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Unequal Implementation: The Impact of Government Anti-Plague Policies on the London Poor in 1665

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Unequal Implementation: The Impact of
Government Anti-Plague Policies on the London
Poor in 1665

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Introduction

Development of London

London is an ancient city whose history extends for nearly two thousand years. For much of that time, it has been a major player on the world stage and the driving force in English history.¹ The city was founded by the Romans in the first century AD and was known then as Londinium. Even in those days London was a prosperous trading community and an important administrative center, but the collapse of the Western Roman Empire in the fifth century greatly reduced the city's wealth and population.² London was subsequently controlled by the migrating Anglo Saxons³ and then from 1066 the Norman invaders ruled London. Key aspects of London's governing system of aldermen, sheriffs and a Lord Mayor were laid down by Norman London in the twelfth century and remain in place, albeit in a diminished form, into the modern day. The mayor served a limited term and was elected from among the aldermen by the citizens of London, although often only the wealthy voters were allowed to attend. The aldermen were elected for life by individuals from their ward, although the mayor and other aldermen could veto an election. These aldermen wielded great powers over the Londoners in their wards and they protected their authority by restricting the involvement of ordinary citizens in civic activities.⁴

¹ Walter Besant, *The History of London*. 2nd edition (London: Longmans, Green, and co., 1894), Chap 39.

² Stephen Inwood, *A History of London*. New York: Carroll & Graf Pub., 1998, 15-19, 33.

³ Inwood. *History of London*. 35-36.

⁴ Inwood. *History of London*. 59-67

From the early 1500's until 1665, the population of London ballooned from a moderately sized city to the largest city in the Christian world at about five hundred thousand inhabitants.⁵ This growth was spurred mostly by migration from rural communities throughout England. England itself had a negative natural growth, contributed mostly by the high mortalities in the overcrowded poor periphery of the city, while the wealthy city center could maintain a positive natural growth.⁶ This massive growth is a testament to the great economic power of London and its importance, but many of the migrants who came to London were desperately in search of food and work because the growing rural population was becoming a burden on England's agricultural economy. Many of these migrants were unsuccessful and became vagrants who were demonized by the public, considered a potential source of crime, abused, imprisoned by the authorities, and in many cases died of exposure and starvation.⁷ Even by comparison to other European and English cities, London was growing at a rapid pace⁸ despite the massive epidemics that could kill as much as one fifth of the city at a time.

The Reformation in the mid sixteenth century brought about radical changes to London. The dissolution of the monasteries transferred numerous burdens such as care for the poor, sick and orphans to the city authorities, who delegated these tasks primarily to the individual parishes. Their methods of poor and sick relief would persist through the Great Plague in 1665 and over time would be more formally crystallized as a function and power of the parish in a time when these functions were considered the role of

⁵ Inwood. *History of London*. 157.

⁶ Neil Cummins, Morgan Kelly, and Cormac Ó Gráda, "Living standards and plague in London, 1560–1665." *Economic History Review* 69, no. 1 (2016). 3.

⁷ Inwood. *History of London*. 160-164.

⁸ Cummins. "Living Standards." 3.

charity not government programs.⁹ The dissolution of the monasteries, while occasionally harmful to the poor, was often personally beneficial to the King and the aristocrats who came into possession of such land.¹⁰

By 1665 London was the economic powerhouse of England and a major center of trade with its colonies, Northern Europe and more other distant regions such as the Levant. This great economic growth brought wealth to the city and along with it, this growth brought merchants, laborers, and entertainers. Not only were English merchants and laborers attracted to London but also large alien population, who set up their own communities and controlled a significant portion of trade through negotiating deals with and giving bribes to the King.¹¹ A traveler to London would have seen many manners of things: people speaking a multitude of languages, bustling streets packed with shops and shoppers, and merchant ships unloading goods at docks on the Thames. They would have seen a city of wide streets and large houses, whose residents could afford great luxuries and plenty of food.¹² They would have also seen a city of narrow alleyways, cramped multifamily residences, and numerous vagrants.¹³ These two portraits of London reveal the consequences of London's massive growth and economic importance, to which people of all backgrounds flocked to make a living. London was a city in which

⁹ Richelle Munkhoff, "Poor women and parish public health in sixteenth-century London." *Renaissance Studies* 28, no. 4 (2014): 579-596. 1-3.

¹⁰ J. F. D. Shrewsbury, *A History of Bubonic Plague in the British Isles* (London: Cambridge University Press, 1970), 152-154.

¹¹ Inwood. *History of London*. 100-107.

¹² Stephen Porter, *Lord Have Mercy Upon Us: London's Plague Years* (Stroud, England: Tempus Publishing Limited, 2005), 197.

¹³ Inwood. *History of London*. 167.

the rich and powerful controlled the administration and aggressively guarded their privileges.¹⁴

History of Plague in the City

Plague has been endemic to the city of London since at least 1348, which began what modern writers would call the Black Death, although the Bacteriologist J.F.D. Shrewsbury considers the term unfit for historical literature and unfit as an epidemiological description seeing as bodies of plague victims turned purple not black.¹⁵ Epidemics of plague struck England and especially London on regular intervals following 1348.¹⁶ These plagues caused significant losses of life and wealth throughout England but the major trading cities such as London took the brunt of the destruction. The most significant of these early epidemics was the “Great Pestilence” from 1348 to 1349 which some claim destroyed half the population of England although Shrewsbury argues that the rural nature of England would have made the spread of plague difficult and notes no major economic or social changes as a result of the epidemic. He places the total mortality at a not insignificant twenty percent.¹⁷ Plague may have been most feared, but London was also ravaged by numerous other epidemical diseases such as influenza, typhus, and smallpox. In many cases, epidemics of plague during the Black Death were

¹⁴ Inwood. *History of London*. 67

¹⁵ Shrewsbury. *Bubonic Plague in the British Isles*. 37.

¹⁶ Stephen Porter, *The Great Plague* (Gloucestershire: Sutton Publishing Limited, 1999), 2.

¹⁷ Shrewsbury. *Bubonic Plague in the British Isles*, 122-123.

likely supplemented by mortality from other epidemical diseases, especially in winter when infectious fleas hibernate.¹⁸

Medical science at this time was primitive by modern standards and physicians relied upon the methods used for other epidemic diseases. Physicians by 1665 had accepted that many factors contributed to the spread of disease especially contact with an infected individual. A lack of an understanding of the plague's transmission from rat to man not only contributed to the failure to successfully combat the plague but also added to the disease's fear and supernatural aura.¹⁹ Despite their inability to defend against the plague, physicians and medical science rather than spiritual assistance were the basis of the government's response unlike in 1348. The English College of Physicians did not have full control over medicine in London during the epidemics. They had rivals in the "chemical physicians," who they claimed were frauds and indeed there were many in London who took advantage of people's fears to sell home remedies and folklorish miracle cures.²⁰

The history of plague in London demonstrates the social stratification and increasing social stratification throughout London. In 1563 the mortality rate was roughly equal across the city but by 1665 the mortality rate was much lower in the center of the city. This drop in mortality rate corresponded with an increasing concentration of wealthy individuals in the city center.²¹ It also corresponded with the increasing use of bricks as house material among the wealthy as well as improved hygiene while also

¹⁸ Shrewsbury. *Bubonic Plague in the British Isles*. 127-128.

¹⁹ Shrewsbury. *Bubonic Plague in the British Isles*. 124.

²⁰ Charles F. Mullett, *The Bubonic Plague and England; an essay in the history of preventive medicine* (Lexington: University of Kentucky Press, 1956), 3.

²¹ Cummins. "Living Standards." 4, 9, 10.

corresponding with rapid urbanization of the ever more crowded parishes on the outskirts.²² The major plague epidemics in total though had a relatively constant mortality rate but the ever growing population of England ensured that epidemics would become deadlier overtime.²³

1665 would be the year of London's deadliest outbreak of plague which would shortly thereafter be known as the Great Plague. The Great Plague has been a fairly well researched occurrence of plague in Europe. In part because of the massive scope of destruction and its great impact on the quality of life for Londoners, the epidemic is useful for researching the response of the government to the plague. The Great Plague in 1665 produced considerably more literature than previous epidemics and allows one to understand the feelings of many literate Londoners towards the plague and the government's response; from its medical or spiritual causes to the cruelty of the government's public health policies.²⁴ Even the Great Fire which occurred shortly after in 1666 failed to destroy most of the literature and public records.²⁵ Unfortunately the primary literature is mostly from the more educated Londoners while most of the poor were illiterate.

The Great Plague in London has also been analyzed and described by many modern writers, such as J. F. D. Shrewsbury's *A History of Bubonic Plague in the British Isles*, Charles F. Mullett's *The Bubonic Plague and England*, and Stephen Porter's *Lord Have Mercy Upon Us*, which all dedicate a chapter to the 1665 epidemic. Stephen

²² Cummins. "Living Standards." 15.

²³ Cummins. "Living Standards." 4

²⁴ Mullett. *The bubonic Plague and England*. 195

²⁵ Cummins. "Living Standards." 4.

Porter's *The Great Plague*, and Walter George Bell's *The Great Plague in London in 1665* both are dedicated entirely to the Great Plague. The Great Plague and plague in general is often fictionalized in movies and books. One of the most fascinating being Defoe's *Journal of a Plague Year*, which while fictional was written during a time when plague was still endemic to parts of Europe.

Records clearly indicate, and contemporary writers acknowledge that the poor were the primary victims of the plague. There are many argued reasons such as poor living conditions, diet, and less access to proper hygiene, but this paper will focus specifically on the impact of government public health policies on the poor. This paper will argue that the government's health policies not only failed to help the sick but in fact harmed the poor while at the same time these policies did little harm to the wealthy and in some ways gave privileges to them. Along with the official health policy, this paper will address inconsistencies in the application of public health policies and particularly the tool of quarantine.

Chapter one will discuss the response to the plague by all levels of governmental authority in London. That would include the King, the English Privy Council, Parliament, the city administration, and most importantly the Parishes. Their major contributions and responsibilities will be outlined and a detailed description of the intended implementation of quarantine will be given.

Chapter two discusses the negative impact of quarantine on the individual and argues both that the public health policies were written in a manner that was more palatable to those with wealth and the quarantine was inconsistently applied to the wealthy. In addition, it will focus on the public health workers who were predominantly

poor and often coerced into accepting dangerous, undesirable, and poorly paid jobs. This chapter will also describe the difficulties imposed upon middle class individuals who fled London but struggled to find residence outside of London due to restrictions placed upon the movement of people during Plague times.

Chapter three focuses on the economic impact of the plague and especially the government's response. To do this it will focus on the restrictions to trade, the costs on the individual in quarantine, and the costs to the parishes. It will also explain the inequalities in funding and the needs of the various parishes and how one's geographical location within London, particularly their parish, contributed to the care they received.

Chapter 1: The Response

The year 1665 was a tumultuous time for the City of London and Great Britain as a whole. Only five years after the restoration of the Monarchy under Charles II and England was once again struck by disaster. The period of 1665-66 would witness both the Great Plague of London as well as the Great Fire; both of which devastated the city. The Great Plague was both London's deadliest plague epidemic but also its final major outbreak, and in total, London's Bills of Mortality recorded 70,594¹ dead of plague although it is estimated to have been as much as 100,000.²

The 1665 plague epidemic, which would become known as the Great Plague, was a great calamity for the city of London and its people. Besides the tremendous loss of life, it also created economic and social hardships for London's inhabitants. Despite, and perhaps as a result of the government's efforts, the plague was never brought under control, and while all of London suffered it was the poor who suffered far more than the well off. They owed their suffering in part to the terrible living conditions of the impoverished sections of London, but they also owed their suffering to the government policies, which provided little assistance to the poor and in many instances had a disparately negative impact on the poor. Thus, this study will focus its attention on the socio-economic conditions of London and take into account the actions or inactions of

¹ By the Company of Parish-Clerks of London, *London's dreadful visitation: or, a collection of all the Bills of Mortality for this present year: beginning the 27th of December 1664 and ending the 19th of December following: as also the general or whole years bill. According to the report made to the King's most excellent Majesty* (London: E. Cotes, 1665), 109, 112.

