambridge, 1986).

Carmichael, Ann G., 'Plague persistence in western Europe: A hypothesis', *The Medieval Globe*: Vol 1, No. 1, Article 8 (2014).

Carmichael, Ann G., 'The Last Past Plague: The Uses of Memory in Renaissance Epidemics', *Journal of the History of Medicine and Allied Sciences*, Volume 53, Issue 2 (1998).

Champion, J. A. I. (ed.), *Epidemic Disease in London* (1993).

Columbus, Aaron, *The Response to Plague and the Poor in the Suburbs of Early Modern London c. 1600-1650*, Unpublished PhD thesis, Birkbeck, University of London (2021).

Columbus, Aaron, 'To be had for a Pesthouse for the use of this parish': plague pesthouses in early Stuart London, c. 1600-1650', *Urban History*, Volume 51, Issue 1 (2022).

Cook, Harold J., 'Good Advice and Little Medicine: The Professional Authority of Early Modern English Physicians', *Journal of British Studies*, 33 (1994).

Cowan, Mairi, *Death, life and religious change in Scottish towns c. 1350-1560* (Manchester, 2012).

Cox, John Charles, (ed.), *The Parish Registers of England* (London, 1910).

Crawshaw, Jane Stevens, 'The Beasts of Burial: Pizzigamorti and Public Health for the Plague in Early Modern Venice', *Social History of Medicine*, Vol. 24, No. 3 (2011).

Creighton, Charles, A History of Epidemics in Britain (2 vols), (Cambridge, 1891-4).

Cummins, N., (et al.), 'Living standards and plague in London 1560-1665', *Economic History Review*, 69 (2016).

Davies, R., 'The Plague at York in the Seventeenth Century', *Annual Report of the Yorkshire Philosophical Society* (London, 1873).

Dean, Katherine R., *The epidemiology of plague in Europe: Inferring transmission dynamics from historical data,* Unpublished PhD thesis, Centre for Ecological and Evolutionary Synthesis, Department of Biosciences, University of Oslo (2019).

Dingwall, Helen, *Late Seventeenth-Century Edinburgh: A Demographic Study* (Aldershot, 1994).

Eckert, Edward A., *The Structure of Plagues and Pestilences in Early Modern Europe. Central Europe 1560-1640* (Basel, 1996).

Evans, Angela E. and Evans, Charles Morris, 'Plague - a disease of children and servants? A study of the parish records of St Peter upon Cornhill, London from 1580 to 1605', *Continuity and Change*, Volume 32, Issue 2 (2019).

Flannigan, Laura, 'Litigants in the English "Court of Poor Men's Causes," or Court of Requests, 1515–25', *Law and History Review*, 38:2 (2020).

Flinn, Michael (ed.), *Scottish Population History from the 17th Century to the 1930s* (Cambridge, 1977).

Fisher, Elisa (et al.), 'Reflections from the "Forgotten Front Line": A qualitative study of factors affecting wellbeing among long-term care workers in New York City during the Covid-19 pandemic', *Geriatric Nursing,* Vol. 42 Issue 6 (2021).

Fishwick, Henry, *The History of the Parish of Preston* (London, 1900).

Fissell, Mary, 'Introduction: Women, health and healing in early modern Europe', *Bulletin for the History of Medicine* 82 (2008).

Formby, Olivia, 'The emotional evidence of early modern English plague wills', *Historical Research*, Volume 94, Issue 266 (November, 2021).

Foucault, Michel, *Abnormal: Lectures at the Collège de France 1974-1975*, ed. Valerio Marchetti and Antonella Salomoni (London and New York, 2003).

Foucault, Michel, *Discipline and Punish: The Birth of the Prison*, Translated from the French by Alan Sheridan, (New York, 1977).

Galley, Chris, *The Demography of Early Modern Towns: York in the Sixteenth and Seventeenth Centuries* (Liverpool, 1988).

Gaskill, Malcolm, *Crime and Mentalities in Early Modern England* (Cambridge, 2000).

Giltrow-Shaw, Lorna, *"This low built house will bring us to our ends": Plague Quarantine and Prophylactic Boundaries in Early Modern Drama and Culture, 1593-1636*, Unpublished PhD Thesis, The Shakespeare Institute, University of Birmingham (2024).

