

URBAN BODIES

Communal Health in Late Medieval English Towns and Cities

PROFESSOR CAROLE RAWCLIFFE

We are delighted to publish Professor Rawcliffe's (University of East Anglia) new book *Urban Bodies: Communal Health in Late Medieval English Towns and Cities*.

Urban Bodies is the first comprehensive, full-length study of all aspects of communal health. It challenges common notions of hygiene and health in the late Middle Ages and looks at the control of diseases and epidemics, sanitation, clean water and food supply and food quality, medical care and much more.

Professor Rawcliffe was kind enough to answer our most burning questions about the volume and the topics it covers.

Professor Rawcliffe, can you tell us how you became involved in research on hygiene and communal health in the Middle Ages?

I've been collecting material on late medieval public health since the 1980s, when my interest in medical history began, but my plans for a book on the topic took shape while I was working on *Leprosy in Medieval England*, which Boydell published in 2006. It was then that I realised how far our ideas about medieval responses to disease have been framed by the condescending attitudes of Victorian sanitary reformers. Perhaps for this reason no-one has yet produced a monograph on the subject, and I took up the gauntlet!

You mention that Victorian (and indeed some later) historians saw the situation of communal health during the Middle Ages as rather primitive. When did more balanced views of medieval health and hygiene start to appear?

The real change began in the 1920s and 1930s, when scholars such as Lynn Thorndike (who memorably called for 'less mud-slinging and more facts') and E.L. Sabine began to challenge entrenched perceptions of medieval backwardness and squalor. Although some outstanding work has since been produced on aspects of public health in medieval and early modern England, historians tend to focus on southern Europe, and especially Italy. There's still a widespread assumption that we lagged far behind the Italians, which is not invariably true.

Which time frame does your book cover and can you explain why you chose to focus on this particular period?

I chose to cover the period 1250-1530, during which urban communities were obliged to confront a series of daunting threats to human health. There were dramatic fluctuations in population and successive crises occasioned by famine and infectious diseases: not for nothing has the fifteenth century been called 'the golden age of bacteria'. By starting in 1250 we can see what health measures were in place *before* the Black Death, and how far responses to the sick poor, including the provision of hospitals and almshouses, may have changed over time. It seemed appropriate to end on the eve of the Dissolution, when so many of these institutions disappeared and the Tudor state assumed a more interventionist role.

What impact did the Black Death in 1348 have on England, with regard to communal health and disease prevention?

On its own, the 1348-9 epidemic would have had only a passing impact on the development of health measures; but plague soon became an urban phenomenon, striking towns and cities on a regular basis from then onwards. Because corrupt air (miasma) was regarded as the principal earthly cause of pestilence, efforts to clean the streets and rivers, to remove sanitary nuisances (such as slaughterhouses and blocked drains), to improve the water supply and to avoid atmospheric pollution redoubled. Since poor diet and corrupt food were also regarded as agents of disease, suppliers and markets were subject to far tighter surveillance and regulation. It must be said, though, that many communities tended to let things slide between epidemics, in part because of the expenditure involved.

Did influences for improvements in sanitation and hygiene come from abroad and/or did English developments influence other countries?

The medical ideas that underscored these measures derived from Ancient Greek and Muslim authorities whose theories about the impact of miasmatic air on the human body were especially influential. Advice literature on how to avoid the plague also came from abroad and was translated from Latin for an enthusiastic English audience. It seems likely that some of the orders issued by the crown for cleaning up towns and cities were influenced by royal physicians from France and Italy, or by Englishmen who had studied medicine there (Thomas Linacre was, for instance, responsible for Cardinal Wolsey's introduction of quarantine). At a more practical level, communities employed experts from the Netherlands as consultants on major hydraulic schemes and similar ventures. But most English urban communities modelled their provisions on London, which had the first piped water supply in medieval Europe.

In your introduction you write that medical theories from the Ancient Greek influenced elites in urban communities. Were these ideas supported and welcomed by the church or did their ideas clash?

By and large, the Church readily accepted the medical theories of the Ancient Greeks and the Muslim scholars who developed and transmitted them. Indeed, many schemes for urban improvement, such as the introduction of piped water, relied on ecclesiastical sponsorship. Clergy took the lead in translating Latin texts on health into English so that ordinary people could use them, not least because these works emphasised the importance of moderation and restraint, especially

where sex and alcohol were concerned (some things never change). It is important to remember that the Church regarded human sin as the ultimate cause of plague, which was God's punishment for misbehaviour. As a result, schemes for *moral* reform, such as the removal of prostitutes and idle beggars, were introduced alongside more pragmatic attempts to clean the streets.

How were rules and regulations on health put into place, and who or which authorities released laws, regulated and controlled the urban hygiene? Did this differ in the various parts of England?

It was once believed that public health initiatives were bound to fail in medieval England because they were imposed from above on an ignorant and indifferent populace. My research suggests, however, that although many measures were promulgated at a national level by the king and parliament, or more locally by urban elites, a significant body of householders and members of the urban workforce were happy to enforce them. Craft guilds, for example, played a major part in the regulation of nuisances and industrial pollution, while local juries were keen to 'name and shame' offenders. We should not underestimate the importance of civic pride in this respect, notably in cities such as London, Exeter and Norwich. It was, however, far harder to keep up appearances in places like Carlisle, which were poorer and afflicted by endemic warfare, and in towns like Southwark, where there was no single governing body or overlord.

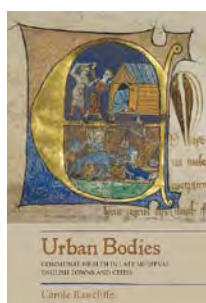
You mention 'sell by dates' and that public toilets were common in the Middle Ages. Which find/fact from your research do you think will surprise us most?

There's a mistaken belief that medieval people ate contaminated food, which they doused with spices to conceal the rancid taste. I am sure that readers will be impressed by the strict controls enforced in many urban food markets to prevent the sale of substandard meat and fish or of any cooked food that had been reheated. In light of the recent horsemeat scandal, some of them may feel that the practice of putting offenders in the pillory or parading them round the streets as a public spectacle might work wonders today!

Has your dog, Basil (whom we enjoyed meeting), forgiven us all here at Boydell and Brewer for forcing you to neglect him during production of the book?

As befits his imperial heritage, Basil inhabits a pug-centred universe and expects others to do likewise. He was particularly aggrieved to learn that dogs were sometimes killed during plague epidemics as a sanitary precaution, although I reassured him that only low status canines were culled, while '*chiens gentils*' escaped unscathed. His late predecessor, a rescue bull terrier of uncertain temper, would have had a far tougher time.

Thank you very much.



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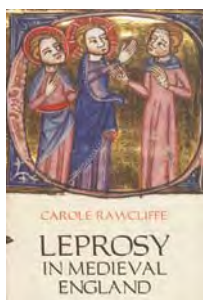
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