² Shrewsbury. *Bubonic Plague in the British Isles*. 446

the government; particularly the impact of orders and recommendations made by the authorities in London.

The preface to the first edition of *The Great Plague in London in 1665* by the historian Walter George Bell begins: “This book tells a tragedy of the poor. A few men—very few—of birth, position, and wealth stayed in London, sharing the suffering which was the lot of all, and there are names that gained added lustre in that year of calamity; but in its immensity and in overwhelming proportion it was “the poore’s Plague.”³ Bell laces his analysis of the Great Plague with harsh criticism of the government’s ineffective response, yet despite the promising first paragraph of his preface, he does not put any particular focus on the impact of the government’s policies on the poor, although he does acknowledge that the authorities’ failures came at the expense of Londoners.

In seventeenth century England, plague epidemics were not a common occurrence, but plague was endemic to the region which recorded several plague deaths annually.⁴ Plague had existed in England at least since the beginning of the Black Death in 1347,⁵ and had been responsible for a significant loss of life, yet London was frequently the victim of other epidemic diseases such as small pox and spotted fever which also devastated the populace.⁶ For the people of 1665 London, disease was an everyday threat.

³ Walter George Bell, *The Great Plague in London in 1665* (London: Bodley Head, 1951), ix.

⁴ *Bills of Mortality*. 5.

⁵ Shrewsbury. *Bubonic Plague in the British Isles*. 37.

⁶ William Boghurst, *Loimographia: An Account of the Great Plague of London in the year 1665*. Edited by Joseph Frank Payne (London: Shaw and Sons, 1894), 20.

Biology of Plague

The 1665 epidemic is believed to have been caused by the bacteria *Yersinia pestis*,⁷ and the infection manifested itself mostly in the form of Bubonic Plague, although Pneumonic was likely present to some degree.⁸ Descriptions from 1665 of the disease's signs and symptoms as well as more recent DNA analysis of mass graves dating to 1665 has lent evidence to the theory that *Yersinia pestis* was responsible for the 1665 epidemic. In addition to 1665, *Yersinia pestis* is believed to have been the cause of the Black Death as well as the earlier Justinian plague of the sixth century and perhaps even the Plague in Athens described by Thucydides. Bubonic Plague, often shortened to plague or referred to as the pest or pestilence, is characterized by fever, headache, chills, and most characteristically by swollen lymph nodes called buboes.⁹ The English physician Nathaniel Hodges observed, "The signs more peculiar to a Pestilence, are those Pustules which the common people call Blains, Buboes, Carbuncles, Spots, and those marks called Tokens."¹⁰ The combination of: symptoms, high lethality, and uncontrolled infectivity made plague the most feared disease in London.¹¹

Understanding the biology of plague is essential to understanding the factors that influenced the spread of the disease and contributed to its high infectivity. Humans are not the natural hosts of the plague bacterium; rather rodents such as the Black Rat are the

⁷ MOLA team. 2016. "1665 Great Plague bacterium DNA identified for the first time." Museum of London Archeology.

⁸ Shrewsbury. *Bubonic Plague in the British Isles*.

⁹ CDC.gov. 2015. "Plague: Symptoms."

¹⁰ Nathaniel Hodges, *Loimologia or An Historical account of the plague in London in 1665: with precautionary directions against the plague*. Translated by John Quincy (London: E. Bell, 1720), Early English Books Online, 87.

¹¹ Boghurst. *Loimographia*. 5, 15.

bacteria's natural host. A human body generally becomes infected when a rat flea abandons a recently dead rat and searches for the nearest living thing on which it can sustain itself,¹² and in the crowded residences of the poor in London, humans fell easy prey to fleas carrying the deadly plague. The building materials used in the houses of the poor were perfect living environments for rats thus the poor came in much closer contacts with the rats who carried the disease, while the rich would have had less contact. Only the rarer pneumonic plague can spread from person to person.¹³

Government Authorities in London

London of 1665 was overseen by several levels of authority. The uppermost level of government in England would have been the English King, who in 1665 was Charles II and whose crown had just been restored¹⁴ five years earlier following the death of Oliver Cromwell and the end of the English republic. The Sovereign's main means of action came through the English Privy Council which acted as both an advisor to the King and virtually as its own executive branch. The English Parliament consisted of the House of Lords and the House of Commons. As a legislative body it was especially important in regulating finances and the taxation necessary to undertake a massive public health response.¹⁵ The next level of authority in London would have been the Lord Mayor and the Council of Aldermen who were the main administrative authority in the

¹² CDC.gov. "Plague: ecology and transmission." Last modified September 14, 2015.

¹³ CDC.gov. "Plague: Symptoms." Last Modified September 14, 2015.

¹⁴ Richard Lord Braybrooke. Ed. *The Diary of Samuel Pepys, ESQ., F.R.S. from 1659 to 1669 with memoir.* (London: Frederick Warne and Co., 1887); Harvard University – Collection Development Department, Widener Library. April 23rd 1661.

¹⁵ Braybrooke, *The Diary of Samuel Pepys*, November 25th.

City. Their actions during the 1665 epidemic were mainly to enforce the orders set down from the Privy Council as well as their own orders. Both the Privy Council and the city administration set down orders specific to the plague in London, but the Privy Council also contributed to Kingdom wide regulations.¹⁶ These layers of authority were run by the wealthy and powerful from within London and throughout England. They were made up of the rich merchants, landed elites, and in general the groups of people who would flee London at the outbreak of plague, yet they were responsible for ensuring the wellbeing of the poor as well.

At the bottom most level of London's government were the parishes which served both a religious and secular role. London and its suburbs were divided into sections with each based around a parish. The Parishes in London can be roughly categorized as those within the Walls of London, those outside of the Walls, and those belonging to the "outparishes" of Middlesex and Surrey.¹⁷ These categorizes make an important distinction between parishes because those within the walls tended to be wealthier than those outside the walls.¹⁸ The Parish was the main body responsible for community issues such as public health and caring for the poor. It was made responsible for carrying out many of the public health orders created by the City government and Privy Council and thus was of paramount importance during the plague of 1665 as well as earlier 17th century plagues.¹⁹

¹⁶ Mullett. *The Bubonic plague and England*. 200.

¹⁷ *Bills of Mortality*. 5.

¹⁸ Cummins. "Living Standards." 4, 9, 10.

¹⁹ Munkhoff. "Poor Women and Public Health." 580.

Bills of Mortality

As the protectors of England and interested in ensuring economic and social stability, the government took an active role at all levels in managing the epidemic and coping with the consequences. A large and evolving aspect of the government's response to the plague was the Bills of Mortality. By 1665 the Bills of Mortality were published documents that listed several demographic details: the number of people who were buried in each parish, both total buried and those buried due to dying of the plague, as well as the total number of burials within the city of London and its suburbs.²⁰ The Bills of mortality were first developed in the year 1518, and were at first simpler documents that only recorded plague deaths and were only published during large epidemics of plague. Later they would become more detailed and would be published more regularly especially in the period before the 1665 epidemic.²¹

The Bills of Mortality informed the government as well as ordinary citizens on the status of an epidemic and which places of London suffered the highest mortality. Ideally this could have helped the government direct a response if an outbreak of plague was appearing and could give warning to the inhabitants of London so they could prepare by stocking up on supplies and medicine, be more cautious to avoid others, and to even flee the city if they wished.

Many individuals both contemporaries, and modern historians have criticized the Bills of Mortality for its inaccuracies. A major problem revolved around the recording

²⁰ *Bills of Mortality*. 5.

²¹ Inwood. *History of London*.

not of deaths but rather of burials.²² Thus only those buried by the parish were included in the Bills of Mortality while non-conformists such as Anabaptists and Puritans were not included as they performed their own burials. In addition, the high death rate among the poor and homeless at the peak of the epidemic would have made it difficult to accurately record all burials and causes of death. The famous diarist Samuel Pepys, a member of the naval administration and future MP, noted on August 31st that: “In the city died this week 7496, and of them 6102 of the plague. But it is feared that the true number of the dead this week is near 10,000; partly from the poor that cannot be taken notice of, through the greatness of the number, and partly from the Quakers and others that will not have any bell ring for them.”²³ Another criticism revolves around determining whether an individual died of plague or another disease. The large influx of dead, the often low training of those who determined cause of death, and the similarities between the symptoms of common endemic and epidemic diseases could make the number of burials due to plague more inaccurate. Therefore determining deaths in the city and especially determining deaths in certain segments of the city such as the poorer parishes outside of the wall could be inaccurate if based solely on the Bills of Mortality.

The historian Walter Bell argues that the most significant factor in the inaccuracies of the Bills were the failure of searchers and clerks to document all of the deaths in a time when there were so many and to accurately identify plague as cause of death. He insists that the omission of the non-conformists from the Bills would not produce significant inaccuracies because of their relatively small populations,²⁴ although

²² *Bills of Mortality*. 5.

²³ Braybrooke, *The Diary of Samuel Pepys*, August 31st.

²⁴ Bell. *The Great Plague*. 180-181.

J. F. D. Shrewsbury disagrees with that assessment and instead argues that exclusion of non-conformists was a significant flaw in the Bills and greatly contributed to their unreliability. Shrewsbury does agree with Bell about the trouble with recording and identifying causes of death in such a great mortality and with so few laborers for the task. Though Shrewsbury also considers wide spread falsification to have been significant and observes that the non-plague causes of death greatly increased over their normal averages during the epidemic, although honest misidentification of the cause of death was likely a significant factor also.²⁵

Government Response to the Plague

The rulers of London and of England responded to the plague at multiple levels. Throughout 1665 King Charles actively responded to the epidemic by directing the government's focus on the plague and also directly through proclamations. One such proclamation issued during the 1665 epidemic prohibited Barnwell Fair from remaining near Cambridge "that no good means may be neglected to stay the further spreading of the present infection and contagion, doth find it convenient to prevent all occasions of publick concourse."²⁶ The English Privy Council was, in 1665, active in crafting and issuing orders for preventing the spread of the infection, in contrast to the Parliament which was less active. This was in part because the Parliament avoided meeting during

²⁵ Shrewsbury. *Bubonic Plague in the British Isles*. 445.

²⁶ *By the King. A Proclamation Prohibiting the keeping of Barnwell-Fair near Cambridge* (London: John Bill and Christopher Barker, June 14, 1665), Early English Books online, 1.

the epidemic in order to avoid spreading the infection amongst its members.²⁷ Even after the end of the 1665 epidemic, the Parliament was unable to reach an agreement on modifying the plague orders to be more effective.²⁸ Yet the Privy Council's major actions in crafting orders occurred before and after the outbreak of plague in 1665 and they only met three times over the course of the epidemic.²⁹ The Lord Mayor and aldermen acted in a similar manner to the Privy Council. They published orders for preventing the spread of the plague and directly tried to ensure they were implemented by the parishes. The city government tried many things to prevent the spread of the plague, including the lighting of bonfires, two to each parish.³⁰ Pepys writes in his diary on September 6th, observing the Lord Mayor's order: "To London, to pack up more things; and there I saw fires burning in the street as it is through the whole city, by the Lord Mayor's order."³¹

The authorities were well aware, before the epidemic broke out, that plague was ravaging continental Europe and the Dutch in particular, whose large merchant fleet could inadvertently carry plague to England. For this reason, quarantines were placed on ships entering London that were suspected of departing from an infected harbor.³² This harmed the Dutch especially and did not help negotiations attempting to avoid war between England and Holland. Thus, while England was preparing for and responding to

²⁷ *By the King. A Proclamation concerning the prorogation of the parliament* (London: John Bill and Christopher Barker, August 30, 1665), Early English Books online, 1.