Ginzburg, Carlo, *The Cheese and the Worms: The Cosmos of a Sixteenth-Century Miller* (Oxfordshire, 1976).

Gowing, Laura, *Common Bodies: Women, Touch and Power in Seventeenth-Century England* (New Haven, 2003).

Green, Monica, 'Women's Medical Practice and Health Care in Medieval Europe', *Signs* 14 (1989).

Grell, Ole Peter, 'Plague in Elizabethan and Stuart London: The Dutch Response', *Medical History*, Volume 34, Issue 4 (1990).

Grell, Ole Peter, 'The Protestant imperative of Christian care and neighbourly love' in Andrew Cunningham and Ole Peter Grell (eds.), *Health Care and Poor Relief in Protestant Europe, 1500-1700* (London, 1997).

Hanawalt, Barbara, *Ties That Bound: Peasant Families in Medieval England* (Oxford, 1986).

Harding, Vanessa, 'Burial of the plague dead in early modern London' in J. Champion (ed.), *Epidemic Disease in London* (London, 1993).

Harding, Vanessa, 'Plague in early modern London: chronologies, localities, and environments' in Lukas Engelmann (et al.), *Plague and the City* (Oxford, 2019).

Harkness, Deborah, 'A View from the Streets: Women and Medical Work in Elizabethan London', *Bulletin for the History of Medicine* 82 (2008).

Hart, Angie (et al.), 'Uniting Resilience Research and Practice with an Inequalities Approach', *SAGE Open*, 6 (4), (2016).

Healey, Jonathan, *The First Century of Welfare: Poverty and Poor Relief in Lancashire, c. 1620-1730* (Suffolk, 2014).

Helt, J. S. W.,'Women, memory and will-making in Elizabethan England' in B. Gordon and P. Marshall (eds.), *The Place of the Dead: Death and Remembrance in Late Medieval and Early Modern Europe* (Cambridge, 2000).

Henderson, John, *Florence Under Siege: Surviving Plague in an Early Modern City* (New Haven, 2019).

Hersh, Ursula, 'Underappreciated and Undervalued: Nurse Dissatisfaction and the COVID-19 Pandemic' in Joanne E. Howard (ed.) *Handbook of Research on Transforming Government, Nonprofits, and Healthcare in a Post-Pandemic Era* (Pennsylvania, 2022).

Steve Hindle, 'Dearth and the English revolution: the harvest crisis of 1647-50', *Economic History Review*, 61, S1 (2008), pp. 64-98.

Hindle, Steve, *On the Parish: The Micro-Politics of Poor Relief in Rural England c.1550-1750* (2004).

Hollander, Melissa, *Sex in Two Cities: The Formation and Regulation of Sexual Relationships in Edinburgh and York*, 1560 to 1625, Unpublished PhD Thesis, University of York (2006).

Houston, R. A., *Peasant Petitions: Social Relations and Economic Life on Landed Estates, 1600-1850* (2014).

Howe, J. C., 'Survivors of the plague', *Journal of the Northumberland and Durham Family History Society*, Vol. 17, No. 4 (1992).

Hufton, Olwen H., *The Poor of Eighteenth-Century France, 1750 – 1789* (Oxford, 1974).

Inì, Marina, 'Materiality, Quarantine and Contagion in the Early Modern Mediterranean', *Social History of Medicine* (2020).

Inì, Marina, *The System of Lazzaretti in the Early Modern Mediterranean*, Unpublished PhD thesis, University of Cambridge (2022).

Jenner, Mark S. R. and Wallis, Patrick, 'The Medical Marketplace' in Jenner M.S.R., Wallis P. (eds), *Medicine and the Market in England and its Colonies, c. 1450–c. 1850* (London, 2007).

Jillings, Karen, *An Urban History of the Plague: Socio-Economic, Political and Medical Impacts in a Scottish Community, 1500-1650* (Oxfordshire, 2018).

Kane, Bronach and Williamson, Fiona (eds.), *Women, Agency and the Law 1300-1700* (Oxfordshire, 2015).