²⁸ Mullett. *Bubonic Plague in England*. 209

²⁹ Shrewsbury. *Bubonic Plague in the British Isles*. 448.

³⁰ *Cautionary Rules for preventing The Sickness; Published by Order of the Lord Mayor* (London: James flesher, 1665), Early English Books Online, 1.

³¹ Braybrooke, *The Diary of Samuel Pepys*, September 6th.

³² Porter, *Lord Have Mercy*, 190-193.

the plague it was also preparing for war. The protection of sailors and other institutions necessary for war from the plague became a priority for the government.³³

One of the best sources of written evidence attesting to the government's attempts at a plague response were published directions and orders directed to the parish authorities. The public health orders issued in 1665 were simply the same public health orders used in past plague epidemics, although they tended to be more detailed.³⁴ These were the same plague orders that had proven unable to halt those past epidemics and faced with another epidemic in 1665 the order's writers avoided innovation.³⁵ As the poor suffer most in an epidemic of plague, the failure of the government to even attempt to change their policies, and the consistent failure to correctly apply their policies shows a lack of serious care for the victims of a plague epidemic.

Bell argues that the nature of English and particularly London government administration made the implementation of a public health response difficult. The city delegated responsibility into over a hundred parishes each with autonomy in directing the response and the land was divided unequally among the parishes. Bell argues that the largest parishes, which existed outside the walls and were very poor, had the most costs and the least ability to administer yet they were expected to carry out the public health orders to safeguard the entire city against plague.³⁶

In addition to government institutions, the English medical establishment took a key role in combating the plague epidemic. The English College of Physicians was

³³ Mullet. *The Bubonic Plague and England*. 200-201.

³⁴ Mullett. *Bubonic Plague in England*. 198.

³⁵ Boghurst. *Loimographia*. 57.

³⁶ Bell. *The Great Plague*, 77.

founded in 1518 and since then had acted as the chief advisor on matters of personal and public health.³⁷ During the epidemic of 1665 as well as past epidemics, the College of Physicians worked as advisors to the local and regional authorities and was expected to provide medical assistance to those infected with plague as well as routine care. As authorities on disease and medicine, the College was tasked with drawing up recommendations for means to combat the disease.³⁸ In addition members routinely published advice for personal protection such as proper diet, fuming with brimstone, taking preventative medicines, &c.³⁹ At the personal level, physicians also met with patients to check on the state of the infection, to prescribe particular medicines, and occasionally, albeit rarely, to perform operations such as bloodletting.⁴⁰ It is from these personal visits as well as autopsies that the large bulk of early modern medical literature was written.⁴¹

The founding of the College of Physicians in 1518 was a step towards improving public health in England. Following the Dissolution of the Monasteries in the 1536,⁴² the government was required to ensure that the medical services provided by the church were continued through secular hospitals. So by 1665 the response to disease epidemics was firmly in the hands of the government and College of Physicians. Hygiene in London, especially in the poorer communities, had started to become an area of interest to public health experts. This focus is understandable considering the believed causes of disease in

³⁷ Inwood. *History of London*.

³⁸ Mullett. *Bubonic Plague in England*. 197.

³⁹ *Directions for the prevention and cure of the Plague: fitted for the Poorer sort* (London: J. Grismond, 1665), Early English Books Online, 1-4.

⁴⁰ Boghurst. *Loimographia*. 61-93.

⁴¹ Hodges, *Loimologia*.

⁴² Inwood. *History of London*.

1600's England. Physicians believed that a multitude of factors contributed to initial infection and subsequent spreading. Some examples are bad air, rotting food, dense populations, and sewage accumulation.⁴³ Yet despite this interest in hygiene, London was a very unsanitary city and a perfect breeding ground for rats.⁴⁴

The dissolution of the monasteries and the end of Catholic Church control not only impacted the public health in England but also harmed the relief of the poor who relied on the Church. In discussing the great plague it is important to also discuss poor relief in London because public health and poor relief were closely intertwined. It was among the poor that the plague took the greatest toll⁴⁵ and it was among the poor that the parishes found most of their plague workers. Especially those on poor relief who frequently would perform menial services at the request of the parish.⁴⁶ In this sense giving those on poor relief the jobs necessary to enact a plague response was simply an extension of the normal employment the parish gave to the poor.

A target demographic of the anti-plague orders were the poor communities. Their reasoning is described in *Cautionary Rules for preventing the Sickness*, which stated, "care of the poor will much conduce to the preventing their being sick... and consequently give check to the growth of the plague, which both began and is continued almost altogether amongst the poor."⁴⁷ This instance of official orders, demonstrates the

⁴³ Boghurst. *Loimographia*. 8-18.

⁴⁴ Shrewsbury. *Bubonic Plague in the British Isles*. 447-448.

⁴⁵ Cummins "Living Standards," 13.

⁴⁶ Munkhoff. "Poor Women and Public Health." 583-586.

⁴⁷ *Cautionary Rules for preventing the sickness*.

governments recognition of the poor both as disproportionate victims but also as an important demographic in the government's response to the plague.

Quarantine

The high mortality rate and difficulty curing the plague led the College of Physicians to direct their efforts towards prevention rather than cure. They published many suggestions for personal as well as public protection. Among other things they advocated: the taking of preventative medicines, burning or carrying smelling objects such as tobacco, and airing a potentially diseased room in order to reduce its infectivity.⁴⁸ Yet the policy which received the greatest attention as well as criticism, both from other physicians and the public, was the policy of quarantining infected individuals, often referred to as "Shutting up."

The policy of shutting up was effectively quarantine but often included not just the infected individual but also everyone else who resided with them, which in the poor communities could be several families.⁴⁹ Quarantine was mostly applied to the poor and thus any suffering derived from this policy, which had been around since at least the times of King Henry VIII, fell on them.⁵⁰ In addition to quarantining people in their own residences, pesthouses were built prior to the outbreak for the infected to be taken and

⁴⁸ *The Kings Medicines for the Plague. Prescribed in the year, 1604 by the whole Colledge of Physitians, both Spiritual and Temporal. Generally made use of, and approved in the years, 1625, and 1636. And now most fitting for this dangerous time of infection, to be used all England over* (London: F. Coles and T. Vere, 1665.), Early English Books Online, 3-10.

⁴⁹ *Orders Conceived and Published by the Lord Major and Aldermen of the City of London, concerning the infection of the Plague* (London: James Flesher, 1665), Early English Books Online, 5-6.

⁵⁰ Bell. *The Great Plague*. 75-76.

cared for, but often the infected individual's residence would be quarantined even if he were removed to the pesthouse, but at least to the crafters of the orders this was a more humane approach than locking sick and healthy together. A lack of pesthouses meant that this tactic was not used often,⁵¹ and regardless of whether or not the sick were removed the pesthouses, those healthy individuals still suffered the drop-in quality of life inflicted upon those in quarantine.

The orders and directions set down by the Lord Mayor or the Privy Council provide a detailed manual for implementing quarantine. The orders were not limited to the quarantine but the bulk of the orders were dedicated to it. The almost singular purpose of the public health orders to direct the implementation of quarantine reflects both the complexity of organizing a mass quarantine effort and the importance placed by the government on the practice of quarantine, and like with most other public health policies within London and its suburbs, the parish was made responsible for carrying out the orders. The parish was responsible for hiring or procuring examiners, watchmen, searchers, nurses, physicians, buriers and chirurgions (an older word for Surgeon but less prestigious than a physician).⁵²

The examiners would be responsible for ensuring that anti-plague orders were followed, including ensuring that infected individuals were quarantined and their residence shut up along with any other inhabitants.⁵³ Examiners would search out

⁵¹ Mullett. *Bubonic Plague in England*. 199.

⁵² *The Orders and Directions, of the right Honourable the Lord Mayor and Court of Aldermen, to be diligently observed and kept by the citizens of London during the time of the present visitation of the PLAGUE* (London: George Horton), Early English Books Online. 1-2.

⁵³ 1665. *Cautionary Rules for preventing the sickness*. 1

infected individuals and were to be informed if someone had died of the plague.⁵⁴ Individuals were also required to inform an examiner within two hours if they or any individual in their residence had become infected.⁵⁵ After a house was shut up and its residents no longer allowed to leave, the examiner was also responsible for ensuring that the quarantined individuals received proper care in the form of medical treatments and supplies necessary to survive such as food.⁵⁶ In addition to these two tasks, the examiner would also assign two watchmen, one during the day and one at night, to stand guard at a shut up building or buildings to prevent people or goods from entering or leaving. A red wooden cross would also be added to the door of the infected house, which read “Lord have Mercy on us.”⁵⁷ Records show that people were indeed prosecuted for violating a number of these regulations such as people entering or leaving quarantined property and removing goods from infected houses.⁵⁸

Searchers were hired to investigate houses in order to determine if any individuals were infected or had died and searchers were to be assisted by chirurgions in identifying the disease since searchers had little to no medical training.⁵⁹ The orders determined that chirurgions were to be paid twelve-pence per body searched. This payment would come from the individual searched or from the parish if the individual had no means of paying.⁶⁰ Searchers as well as chirurgions were considered necessary in tracking the

⁵⁴ *The Orders and Directions*. 2.

⁵⁵ *Orders conceived*. 5.

⁵⁶ *Cautionary Rules for preventing the sickness*. 1-2.

⁵⁷ *The Orders and directions*. 3.

⁵⁸ John Cordy Jeaffreson, editor. *Middlesex session rolls: 1665*. In *Middlesex County Records: Volume 3, 1625-67* (London: Middlesex County Record Society, 1888), British History Online, accessed October 23, 2016. 363-381.

⁵⁹ *Orders conceived*. 3-4.

⁶⁰ *Orders conceived*. 4.

spread of the plague so the infected areas would know the level of infection and respond adequately.

“For better assistance of the searchers, for as much as there hath been heretofore great abuse in misreporting the disease, to the further spreading of infection: It is therefore ordered that there be chosen and appointed able and discreet Chirugions... in every of their mimits to joyn with the searchers for the view of the body, to the end there may be a true report made of the disease”⁶¹

Searchers, like many other plague workers, were hired from among the poorer sort in the parishes of London and were often individuals on parish poor relief.⁶²

To care for the sick, the City and parishes hired nurses and requisitioned physicians from the College of Medicine. In total, four physicians were assigned to care for the infected within London and over the course of the epidemic several other physicians offered their services, although the wealthier residents had their own personal physicians.⁶³ Dr. Edward Austrey and Dr. Nicolas Davis were two such physicians that offered their service.

“four were enough to take charge and care upon them, the infection not then so generally dispersed, as since it hath been; of which four afterwards two only (possibly more forward than the rest to undertake so great a burden) whether to ease the common purse of that charge, which was incident to that service, or upon other reasons, have been judged sufficient to undergo said service, and take care of all infected persons in and about the city, and are employed accordingly... And that the said two Physitians appointed by the late Establishment cannot possibly attend the deplorable vast Number of Persons laboring under so sad a Distemper... we are, and shall be, according to His Majesties Command, and the duty incumbent upon us, ready and willing to attend the Service, to visit, and

⁶¹ *Orders conceived*. 4.

⁶² Munkhoff. “Poor Women,” 589.

⁶³ Braybrooke, *The Diary of Samuel Pepys*.

according to our several Abilities, with all possible diligence, to take care of all Persons in and about this City...”⁶⁴

Physicians during the epidemic generally diagnosed cases of plague and judged the odds of survival. Afterwards they might perform medical procedures such as bloodletting or most commonly forced sweating,⁶⁵ and advising the patient in the use of certain medicines and means of air purification. Most of the medical care was provided by nurses which ranged from complete strangers to family members of the infected. They generally had no medical training beyond common knowledge⁶⁶ and primarily served to comfort the sick. It is apparent from the literature of the times that Nurses were looked on in the best cases as strangers and in the worst cases as ugly, dirty, hags who would rather kill and steal from their patients than care for them.⁶⁷ The few wealthy individuals who suffered under quarantine had the capacity to receive better care from their personal physicians and servants rather than poor strangers who, although they fear the plague, act as nurses out of necessity and would otherwise starve.

To ensure that those who were trapped in quarantine received the essential for their survival such as food, water and medicine; the parishes were responsible for acquiring and dispersing these essential goods to those in quarantine.⁶⁸ The payment for these essential goods came, in the case of the poor, from the parish but others had to pay the parish in part or in whole for their own care. If an individual was expected to pay for

⁶⁴ Edward D. Austrey and Nicolas Davis, *The Resolution of those Physitians presented by the Colledge to the Right Honourable The Lord Mayor and court Aldermen of this City of London for the Prevention and cure of the PLAGUE* (August 2, 1665), *Early English Books Online*, 1.

⁶⁵ Boghurst. *Loimographia*. 74.

⁶⁶ J., V. *Golgotha; or, A looking-glass for London, and the suburbs thereof* (London: 1665), *Early English Books Online*. 12-13.

⁶⁷ Hodges, *Loimologia*, 8-9.

⁶⁸ *Orders conceived*. 2.

their own care but lacked enough money, then either some of their property was seized or they were forced to take out a loan.⁶⁹ It had also been suggested that offering to care for those in quarantine would make the infected more likely to inform the parish and less likely to conceal their illness.⁷⁰

If the worst occurred and an individual died, which was very common during the outbreak, then they would need to be buried. Burials were, at first, restricted to night (After sunset and before sunrise) but as the death toll increased the burials occurred in daylight hours.⁷¹ The rise in deaths also forced grave diggers to create mass graves in which bodies were crammed together and may have been buried as shallow as one meter which was not nearly as deep as the law required.⁷² One disturbing incident recounted by Samuel Pepys in his diary describes the disparity in the treatment of the dead based upon wealth.

July 18th: "...I was much troubled this day to hear at Westminster how the officers do bury the dead in the open Tuttle-field, pretending want of room elsewhere; whereas the new chappell church-yard was walled in at the publick charge in the last plague-time, merely for want of room and now none, but such as are able to pay dear for it, can be buried there."⁷³

Accompanying the burials were the sounds of a bell tolling, which reminded the living to be careful so they may avoid dying of the plague also.⁷⁴ A policy that was both disliked and often ignored, forbid people from accompanying the body during its transport and holding a funeral.⁷⁵ Samuel Pepys commented on this practice: "...consider the madness

⁶⁹ *Orders conceived*. 9.

⁷⁰ Mullett. *Bubonic Plague and England*. 199.

⁷¹ Braybrooke, *The Diary of Samuel Pepys*, August 12th.

⁷² MOLA team. "1665 Great Plague bacterium DNA identified for the first time."

⁷³ Braybrooke, *The Diary of Samuel Pepys*, July 30th.

⁷⁴ Braybrooke, *The Diary of Samuel Pepys*, July 30th.

⁷⁵ *The Orders and Directions*. 2.

of the people of the town, who will (because they are forbid) come in crowds along with the dead corpses to see them buried.”⁷⁶ This was a measure of public health to keep people from gathering, especially in a cemetery which was believed to be more infectious because of the fumes rising from the dead.

The implementation of quarantine as well as other orders and recommendations presented by government authorities and the College of Physicians were not as effectively implemented in practice as they were imagined on paper. The quarantine failed at many levels: people hid their infection to avoid being shut up,⁷⁷ others managed to escape quarantine,⁷⁸ and in total there was a lack of resources to ensure that quarantine could be applied and sustained for such a large infected population. The former Puritan minister Thomas Vincent described the fate of quarantine in London: “Now shutting up of visited houses (there being so many) is at an end, and most of the well are mingled among the sick which otherwise would have got not help.”⁷⁹ By the epidemic’s peak, the system of quarantine had essentially broken down. Samuel Pepys remarks in his diary on September 14th, “And Lord! To see how I did endeavor all I could to talk with as few as I could, there being now no observation of shutting up of houses infected, that to be sure we do converse and meet with people that have the plague upon them.”⁸⁰

Bell levels particularly harsh criticism against the quarantine even though he states that an effective quarantine could have been effective at preventing the high

⁷⁶ Braybrooke, *The Diary of Samuel Pepys*, September 3rd.

⁷⁷ *The Shutting up of Infected houses as it is practiced in England Soberly Debated. By way of address from the poor souls that are visited, to their Brethren that are Free* (1665), Early English Books Online, 5.

⁷⁸ Braybrooke, *The Diary of Samuel Pepys*, August 3rd.

⁷⁹ Thomas Vincent, *God’s Terrible Voice in the City* (London: 1667), Early English Books Online, 36.

⁸⁰ Braybrooke, *The Diary of Samuel Pepys*, September 14th.

mortality. Talking of quarantine he says: “the evil policy had long precedent behind it, and had, unfortunately, the approval of the college of physicians. As a body, the magistrates were insistent, and the support of the Privy Council in this disastrous measure never wavered; none in authority ever questioned the necessity of sealing all houses wherein infection lodged.”⁸¹ This sentiment was shared by other modern writers on the Great Plague such as Stephen Porter and Shrewsbury.

Flight from London

A response to the epidemic that provoked anger and controversy was the practice of fleeing London.⁸² This was accepted by physicians as the best way of avoiding epidemical diseases.⁸³ Fleeing was an expensive endeavor so that of those who fled were primarily the wealthy and some of the middle class.⁸⁴ And for those who managed to flee, they could not guarantee their funds would hold out⁸⁵ nor could they guarantee they would be allowed entrance into another town. Many towns at this point required certificates of health from individuals seeking entry⁸⁶ and the guards were especially suspicious of individuals from London. Samuel Pepys remarked that he had trouble

⁸¹ Bell. *The Great Plague*. 114.

⁸² *The Run-aways Return or, The Poor Penniless Pilgrim* (London, 1665), Early English Books Online, 1.

⁸³ Boghurst. *Loimographia*. 58-60.

⁸⁴ *London's Lord have Mercy on us*. (1665), Early English Books Online, 1.

⁸⁵ *The Run-aways Return*. 1.

⁸⁶ *Rules and Orders Made by the Vice-Chancellor of the University of OXFORD, and Justices of Peace, for the Good and Safety of the University, City, and County of Oxford* (Oxford: August 25, 1665), Early English Books Online, 1.

entering the town of Greenwich since he had recently been in London, yet as an important individual his name was enough to grant him entrance.⁸⁷

A Problem for the people who remained in London and especially a problem for the organization of a government response, was the flight of individuals from within the government⁸⁸ as well as physicians.⁸⁹ The reasons for fleeing likely varied for different physicians, but for many their wealthy clients had already fled London and it is no doubt that some may have fled simply to avoid the plague.⁹⁰ Either way, it harmed the public health response, likely by harming the population's opinion of it, despite the ineffectiveness of seventeenth century medicine. The flight of government officials likely also harmed the organization of a public health response since desertion was widespread.⁹¹ Samuel Pepys, himself a member of the naval administration, who remained in London, remarks on June 30th, "To white hall, to the duke of Albemarle, who I find at secretary bennet's, there being now no other great statesman, I think, but my lord Chancellor, in towne."⁹²

⁸⁷ Braybrooke, *The Diary of Samuel Pepys*, September 3rd.

⁸⁸ Braybrooke, *The Diary of Samuel Pepys*.

⁸⁹ *London's Dreaded Visitation*. 2.

⁹⁰ Braybrooke, *The Diary of Samuel Pepys*, January 22nd.

⁹¹ Mullett. *The Bubonic Plague and England*. 199.

⁹² Braybrooke, *The Diary of Samuel Pepys*, June 30th.

Chapter 2: Quarantine

From the published writings of the period, it is apparent that opposition to the practice of quarantine, or “shutting up,” was nearly universal outside of the government and the College of Physicians. Opposition came from people of different backgrounds, from priests to even physicians, and they had multiple and varied reasons for opposition. This chapter will demonstrate that quarantine was considered cruel, considered medically unsound, and not consistently implemented against the rich and powerful. In addition I will demonstrate that the poor were coerced into taking the dangerous and low paying jobs necessary to carry out the public health response. Lastly I will compare the impact of government policies on those middle class individuals and wealthy individuals who attempted to flee London.

Criticisms of Quarantine:

The most common complaint against the practice of quarantine was based upon the perception of the quarantine as inhumane and especially unchristian. Among religious writers, comparisons of the Christian Londoner’s response to the plague and the Islamic response to the plague generally painted the “heathen” Muslims in a more positive light than their Christian counterparts. Nathaniel Hodge described the quarantine as “that practice so abhorrent to Religion and Humanity, even in the Opinion of a Mahometan, of shutting up the sick and well together.”¹ Another writer commented: “To

¹ Hodges. *Loimologia*. 11.

visit, relieve and exhilarate any whom god hath wounded with his pestilential arrow, is the part of a truly religious Samaritan; as to flie from him, or keep aloof, when he many preserve or do him some good, is onely proper to some distrustful wicked priests, levites, and galenists. The mahumetans may justly reprove and shame us Christians.”² Religion in general, although not so great as in the plagues of the Middle Ages, played an important role in the perception of writers and others towards the plague even if it played less of an official role. Talking of the early Christians, one anonymous writer in 1665 said, “then they did not excommunicate whole families when it pleased God to visit them; no, then the elders of the church carefully attended them, prayed with them, and the effectual fervent prayer of those righteous men availed much.”³ The religious complaints often went hand in hand with other moral complaint accusing the quarantine of being cruel. One writer who went by J. V., vividly described the cruelty of quarantine:

“Not a friend to come neigh them in their many, many heart and house cares and complexities. They are compelled, though well, to lie by, to watch upon the death-bed of their dear relation, to see the corpse dragged away before their eyes. Affrighted children stand howling by their side. Thus they are fitted by fainting affliction to receive the impressions of a thousand fearful thoughts, in that long night they have to reckon with before release, as the family, so dismally exposed, sink one after another in the den of this dismal likeness of hell, contrived by the advice of the English college of doctors.”⁴

The city’s attempt to safeguard the health of the rest of the city was considered too cruel, especially the notion that the healthy would be subjected to confinement. The prospects

² George Thomson, *Loimologia: A Consolatory Advice and some brief Observations concerning the Present Pest* (London: L. Chapman, 1665), Early English Books Online, 9.

³ *The Shutting up of Infected Houses soberly debated*. 5.

⁴ J., V. *Golgotha*. 6.

of confinement for at least forty days remains frightening even today, despite the greater understanding of the efficacy of quarantine.