King, Helen, *The Disease of Virgins: Green Sickness, Chlorosis and the Problems of Puberty* Oxfordshire, 2004).

Kissane, Alan, *Civic Community in Late Medieval Lincoln: Urban Society and Economy in the Age of the Black Death, 1289-1409* (Suffolk, 2017).

Local Population Studies, *The plague reconsidered: a new look at its origins and effects in 16th and 17th century England* (Matlock, 1977).

Lord, Evelyn, *The Great Plague: A People's History* (New Haven, 2014).

Lynch, Andrew and Broomhall, Susan (eds.), *The Routledge history of emotions in Europe, 1100-1700* (Abingdon, 2020).

MacLennan, W. J., 'The Eleven Plagues of Edinburgh', *Proceedings of the Royal College of Physicians of Edinburgh*, Volume 31, (2001).

Manders, F. W. D., *A History of Gateshead* (Gateshead, 1973).

Mathias, Peter, 'Time for Work, Time for Play: Relations Between Work and Leisure in the Early Modern Period', *VSWG: Vierteljahrschrift Für Sozial- Und Wirtschaftsgeschichte* 81, no. 3 (1994).

Maxwell, Herbert, *Edinburgh: A Historical Study* (London, 1916).

McKay, Ruth, *Life in a Time of Pestilence: The Great Castilian Plague of 1596-1601* (Cambridge, 2019).

Moote, A. L. and Moote, D., *The Great Plague: The Story of London's Most Deadly Year* (Baltimore, 2004).

Mortimer, Ian, *The Dying and the Doctors: The Medical Revolution in Seventeenth-Century England* (Suffolk, 2009).

Mullett, Charles F., *The Bubonic Plague and England: An Essay in the History of Preventative Medicine* (Lexington, 1956).

Mullet, Charles F., 'Plague Policy in Scotland, 16th-17th Centuries', *Osiris*, Vol. 9 (1950).

Munkhoff, Richelle, 'Searchers of the Dead: Authority, Marginality, and the Interpretation of Plague in England, 1574-1665', *Gender and History*, Vol. 11, Issue 1 (1999).

Murphy, Neil, 'Plague ordinances and the management of infectious diseases in northern French towns c.1450-c.1560' in Linda Clark and Carole Rawcliffe (eds.), *The Fifteenth Century XII: Society in an Age of Plague* (Suffolk, 2013).

Newman, K. L. S., 'Shutt up: Bubonic plague and quarantine in early modern England, *Journal of Social History* (2012).

Ogilvie, Sheilagh, *A Bitter Living: Women, Markets and Social Capital in Early Modern Germany* (Oxford, 2003).

Oram, Richard D., '"It cannot be decernit quha are clean and quha are foulle": Responses to Epidemic Disease in Sixteenth- and Seventeenth-Century Scotland', *Renaissance and Reformation*, Vol. 30, No. 4, Special Issue: Transformative Disorder: Scotland 1550-1650 (Autumn, 2007).

Ormerod, George (ed.), *Tracts Relating to Military Proceedings in Lancashire During the Great Civil War, Remains Historical & Literacy Connected with the Palatine Counties of Lancashire and Chester*, Volume II, The Chetham Society (1844).

Ottaway, Susannah R., *The Decline of Life: Old Age in Eighteenth-Century England* (Cambridge, 2004).

Palliser, D. M., 'Epidemics in Tudor York', *Northern History*, Vol. 8 (1973).

Palliser, D. M., *Tudor York* (Oxford, 1979).

Pelling, Margaret, *Medical Conflicts in Early Modern London: Patronage, Physicians, and Irregular Practitioners, 1550-1640* (Oxford, 2003).

Pelling, Margaret, and Webster, Charles, 'Medical Practitioners', in Charles Webster (ed.), *Health, Medicine and Mortality in the Sixteenth Century* (Cambridge, 1979).

Plamper, Jan, *The History of Emotions: An Introduction* (Oxford, 2012).

Pollitzer, R., *Plague*, WHO Monograph Series No. 22, Geneva, World Health Organization (1954).

Poos, Lawrence Raymond, *A Rural Society After the Black Death: Essex 1350-1525* (Cambridge, 2004).