Hand-in-hand with the moral/religious complaint against the quarantine, but likely more tangible, was an argument that quarantine would be economically harmful. Trade within the city diminished, and at the epidemic's peak it was virtually non-existent, because of growing poverty; less working merchants, laborers, and artisans; and restrictions on trade. Dr. George Thomas, a chemical physician at odds with the physicians of the College of Physicians gave his harsh condemnation of the quarantine:

“might be more conducive to the body politick and natural, if this rigid course of enclosing the infected to strickly within so narrow a compass were mitigated: for hereby intercourse of trading might be kept alive, and so miserable poverty prevented, which hath always an equipage and train of sad calamities and plagues attending upon it... certainly none but such an heathen as galen would have given his disciples such impious and uncharitable advice, as to leave poor distressed wretches to a lord have mercy upon them...”⁵

The financial health of the “body politick” is certainly important to the English administration especially in a time of war. Samuel Pepys provided his perspective during the epidemic of the cost of the war:

“All our fear is that the Dutch should be got in before them; which would be a very great sorrow to the publick... A great deal of money being spent, and the kingdom not in a condition to spare, nor a parliament without much difficulty to meet to give more.”⁶

The economics of quarantine would play a major role in both the downfall of quarantine in 1665 and the impact on the poor, for whom the quarantine represented a devastating loss of income.

⁵ Thomson. *Loimologia*. 10.

⁶ Braybrooke, *The Diary of Samuel Pepys*, August 31st.

A last major complaint against the quarantine stated that the quarantine not only failed to stop the spread of the plague but in addition increased both the spread of the plague and its mortality. Quarantine was greatly feared by Londoners and many tried to avoid quarantine by hiding their illness, secretly removing dead from their buildings, bribing public health workers, etc. An anonymous writer in a printed pamphlet in London, in his cry for the ending of the cruel quarantine, describes the reaction of those about to be shut up:

“We are acted by a principle of self preservation, as well as you, and therefore as soon as we find ourselves or any member of our families infected, so dreadful it is to us to be shut up from all comfort and society, from free and wholesome air, from the care of the physician, and the divine, from the oversight of friends and relations, and sometimes even from the very necessities, and conveniences of nature, that we run as far in city and country as our feet can carry us...scattering the infection along the streets as we go, and shifting it from lodging to lodging with ourselves, till at last we drop in some ally, field, or neighbour village, calling the people round-about by the suddenness of our fall to stand awhile astonished at our deaths,”⁷

The notion that individuals would try to avoid the dreaded quarantine appears valid and is supported by accounts of individuals avoiding quarantine in one manner or another and both Bell, Stephen Porter, and Shrewsbury acknowledge that avoiding quarantine was widespread, whether by flight or by bribery or some other means.

Besides arguing that quarantine spreads the plague, critics also believed that quarantine increased the mortality rate. Among other things, contemporary writers argued that the bad air trapped in the quarantined building and even fear caused by

⁷ *The shutting up infected houses soberly debated*. 5.

quarantine worked to kill more people. Four astrologers strayed from their discussion of astrology to criticize quarantine: “But that the shutting up of people in a time of sickness...is certainly a great cause of the increase of the Contagion... the greater their fear is, the sooner do they meet the ill they dread. And we in this age, shut up not only the unclean but the sound and sick together.”⁸ “This shutting up would breed a plague if there were none: infection may have killed its thousands, but shutting up hath killed its ten thousands.”⁹ This notion of the quarantine breeding plague was argued even by physicians in the city but the practice continued regardless.¹⁰

Inconsistent use of Quarantine:

The suffering caused by the quarantine was inconsistent and varied over time, location, and random fortune. Being locked in quarantine was bad enough but not everyone received the same treatment in quarantine. The parish was expected to provide medical care and essential supplies so that those locked in quarantine would maintain at least a minimal quality of life, yet the unequal ability of different parishes to provide care as well as the varied dispositions of watchmen and other public health officials in a given area ensured that not everyone in quarantine received the same level of care, and it was among the poor that the level of care was lowest.

⁸ Lilly, Booker, Gadbury, Trigge, and Andrews. *The Prophecies, and Predictions, for London's Deliverance: with the Conjunction, Effects, and Influences of the Superiour Planets, the Causes thereof, and the probability of the happy abatement of the present Dismal Pestilence* (London: Brooks, 1665), Early English Books Online, 5-6.

⁹ *The Shutting up infected houses soberly debated.* 8-9.

¹⁰ Mullett. *Bubonic Plague in England.* 198.

Watchmen, essentially guards and caretakers, were responsible not only for ensuring that no one entered or left an infected building or buildings but also brought supplies and medicine to those in quarantine.¹¹ Writers critical of the concept of quarantine often described watchmen as careless individuals: “No drop of water, perhaps, but what comes at the leisure of a drunken or careless halberd bearer at the door; no seasonable provision is theirs as a certainty for their support.”¹² The parishes, which were desperately in need of public health workers, could not afford to be very picky in their selection of watchmen and the individuals who held the dangerous position of watchman were poor and often accepted the position out of necessity rather than civic duty and care for their neighbors. These watchmen were often also stretched thin with one watchman guarding many buildings yet still expected to bring water, food, medicine and other essentials.

The quarantine brought many sufferings to the people it was inflicted upon. If the quarantine had been implemented consistent with the orders laid down then it would have at least been fair even if it was considered cruel. Yet the quarantine was not consistently inflicted upon wealthy and important individuals, although the rich did not escape the quarantine completely. In fact since most of the wealthy left the city, they would not have been subject to the quarantine at all, but regardless, writers during the epidemic frequently suggested that those in power were not being consistently quarantined with the same vigor as people with little wealth and influence.

¹¹ Hodges, *Loimologia*. 7.

¹² J., V. *Golgotha*. 11.

Writers accused the wealthy and powerful of crafting their public health policies without expecting to such policies to be used on themselves. An author who referred to himself as “J.V. grieved for the poor, who parish daily” wrote: “I dare say the doctors, and those who stand upon their sword to execute this violent advice upon the poor so generally, would not be willing to be so done unto, or have their wives and children so dealt with in their calamity.”¹³ This belief spread among many Londoners and there was even an attempt by commoners to shut up the Lord Mayor’s residence.¹⁴ J.V. also points out another flaw in the implementation of quarantine: “If one in the parish-meeting place fall suddenly sick, or dye, after sitting there in the crowd two or three hours amongst the multitude; were it not as equal the doors should be shut upon the assembly...O surely, if we would not be so done unto, these ways then are unequal, and this violent course not like to abate our plagues.”¹⁵ This last point does not necessarily demonstrate the inconsistent quarantining of the wealthy because likely most in a parish meeting place would not have been wealthy, but it demonstrates the parish’s willingness to ignore quarantine policy even with the risk such an inconsistency posed to public health.

The public health policies had a built-in policy to benefit those who were wealthy enough to own a second house. The policy stated that those with a second house could move an infected individual from their main residence to their second residence in order to spare the family from being forced to live with an infected and potentially dangerous individual. The family was still required to be quarantined which came with its own consequences but spared them of one of the greatest criticisms of the quarantine policy.

¹³ J., V. *Golgotha*. 9.

¹⁴ Inwood. *History of London*. 169.

¹⁵ J., V. *Golgotha*. 10.

The movement of an infected individual from one house to another required the supervision of a watchman and his, or her in some rare cases, wage was to be covered by the infected individual and his family.¹⁶ The officials who created the quarantine policies would have known that most would be unable to use that one policy and that only a select few wealthy individuals, such as the crafters themselves would be able to take advantage of that policy.

In Bell's analysis of the public health orders, he argues that the ability to move the sick to another building was a humane policy intended to lessen the criticism of locking sick and healthy together, although he also argues that in practice this aspect of public policy was not used.¹⁷ Even so, this order is inherently biased against the poor and produces a further sense that public policy gave privileges to the wealthy; further undermining the public's faith in quarantine. Instead of creating this policy, the authorities should have constructed more pest houses which function in a similar manner of keeping sick and healthy apart but is fairer and more efficient.

Corruption and inequality in the act of shutting up extended down to the lower level public health officials such as watchmen and searchers. The fear of being quarantined, with all of the economic, social and potential health consequences, caused many individuals to bribe public health officials. Searchers who found a dead body in a building might be bribed to lie about the official cause of death thus allowing infected residences to escape quarantine.¹⁸ In his diary, Samuel Pepys reports that his parish clerk

¹⁶ *Orders Conceived and Published by the Lord Major.* 7.

¹⁷ Bell. *The Great Plague.*

¹⁸ Bell. *The Great Plague.* 116.

informed him that he had falsified the number of plague deaths from nine to six. “Abroad and met with Hadley, our clerke, who upon my asking how the plague goes, told me it increases much, and much in our parish; for, says he, there died nine this week, though have returned but six: which is a very ill practice, and makes me think it is so in other places; and therefore the plague much greater than people take it to be.”¹⁹ The ability to bribe is naturally reliant upon the ability to provide a bribe which naturally would have been easier for the wealthy than for those who could barely survive, but considering the consequences of quarantine many would have scrapped together what money they could. The susceptibility of searchers and watchmen to corruption was likely increased by the meager wages provided by the parish which were barely enough to survive on.²⁰

Animosity towards the quarantine and a general willingness to break the law in order to survive whether it be accepting bribes to supplement meager wages or the illegal sale of goods from infected houses, was pervasive in London. People desperately attempted to avoid the quarantine. People hide their illnesses even as they went about their daily business.²¹ Their actions out of fear of quarantine likely put others at risk and potentially even put the infected individual at risk. People smuggled bodies out of houses in hopes that searchers would not have their houses shut up. “others fearfully sweating with coffins, to steale forth dead bodies, least the fatall hand-writing of death should seal up their doors.”²² People broke out of quarantined houses and people broke others out of quarantined houses.²³ The fear of quarantine made people act selfishly towards their

¹⁹ Braybrooke, *The Diary of Samuel Pepys*, august 30th.

²⁰ Shrewsbury. *Bubonic Plague in the British Isles*. 449.

²¹ *The shutting up infected house soberly debated*. 5.

²² Thomas Dekker. *The Wonderfull Yeare 1603*. London, Bodley Head Quartos, reprinted 1924. In *The Great Plague in London in 1665*. Walter George Bell. London: Bodley Head, 1951. 191-192.

²³ Bell. *The Great Plague*. 170.

fellow citizens and lessened respect for the law and respect for the authorities. The inconsistent implementation of the quarantine or at least the belief in the inconsistent implementation also reduced respect of the law and respect of the authorities. Lack of respect for the quarantine due to these prior factors could have harmed the government's public health response.

For a quarantine to work it must remove all infected individuals away from the public where they would have spread the disease, yet the failure of quarantine eroded the whole purpose. A failed quarantine can be seen as a wall that has been breached in one or more places; essentially the sections of wall that remain standing have been rendered useless by the openings in other sections. Therefore those individuals who suffered under quarantine suffered in vain because their quarantine did not prevent the spread of the infection. By the epidemic's peak, the plague was widespread and the quarantine had been effectively abandoned.

The poor, as a demographic population, were a major focus of government efforts to combat the plague. The governing authorities in London knew from past experience that the plague would at first primarily spread amongst the poor thus the poor communities endangered the entirety of London by providing a breeding ground for the plague which could then spill over into the wealthier parishes. The policies detailing the method for implementing the quarantine were crafted with the poor in mind and one of those orders published in 1665 explained the importance of focusing on the poor:

“this care of the poor will much conduce to the preventing their being sick, and curing them when sick, and consequently give check to the growth of

the plague, which both began and is continued almost altogether amongst the poor.”²⁴

The policies ensured that an infected individual in quarantine would be taken care of even if they did not have the financial means to protect themselves. In some ways this was only an extension of poor relief which took care of the poor in healthy times but the privy council believed that ensuring care for the infected poor would improve public support for the quarantine and reduce the number of people who try to violate quarantine or who attempt to dodge quarantine altogether.²⁵

Prisons, like quarantine, locked individuals into a confined space and poor living conditions. During the epidemic of 1665, prisoners suffered greatly and the mortality rate was high. Magistrates knew that sending an individual to prison in London during the epidemic was a virtual death sentence.²⁶ What made the suffering and deaths in the London prison system worse was the crimes committed by many of those who resided therein. Non-conformist, for the most part Quakers, were persecuted by the English authorities and many were imprisoned or exiled to the colonies.²⁷ Even as the epidemic grew and resources were stretched thin, the government used their own resources to prevent non-conformists from meeting²⁸ and pressure was put on clergy who fled London to return lest non-conformists should gain influence in their parishes.²⁹ Their imprisonment was widespread and many among their ranks claimed the plague was a

²⁴ *Cautionary Rules for preventing The Sickness*. 2.

²⁵ Mullett. *Bubonic Plague in England*. 199.

²⁶ Bell. *The Great Plague*. 189-190.

²⁷ Middlesex Session Rolls and Thomas Greene 3-5

²⁸ Bell. *The Great Plague*. 118.

²⁹ J. W Priest, *A Friendly Letter to the flying Clergy, wherein is Humbly Requested and modestly Challenged the Cause of their FLIGHT* (London. 1665), Early English Books Online, 4.

punishment sent by God in response to the religious persecution.³⁰ Charles II asked for records on the number of Quakers who died of the plague; he was relieved to hear that they suffered as much as any other group and this relieved his fear that God was indeed punishing him for his treatment of Quakers.³¹

The government feared many of the plague's consequences including the risk of civil unrest. Some have suggested that quarantine was as much a tool of controlling the population as it was for stopping the disease. Others saw the quarantine as a punishment that could be more arbitrarily and quickly used than the normal legal means and it could be justified simply as a protection of the welfare of the population.³² Regardless, the government was worried about unrest especially with the recent and ongoing turmoil in London. One of the first actions of the government in the early stages of the outbreak was to banish the former soldiers of the Parliamentary Army from London.³³ A natural response since the Parliamentarians had killed King Charles I, the father of England's current king. Despite government fears, no major acts of unrest occurred during the plague and disobedience was limited to petty crimes and refusal to obey public health orders.³⁴ It is likely that the plague had the effect of preventing unrest by keeping the streets comparatively emptier than usual and by discouraging private discourse. Not every individual simply acceded to be quarantined and occasionally force was used to quarantine infected and healthy individuals.³⁵

³⁰ Bell. *The Great Plague*. 189-190.

³¹ Bell. *The Great Plague*. 180-181.

³² Kira Newman, "Shutt Up: Bubonic Plague and Quarantine in Early Modern England," *Journal of Social History* 45, no. 3 (Spring 2012), 825.

³³ Bell. *The Great Plague*.

³⁴ Mullett. *The Bubonic Plague and England*. 200.

³⁵ Bell. *The Great Plague*. 173-174.

Consequences to the Public Health Worker:

A major flaw in the anti-plague policies revolved around the problem finding people who were willing to risk their lives by completing the tasks necessary such as guarding the quarantined houses, searching the infected houses, and caring for the sick. The plague orders did not describe to the parishes how they should acquire searchers, nurses, watchmen, etc. only that those positions should be filled. Thus parishes started acquiring their public health workers from among the poor on parish financial relief through coercive methods.

In non-plague times, those on poor relief usually were required to perform small tasks around the parish in order to receive their poor relief. These were often simple tasks such as cleaning the parish church or washing the vestments.³⁶ These tasks were usually given because of the belief by the Anglican church authorities that giving away money freely would be socially harmful and that teaching those poor individuals good work ethic would help them climb out of poverty. In plague years the poor still required relief and with the lessened employment opportunities there were likely more people in need of poor relief. Yet now the parish had other tasks that needed to be performed so it was natural that they switched some individual on poor relief from the simple tasks they performed around the parishes to the now necessary public health tasks.

These individuals on poor relief were compelled to perform the public health tasks by their usual poor relief funds, yet not everyone was willing to perform these potentially dangerous tasks and therefore the parish threatened to withhold poor relief.³⁷ Even the

³⁶ Munkhoff. "Poor Women and Public Health." 5.

³⁷ Bell. *The Great Plague*. 107.

threat of prison time was available in the anti-plague orders to compel people to perform the public health jobs as well as to punish those who were negligent in their duties.³⁸ Thus the government took advantage of a vulnerable population to perform the most dangerous and undesirable tasks. These tasks were necessary as part of the public health policies designed by the London authorities but no safeguards were put in place to ensure that the poor would be protected against excessive compulsion because the poor need money to survive and could not afford to lose their poor relief. There was a silver lining in the use of the poor as public health workers. Many women were paid to act as nurses for their own family members which is a task they would have performed whether or not they were paid and this demonstrates the parishes' commitment to poor relief.³⁹

The wages provided to those public health workers was meager at best and one could barely survive on such a small sum of money but for many the alternative was to starve.⁴⁰ Given the low funds available to the parishes from which to pay the public health workers, these meager sums were likely the best the parishes could offer. Thus once again, the failure of the City to ensure that parishes received proper funding came at the expense of the lower class individuals who relied on those funds. These public health workers were not allowed to supplement their meager income with additional employment even if they had free time from their dangerous and busy work.⁴¹

The consequences of being a forced public health worker may not have been simply low wages and risk of death but also social stigma. Dr. Nathaniel Hodges

³⁸ *Orders conceived*. 3.

³⁹ Munkhoff. "Poor Women." 5.

⁴⁰ Bell. *The Great Plague*. 108-109.

⁴¹ *The orders and directions*. 2.

provides what among other writers was an all too common description of the actions of Nurses:

“But 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... others would secretly convey the pestilential Taint from Sores of the infected to those Who Were Well.”⁴²

When reading contemporaries’ writing about the plague, one hears about careless watchmen and ugly greedy nurses; the blame for much of the suffering is attributed to their laziness and other vices, but how much of the blame is warranted? Since the authorities were unable to recruit enough workers, the public health workers they had were stretched thin thus unable to perform optimal work.

In addition to the view of the public health workers as greedy and often evil, they were often feared, and rightly so, as potentially carrying the plague. The writers of public health policies responded by requiring public health workers to carry a red rod to warn others and to avoid company.⁴³ So the job of a public health worker was forced onto the poor and it was a dangerous, poorly paid job which in addition produced social stigma and fear towards these unfortunate individuals. Some may have deserved the negative reputation of their employment, but certainly many others did not.

⁴² Hodges. *Loimologia*, 8.

⁴³ *Orders Conceived and Published by the Lord Mayor*, 9.

Struggling with Flight from London:

The government policies also hurt the middle class who fled London more than the wealthy who fled. Certificates of health were generally required for individuals to enter communities outside of London.⁴⁴ These certificates of health, naturally, certified that an individual had come from an area free of plague and were themselves free of plague. Without such certificate, an individual who fled the plague would have trouble finding a place to stay. The wealthy often had their own country houses to which they could flee, and others of importance may have been able to enter a community without a health certificate, such as Samuel Pepys: “By water to Greenwich, where much ado to be suffered to come into the towne because of the sicknesse, for fear I should come from London, till I told them who I was.”⁴⁵ Pepys had indeed come from London but his importance as a member of the Navy Board and Treasurer of the Tangier Committee was enough to grant him entrance. Would some commoner have been treated in a like manner? Even despite the exceptions granted to important individuals, the commoners and authorities in places outside London feared that certificates of health could be forged thus certificates were required to be printed from that point on.⁴⁶ Those middle-class individuals who did manage to enter other towns and cities found that the authorities had greatly restricted their prospects for lodging. Not only were private individuals generally banned from keeping lodgers but Inns were restricted also.⁴⁷ One anonymous writer in London describes the difficulty moving into a new community: “When from infected

⁴⁴ Porter. *Lord Have Mercy*. 221.

⁴⁵ Braybrooke, *The Diary of Samuel Pepys*, September 3rd.

⁴⁶ Porter. *Lord Have Mercy*. 221.

⁴⁷ *Rules and Orders of Oxford; August 25, 1665*, 1.

London you did run, thinking God's visitation for to shun; and in the country wander'd up and down, from place to place, ad eke from town to town; and could find none that would you entertain, with empty pockets turn back again."⁴⁸

Flight was a costly endeavor and certainly those who fled were compelled by a great fear to leave, except the wealthy for whom the cost was within their means. Individuals who flee still require food and the other necessities of life but now they were often forced to carry that burden without a source of income. Some middle class and wealthier merchants were able to continue their trade as most of their customers had fled the city and naturally others would have sought out new work although not necessarily the middle-class work to which they were accustomed. For many traders, the drying up of trade in the city was a plague in and of itself thus flight was necessary for financial reason. Vincent Thomas described in his printed pamphlet that: "I do not blame many citizens retiring, when there was so little trading, and the presence of all might have helped forward the increase and spreading of the infection; but how did guilt drive many away, where duty would have engaged them to stay in the place?"⁴⁹

These individuals now needed to find a new temporary residence which came with its own additional costs, except for the wealthy who could go to their summer homes in the country side; an annual expense that they are accustomed to. While these individuals were seeking new lodging in the countryside, their property back in London, if they still had property back in London, was at risk of being stolen by those poor individuals in desolate London. Those who could afford servants could leave one to

⁴⁸ 1665. *The Run-awayes return*. 1.

⁴⁹ Vincent. *God's Terrible Voice in the City*. 32.

watch over their belongings.⁵⁰ In total, the cost of fleeing London for those middle wealth individuals often made their migration permanent.⁵¹ Vincent Thomas described the disparity in the flight of the wealthy and the poor: “Now rich tradesmen provide themselves to depart, if they have not country-houses, they seek lodgings abroad for themselves and families, and the poorer tradesmen, that they may imitate the rich in their fear, stretch themselves to take a country journey, though they have scarce wherewithal to bring them back again.”⁵²

The cost of flight was not just to the individual but in some cases also to those still living in London. In addition to the lack of contributions to the public health fund by those who fled, key members of the administration also fled. When it comes to the authorities of London and the numerous Parishes, one finds a mixed bag of those who used any excuse to flee and those who remained to perform their duty. J. F. D. Shrewsbury, a modern writer on the Great Plague, notes that the Duke of Albemarle, the Earl of Craven, and the Lord Mayor all stayed in London but he also notes that many including the entirety of the court, with the exception for the Duke of Albemarle⁵³, fled and argues that their flight harmed the response to the epidemic. Many writers comment, usually harshly, on the flight of physicians which appears to have been widespread, especially those with wealthy clients. A printed pamphlet called *Salomon's Pest House* provides a witty example of such criticism: “The whole colledge of bodily physicians, and the prince of them, that wise and learned galen, prescribe for the time of Plague, that

⁵⁰ Bell. *The Great Plague*. 124.

⁵¹ Vincent. *God's Terrible Voice*. 3.

⁵² Vincent. *God's Terrible Voice*. 32.

⁵³ Braybrooke, *The Diary of Samuel Pepys*.

of all remedies, to prevent the contagion, the best is, to flie...As this is physically prescribed, so it is diligently practiced, as daily experience teacheth, of all sorts of men, yea of the physicians themselves.”⁵⁴ The flight of physicians likely had no direct impact, seeing as how their medical practices at best were worthless and at worst harmful, but impact on the morale of Londoners and the trust in the government’s response were no doubt harmed by the flight of physicians. The flight of the clergy likely also had an impact on the morale of the poor who remained as even their “spiritual physicians” had abandoned them. Their places were often filled by non-conformist preachers.