Porter, Roy, *The Greatest Benefit to Mankind: A Medical History of Humanity* (New York, 1999).

Post, John D., 'Famine, Mortality, and Epidemic Disease in the Process of Modernization', *The Economic History Review*, Vol. 29, No. 1 (1976).

Prest, Wilfred, (ed.), *The Professions in Early Modern England* (Oxfordshire, 1987).

Quataert, Jean H., 'The Shaping of Women's Work in Manufacturing: Guilds, Households, and the State in Central Europe, 1648-1870', *The American Historical Review*, Vol. 90, No. 5 (1985).

Ranger, Terrance and Slack, Paul (eds.), *Epidemics and Ideas: Essays on the Historical Perception of Pestilence* (Cambridge, 1992).

Rawcliffe, Carole, *Urban Bodies: Communal Health in Late Medieval English Towns and Cities* (Woodbridge, 2013).

Reid, Thomas, 'The Lee Penny', *Proceedings of the Society of Antiquaries of Scotland*, Volume 57 (1922).

Richardson, George Bouchier, *Plague and pestilence in the north of England: a chronological account of the epidemic diseases which have vested the north of England from the earliest period* (1852).

Ritchie, John, 'Quarantine for Plague in Scotland during the Sixteenth and Seventeenth Centuries', *Edinburgh Medical Journal*, 55 (11) (Nov 1948).

Ritchie, John, 'The Rule of the Pestilence', *Medical History* 2:2 (1958).

Roger, Euan, 'To Be Shut Up': New Evidence for the Development of Quarantine Regulations in Early Tudor England', *Social History of Medicine*, Vol. 33, No. 4, (2020).

Ruisinger, Marion Maria, 'Die Pestarztmaske im Deutschen Medizinhistorischen Museum Ingolstadt' in Pest! Eine Spurensuche, *Forum* Vol 28 (2020).

S., J. H., 'Kirk or Mercat', *The Scottish Antiquary, or Northern Notes and Queries*, Vol. 11. No. 3 (1897).

Scott, Susan, and Duncan, Christopher, *Biology of Plagues: Evidence from Historical Populations* (Cambridge, 2009).

Scott, S., Duncan, C. J., and Duncan, S. R., 'The plague in Penrith, Cumbria, 1597/8: its causes, biology and consequences', *Annals of Human Biology*, Volume 23, Issue 1 (1996).

Sharpe, J. A., *Crime in Early Modern England, 1550-1750* (London, 1984).

Sharpe, J. A., *Early Modern England: A Social History 1550-1760* (London, 1997).

Sharpe France, R., 'A history of the plague in Lancashire', *Transactions of the Historic Society of Lancashire and §Cheshire* (Liverpool, 1938).

Shrewsbury, J. F. D., *A History of Bubonic Plague in the British Isles* (Cambridge, 1971).

Skelton, Leona, *Sanitation in Urban Britain, 1560-1700* (Abingdon, 2016).

Slack, Paul, *The Impact of Plague in Tudor and Stuart England* (London, 1985).

Slauter, Will, 'Write up your dead: The bills of mortality and the London plague of 1655', *Media History*, 17 (2011).

Stell, Geoffrey, 'The earliest tolbooths: a preliminary account', *Proceedings of the Society of Antiquaries of Scotland*, 111 (1981).

Stewart, Kathy, *Defiled Trades and Social Outcasts: Honor and Ritual Pollution in Early Modern Germany* (Cambridge, 2000).

Stoakey, M., (et al.), '"Great fears of the sickness here in the City…God preserve us all" A plague burial ground in Keith, 1645: an archaeological excavation at St Mary's (Leith) RC Primary School, Leith Links, Edinburgh', *Scottish Archaeological Internet Reports*, 86 (2019).

Stone, Laurence, *The Family, Sex and Marriage in England 1500-1800* (New York, 1977).

Summers, Jeremiah William, *The History and Antiquities of Sunderland, Bishopwearmouth, Bishopwearmouth Panns, Burdon, Ford, Ryhope, Silksworth, Tunstall, Monkwearmouth, Monkwearmouth Shore, Fulwell, Hylton, and Southwick. From the earliest authentic records down to the present time*, Volume I (Sunderland, 1858).