Those who fled came to be held in low opinion by those who remained. Numerous writers criticize those who fled especially on the grounds that by fleeing they were abandoning the poor who were trapped and dying in London. While the rich who fled were a frequent target of writers, members of the government and physicians who fled were a particular focus of anger. The chemical physician, George Thomas even argued that physicians should be treated as deserters from an army: “If straglers, defectors, and runnawayes in an army ought to suffer loss of life and estate; I see no reason why these men, whose function obliges them to stand out to the last, should deserve less punishment if they deliver such a vast populous city to the fury of so implacable a foe.”⁵⁵

⁵⁴ I., D. *Salomon’s Pest House or Tower-Royall* (London: Henry Holland, 1636), Early English Books Online, 1-2.

⁵⁵ Thomson. *Loimologia*. 1-2.

Chapter 3: The Economic Impact

The 1665 plague epidemic created great hardships for the people of London, both those who stayed and those who left. Yet one of the most tangible sufferings, whose consequences lasted well beyond 1665, was the economic burden created partially by the destruction unleashed by the plague but more severely by the policies of the London government. These policies were not just economically destructive, but they were unequally destructive to the poor and middle class residents of London. For many who lived in London, the Great Plague of 1665 was a “plague of body and of purse.”¹ This chapter will demonstrate that flaws in the authorities’ policies for funding a public health response as well restrictions placed on trade harmed the poor more than the wealthy.

The Role of Geography in Health Care Quality:

The parish was the central location for the public health response in London, but not all parishes were able to respond equally. The main problems with the parish system during the Great Plague were the decentralized authority responsible for carrying out public health orders and the lack of cooperation between parishes. Poorer parishes were at a distinct disadvantage in carrying out the public health orders. There were several reasons for poor parishes being unable to cope with the plague as well as wealthier parishes, but the most important factor was the disparity in wealth between rich and poor parishes.

¹ *The Run-aways Return*. 1.

Parish funds for both poor relief as well as public health relief were primarily raised from within the parish and only partially from outside sources.² This became a problem because the poorer parishes had less people who could contribute to both the poor relief and public health relief funds. Fortunately, the poorer parishes and all parishes in general received a significant percentage of their funds for their public health response from wealthy donors, especially wealthy donors that had already fled the city, such as William Sancroft, the dean of St. Paul's Cathedral. "and as or charity to the poor I knew you had given a considerable summe (to a parish that a little money would not relieve) before you went."³ Yet charity was not a government response and surely a fault of the government to rely on inconsistent donations.

Compared to richer parishes, the poorer parishes in London suffered the double impact of less people who could afford to contribute to parish funds for poor relief and public health, as well as more people who were in need of parish financial assistance. Yet rich parishes were not as well off during the plague as might be assumed. The rich parishes theoretically had more wealthy individuals who could afford to pay into the public health relief funds, but most of the wealthy had fled the city around the beginning of the epidemic. An anonymous writer complained: "It was your duties to have nourished the bodies of the poor; the other fed their souls with food, and not to go away, but in their troubles by them for to stay."⁴ Sir Edmund Godfrey in a letter to the Earl of Newport provides a complaint: "the poor people cry out upon the dearness of fuel and

² Bell. *The Great Plague*. 196.

³ Dr. Peter Barwick, *letter to William Sancroft, London, Aug. 5, 1665*. In *London in Plague and fire, 1665-1666 ; selected source materials for college research papers*, ed. Roland Bartel. (Boston: D. C. Heath and Company, 1957), 69.

⁴ *The Run-awayes Return*. 1.

want of employment, by reason of the King and the Court having been so long out of town, and some of the courtiers, nobility, and gentry forget their debts as well as their charity.”⁵ The parish officials tasked with collecting for the public health relief as well as the poor relief, which went hand in hand during the epidemic, were unable to collect from those who had gone out into the country. The parishes did not have the power to go out and collect and the higher levels of government made no effort to gather the funds from Londoners abroad in the country. The limit of the government’s ability was to demand that the wealthy send in their contributions to London under threat that their houses would be broken into and property confiscated by the constable.⁶

In general, financial support to the parishes from the upper levels of government were absent. Throughout the entire plague epidemic and even during previous inter-plague periods, Parliament failed to raise funds for the relief of the sick and for the implementation of public health measures.⁷ Even after the epidemic in 1665, Parliament did not make any changes to their policies on towards funding public health in order to respond better in any potential future epidemics.⁸ The city treasury did not even contribute to public health relief until July and even then it was a meager amount compared to the public need.⁹ The lack of assistance and organization from upper levels of government greatly hurt the poorer parishes, especially since wealthier parishes could have provided organized assistance through cooperating with the poorer parishes and providing funds. The lack of cooperation between the parishes is a failure not only of the

⁵ Sir Edmund Berry Godfrey to the earl of Newport, December 19, 1665. In *The Great Plague in London in 1665*. Walter George Bell (London, Bodley Head, 1951), 197.

⁶ Bell. *The Great Plague*. 197.

⁷ Mullett. *Bubonic Plague in England*. 198.

⁸ Mullett. *Bubonic Plague in England*. 209

⁹ Bell. *The Great Plague*. 198.

parishes but also the city government, which failed to provide any meaningful response to the severe geographic wealth stratification, although even if greater cooperation had occurred, the failure of the rich to contribute to public health relief would have put a strain on the richer parishes' ability to assist the poorer ones.

The cost on the parish caused by the quarantining of a residence was affected by several factors: the ability of a residence to cover all or part of the cost themselves, the number of people in quarantine, the quality of care, and the quantity of supplies allocated per person. Because the parishes were for the most part making decisions on implementation themselves, it is likely that the quality of care received by the quarantined individuals varied from parish to parish and from the start of the outbreak to the end. There was a belief that the poor, who relied on parish financial aid for their care, were not receiving adequate care nor sufficient supplies. The pamphlet, *Golgotha* lamented: "How then may poor Women with child, Widows, helpless, friendless, fatherless and suckling, exposed (without such help, as many have been) and half dead before, it may be by sudden death of their first visited nearest relation, escape the ruine of such further violence upon them?"¹⁰ The strain on the poor parishes likely put a cap on potential spending for relief of the infected and quarantined. It also likely forced the parish to put a greater financial burden on those with some money but not enough to care for themselves for the entire period of quarantine. In the worst cases at the peak of the epidemic it appears that many of the poor and infected were no longer being taken care of at all.¹¹

¹⁰ J., V. *Golgotha*. 10.

¹¹ John Tillison, letter to William Sancroft, In London in Plague and fire, 1665-1666; selected source materials for college research papers, ed. Roland Bartel (Boston, D. C. Heath and Company, 1957), 69-70.

A group who suffered even before the outbreak of plague were the vagrants and beggars, who were officially persecuted in part because of a fear that they would spread the plague.¹² This is a reasonable assumption but nonetheless imposes a burden on the parishes who would enforce this rule and would contribute to increased suffering by this poorest of the poor. Yet efforts to remove beggars did not appear effective¹³ and there were perhaps more beggars following the epidemic than preceding it. The lack of funds for plague relief pushed the parishes to take cruel actions that harmed many of the poor members of their parishes and demonstrated the cold calculated decisions taken by the parish authorities. Each poor individual sickened with plague became a financial burden to the parish therefore the parish actually had infected individuals removed to another parish so the financial burden would be on them. Records of payments indicate many instances in which individuals were paid to remove those infected with the plague. Some records even state the reason for removing the sick as “to prevent further charge.”¹⁴ The richer parishes within the walls of the city were more effective at removing vagrants, who usually ended up in the poorer parishes which were already burdened with a large population and little funds.

The burden on the parish caused by the plague and especially the anti-plague measures were great, but the burden on the individuals in quarantine were potentially greater. Not all individuals received free care from the parish while they were under quarantine. Those who did receive fully free care were usually those who had been on

¹² *Orders conceived and Published by the Lord Mayor, 12.*

¹³ John Evelyn, “John Evelyn’s Diary,” in *London in plague and fire, 1665-1666; selected source materials for college research papers*, ed. Roland Bartel. (Boston: D. C. Heath and Company, 1957), 80-84.

¹⁴ Bell. *The Great Plague*. 132-133.

parish poor relief before being quarantined, yet others paid for all or part of their care. Some paid outright, some had goods from their residence confiscated in order to cover the cost of their care, and others were required to take out loans from the parish or private individuals in order to cover the costs of their care.¹⁵ This quote from the Middlesex session rolls describes the parish through the constable, carrying out its task of ensuring that quarantined individuals did not become chargeable to the parish: "...high constable and his watch, when they demanded entrance into the said house to secure the goods for the use of the said stapleton, relieve her in her sick ness and keep her from being chargeable to the parish &c."¹⁶

Aside from the usual necessities such as food and heating, medicine was highly emphasized for people of all wealth levels. Medicine was generally divided into two categories: "fitted for the poorer sort," and "fitted for the richer sort".¹⁷ London society appeared to emphasize the use of medicine and many writers provided lists of medicines regardless of the topics on which they were writing. This includes people writing about the quarantine, those writing about the religious causes of the plague, and the writing of physicians. In addition to the costs of medicine, food, and other care, infected individuals may have been forced to pay for the care of a physician, yet there were not many physicians left in the city as most had fled with their wealthy patients. Dr. George Thomas criticized the physicians of London for wasting their patient's money. "I wish they were not Sanguini mulga, and had not onely exhausted the purse, but also the veins

¹⁵ Newman. "Shutt up," 817.

¹⁶ Jeaffreson. *Middlesex Session roles: 1665*. 363-381.

¹⁷ Royal College of Physicians of London, *Certain Necessary Directions as Well for the Cure of the Plague, as for Preventing the Infection: With Many Easie Medicines of Small Charge, Very Profitable to His Majesties Subjects* (London: John Bill and Christopher Barker, 1665), Early English Books Online. 10, 16.

of their miserable patients, leaving them at length in the lurch.”¹⁸ He also insists that most physicians only treated wealthy patients and rendered little care to the poor.¹⁹ The poor were forced to make do with the very few physicians that were assigned to the city and free service was not guaranteed. By today’s medical standards their care was entirely a waste of money which could have been better spent elsewhere, but from the view point of the London government, physicians provided essential care and the insufficient allocation of physicians by the city reflects another public health failure.

Despite the accusations that physicians extorted their patients for money and the Privy Council orders directed the parish to pay chirurgions, Bell argues that most medical care was provided for free and mostly voluntary. “For each plague victim so certified the surgeons were to receive one shilling. Nothing indicates that they had this mortality fee. I shall show that the medical service was mostly voluntary and largely casual. So much in the Great Plague was casual.”²⁰ Lack of payment for medical services may have been seen as charity from healthcare workers but also as a failure of the parishes and city authorities.

Loss of income and potential future income also occurred as a result of the quarantine. An individual under quarantine could not be employed nor could they sell their property that is already under quarantine with them.²¹ London residents commonly would put up boarders and use the rent to supplement their usual income,²² but naturally renters could not be accepted into a quarantined building and a stigma over formerly

¹⁸ Thomson. *Loimologia*. 10.

¹⁹ Thomson. *Loimologia*. 13.

²⁰ Bell. *The Great Plague*. 76.

²¹ *The Order and Directions*, 3.

²² Newman. “Shutt Up,” 821.

quarantined buildings harmed rent appeal. The ban on lodgers that was enforced within the city had the added consequence of forcing many who would normally live in the city to go outside the walls into the areas with the highest mortality in order to find a place to lodge.²³ Former servants became a group that suffered with lodging. After the masters left London they would often only leave a single servant in charge of protecting their property and would allow the other servants to fend for themselves.²⁴ In some instances the servants would lose their employment and lodging if their master or masters died.