Sykes, *Local Records: or, Historical register of remarkable events, which have occurred in Northumberland and Durham, Newcastle-upon-Tyne, and Berwick-upon-Tweed from the earliest period of authentic record to the present time; with biographical notices of deceased persons of talent, eccentricity, and longevity* (Newcastle, 1866).

Tait, H. P., 'An Edinburgh Tercentenary', *Edinburgh Medical Journal*, 51 (Nov-Dec 1944).

Thomas, Keith, *The Ends of Life* (Oxford, 2009).

Thomas, Keith, 'Work and Leisure in Pre-Industrial Society', *Past and Present*, No. 30 (1965).

Thompson, E. P., *The Making of the English Working Class* (London, 1963).

Thorne, Alison, 'Women's Petitionary Letters and Early Seventeenth-Century Treason Trials', *Women's Writing,* 13:1 (2006).

Thorpe, Lara, ''At the mercy of a strange woman': Plague Nurses, Marginality and Fear during the Great Plague of 1665', in Hopkins, L. and A, Norrie (eds.), *Women on the Edge in Early Modern Europe* (Amsterdam University Press, 2019).

Tillott, P. M., (ed.), *A History of Yorkshire: The City of York* (London, 1961).

Traister, B. H., *The notorious astrologer physician of London: works and days of Simon Forman* (Chicago, 2001).

Tulket, Marmaduke, *A Topographical, Statistical & Historical Account of the Borough of Preston* (Preston, 1821).

Turner, Claire, *Sensing the Plague in Seventeenth-Century England*, Unpublished PhD Thesis, University of Leeds (2023).

Wahrman, Dror, *The Making of the Modern Self: Identity and Culture in Eighteenth-Century England* (New Haven, 2004).

Wallis, Patrick, 'Plagues, Morality and the Place of Medicine in Early Modern England'*, The English Historical Review Volume* CXXI, Issue 490, (2006).

Wear, Andrew, *Knowledge and Practice in English Medicine 1550-1680* (Cambridge, 2000).

Weisser, Olivia, *Ill Composed: Sickness, Gender and Belief in Early Modern England* (New Haven, 2015).

Whellan, William, *A History and Topography of the Counties of Cumberland and Westmorland with Furness and Cartmel, in Lancashire, comprising their ancient and modern history, a general view of their physical character, trade, commerce, manufactures, agricultural condition, statistics, etc. etc.* (London, 1860).

Whillis, Paul, *The Experience of Scottish Occupation in Newcastle upon Tyne and the Bishopric of Durham, 1640-1647*, Unpublished MA Thesis, Durham University (2002).

Whittle, Jane, 'A Critique of Approaches to 'Domestic Work': Women, Work and the Pre-Industrial Economy', *Past & Present*, volume 243, Issue 1 (2019).

Whittle, Jane and Hailwood, Mark, 'The gender division of labour in early modern England', *The Economic History Review,* Volume 73, Issue 1 (2020).

Whittles, Lilith K., and Didelot, Xavier, 'Epidemiological analysis of the Eyam plague outbreak of 1665-1666', *Proceedings of the Royal Society B: Biological Sciences*, Vol. 283, Issue 1830 (2016).

Wiesner, Merry E., *Working Women in Renaissance Germany* (New Brunswick, 1986).

Willen, Diane, 'Guildswomen in the City of York, 1650-1700', *The Historian*, Vol. 46, No. 2 (1984).

Wilson, F. P., *The Plague in Shakespeare's London* (Oxford, 1927).

Wrightson, Keith, *English Society: 1580-1680* (New Brunswick, New Jersey, 1982).

Wrightson, Keith, *Ralph Tailor's Summer: A Scrivener, His City and the Plague* (New Haven, 2011).

Yue, Ricci P. H., (et al.), 'Trade routes and plague transmission in pre-industrial Europe', *Scientific Reports 7*, (2017).

Zemon Davis, Natalie, *Society and Culture in Early Modern France* (California, 1975).

Zemon Davis, Natalie, *Women on the Margins: Three Seventeenth-Century Lives* (Cambridge, Massachusetts, 1995).