Those who left their quarantine alive could very well have left it with significant debt, either to the parish or to private individuals. A family may even have lost a working member thus decreasing their potential income following the plague. The threat that hung over those in debt was the debtor's prison which, although not as terrible as other prisons, was not a pleasant place to go. People in debtor's prisons suffered during the plague as well, although many were able to work out deals with their debt holders out of generous mercy in the plague times or mostly through government pressure which was trying to reduce the number in debtor's prisons during the epidemic.²⁵

Quarantined was a double edged problem for those unfortunate enough to be subjected to being shut up. Many had to pay all or part of the costs of their care but at the same time were unable to work and lost income. Some were required to take on debt which would persist even after the end of quarantine and those who paid outright could

²³ Bell. *The Great Plague*. 124.

²⁴ Newman, "Shutt Up," 823.

²⁵ Bell. *The Great Plague*, 161, 190.

have lost their savings, thus the consequences of quarantine were longer lasting than the forty days or more in which they were shut up.

Bell levels his main criticism of the government's response at the meager funds provided for the care of the sick and poor, which came primarily through charity and the pest-rate.

“through the attenuated figures disclosed in the payment books... showing such small sums to serve so great a need, we see darkly a huge mass of inevitable suffering, and privations which rendered the people more liable to receive infection and less fitted to combat disease. These evils greater generosity might have lessened, but those whose first concern should have been in their alleviation had left tragic London far behind them... The cold fact is that the sums distributed in relief by the city, supplementing the poor results of the pest-rate, over the whole of its area and to the out-parishes, to which the public contribution was in part diverted, at no time reached as much as £1,000 a week... the maintenance of the people was made possible only by the benevolence from the wealthier residents, which each parish separately received and distributed.”²⁶

Bell is convinced that widespread use of quarantine would have stopped the great loss of life and the lack of funds was the major factor in the city's failure. While a successful quarantine could have been effective, despite the fact that plague primarily is transmitted from rat to person and only rarely from person to person, it still would have been hampered by the city's many other failings and general hostility to quarantine. As Bell acknowledges, the funding would have at least improved the living conditions of those in quarantine, which regardless of the effectiveness of quarantine, would have been a humanitarian triumph to the infected and healthy poor.

²⁶ Bell. *The Great Plague*. 196.

Another historian, Stephen Inwood attempts to put England's rudimentary public health and poor relief systems into a historical context. He argues, that unlike the modern day, the funds provided to the poor and sick in 1600's London were considered a novel use of public funds thus its use was often inconsistent, both within and between parishes, and the wages provided were meager at best. The notion that one should be forced by the government to provide for the poor instead of Christian charity was rather new and the public health relief was viewed in a similar manner because it had the similar function of providing for those who could not provide for themselves. Following the reformation and the dissolution of the monasteries, the role of both public health and poor relief became included in the duties of the city, which was less capable of or willing to address matters traditionally left to charity such as care for the poor and sick.²⁷ In total, Inwood agrees with Bell in stating that the funds provided for public health relief were meager at best, and in addition the much larger suburbs had the greatest trouble with funding.²⁸ This was compounded by the suburbs' less developed and inadequate administration which struggled in gathering funds and distributing those funds for public health use, in comparison to the smaller richer parishes within the city walls.²⁹

The historian Stephen Porter in his book *The Great Plague*, agrees with the general idea that the funds provided were insufficient, but he argues that the government couldn't afford to provide large sums of money to the parishes because of the ongoing war with the United Provinces.³⁰ The war with the Dutch, as Samuel Pepys notes in his

²⁷ Inwood. *History of London*. 163-164.

²⁸ Inwood. *History of London*. 165.

²⁹ Inwood. *History of London*. 167.

³⁰ Porter, *The Great Plague*, 114.

entry, August 31st, 1665, cost “a great deal of money,” which the kingdom could not spare.³¹ From this perspective the failure of the city to support the poor in quarantine can be seen as an unfortunately poor timing of events; the war and plague in the same year. Yet one could also argue that the governments of both England and the United Provinces should have considered their dying poor before their international grievances. Amsterdam and London were both suffering under the dual costs of war and plague.

The Disruption of Trade in London:

Trade was a major aspect of the English economy in 1665; its merchant vessels travelled back and forth with foreign countries as well as Britain’s own colonies. The Merchants and businessmen within London relied on trade, both trade within the kingdom and external trade, for their livelihoods and the other residents relied on trade for foodstuff and other products essential to life and a reasonable standard of living. An epidemic of plague has such a disruptive effect on society that it naturally also impacts Trade and the economy, yet it was not the plague alone but also the policies of the government that contributed to the decline in trade. By the peak of the epidemic, many if not most of the shops within London were no longer operating.³² Either because the shops were quarantined or the operators no longer capable of operating their shops. John Evelyn noted in his diary on October 10th that he “was invironed with multitudes of poore pestiferous creatures, begging almes; the shops universally shut up, a dreadfull

³¹ Braybrooke, *The Diary of Samuel Pepys*, August 31st.

³² Evelyn, “John Evelyn’s Diary.” 80-84.

prospect.”³³ Those shops that remained open, out of an excess of caution, restricted their access to customers. Bowls of water and vinegar were common sights in those few remaining shops for customers to drop their payment.³⁴ In turn, these customers would often air their food for hours if not days to purify any potential infection and some items would be avoided altogether. “Now roses and other sweet flowers wither in the Gardens, are disregarded in the markets, and people dare not offer them to their noses, least with their sweet favour, that which is infections should be attracted.”³⁵

Not all merchants remained in London during the epidemic of 1665, rather, like many London residents, Merchants who could afford to leave often did. For many of the more upscale merchants and those who operated in wealthier parishes, their main customers had mostly left the city, therefore leaving had the double benefit of escaping the plague and continuing their trade elsewhere, while escaping the prospects of lost business. For other merchants, fleeing the city, albeit costly, was considered the best choice even if it meant the dual cost of living abroad and losing their regular customers and source of income. Yet for those who remained in London, the loss of merchants to flight compounded with the loss of merchants from disease.

Goods that were brought into London were subject to destruction or quarantine by the authorities. Perishable goods would have especially suffered the extended quarantine, and the reduction in goods would have strained the resources of London, although some perishable goods were exempted for the quarantine.³⁶ A quarantine of forty days on

³³ Evelyn, “John Evelyn’s Diary.” 80-84.

³⁴ Porter. *Lord Have Mercy*. 228-229.

³⁵ Vincent. *God’s Terrible Voice in the City*. 3.

³⁶ Porter. *Lord have Mercy Upon us*. 191.

commercial products brought into the city came into enforcement before the outbreak of plague, as a response to its spread elsewhere in Europe,³⁷ but as the plague epidemic in London progressed, the quarantine of goods and vessels became stricter.³⁸ Yet in many instances merchant's avoided the quarantine on their vessels through bribery of officials.³⁹

Upon learning of the plague in continental Europe, the British authorities started restricting trade with infected ports. Merchant ships that were suspected of coming from these infected ports were intercepted in the Thames estuary and quarantined for an extended period, while ships claiming to be from healthy ports were allowed through. This process became risky as merchants could attempt to evade the rules by claiming to have departed from a healthy port when in fact they had left an infected one, thus all foreign ships were eventually denied entry, although this had more to do with the fear of Dutch Privateers than the fear of plague.⁴⁰ The restriction on naval borne trade both reduced the available goods for London's inhabitants to purchase and financially harmed merchants within the city. The loss of trade may have been compounded by the impressment of British sailors into the navy in preparation for war with the Dutch, thus sailors who would normally be conducting trade were held by the British naval authorities. These sailors were kept in quarantine for their own protection because the outbreak of plague was a threat to Britain's war making capabilities.⁴¹

³⁷ Mullett. *The Bubonic Plague and England*. 197.

³⁸ Porter. *Lord have Mercy upon us*. 191-192.

³⁹ Mullett. *The Bubonic Plague and England*. 197.

⁴⁰ Porter. *Lord Have Mercy*. 192, 213.

⁴¹ Mullet. *The Bubonic Plague and England*. 200-201.

Foreign trade and trade with the colonies were only one source of trade that was restricted by London and other British authorities. Internal trade was restricted although it was mostly the orders of other cities and towns restricting trade with London and not necessarily London restricting trade with the rest of Great Britain.

“The Lords of his Majesties Privy Council, taking to their serious consideration, that albeit by the infinit mercy of GOD, this kingdom hath been hitherto preserved from the plague of pestilence, which hath long continued at London, and broken out in many other Towns and Places of the Kingdom of England; yet the danger and fear of infection is as great as it hath been heretofore, by the resort of many people and merchants to the city of London, and other places suspected, for beginning Commerce and Trade, and adventuring to bring into this kingdom all commodities as formerly, albeit the Plague is not yet altogether ceased, and that all goods and merchandise to be imported from thence, may be yet justly suspected.”⁴²

In this case the Scottish Privy Council was extending their ban on trade with infected areas and specifically names London. While this may have been expedient for the Scots, it was harmful to London and reflects the weakness of decentralized Britain in which both kingdoms are essentially working in their own best interests. As the Largest trading City on the British Isles, London naturally suffered the worst of trade restrictions.

The decreased trade in London created serious consequences for its inhabitants. Poorer merchants who were forced to remain in London, mainly because they could not afford the cost of leaving and because their poor customers generally remained, were strongly impacted by the decreased trade. As a large trading center, London would have

⁴² *Proclamation Discharging Trade and Commerce with the City of London, and other Places of the Kingdom of England, suspected of the Plague* (Edinburgh: Evan Tyler, December 21, 1665), Early English Books Online, 1.

held a large number of merchants who would all have suffered the loss of trade to an extent. London was also an industrial center in England thus it had a large number of artisans, skilled labor, and unskilled labor.⁴³ Lack of trade in London due to loss of people and increasing poverty as well as less trade within the Kingdom and beyond, meant that industry was greatly diminished and numerous laborers ceased to have employment. This massive poverty, which weakened the sick and starved the healthy, can thusly be traced back to both voluntary and government imposed restrictions on trade. Less shops open also made shopping more difficult for the average person who either had to walk further to buy what he needed to survive or had less goods available to purchase. These people had to dare the long walk while avoiding people who could potentially be infected; the wealthy in London had servants who could be sent to fetch supplies and water.

Merchant ships overwhelmingly avoided London and preferred other ports; mainly from both fear of the plague and fear of being quarantined.⁴⁴ In order to simply receive enough essentials for the population of London to survive, the Royal Court offered extra compensation to merchants who shipped food into London and the even greater incentive that merchant vessels who traded with London would have their sailors exempt from being pressed into the Royal Navy.⁴⁵ The lack of ships trading in London was not helped by the Dutch privateers who hunted English merchants in the region.⁴⁶ Restrictions on trade hurt everyone in London, both rich and poor. Yet the rich were

⁴³ Bell. *The Great Plague*. 120.

⁴⁴ Bell. *The Great Plague*. 199.

⁴⁵ Bell. *The Great Plague*. 199.

⁴⁶ Bell. *The Great Plague*. 199.

capable of maintaining at least a basic quality of life while the poor did not have a reserve of wealth or sufficient other assets to go for a potentially extended period without an income.

The plague was sufficient alone to reduce trade within the city through loss of life, and flight of merchants and potential customers, yet the government policies contributed to and compounded with the natural loss of trade such that a bad situation was made worse. Further harming the ability of merchants, artisans and laborers to feed themselves and their families. Bell said, in his analysis on the plagues impact on commerce, “The city’s commerce was far scattered where not wholly destroyed,”⁴⁷ but he makes no substantial distinctions between loss of trade through government restrictions and loss of trade directly as a result of the plague.

In Stephen Inwood’s general History of London he provides context to the economic situation in London which is relevant to the plague. One key point he notes, although it is no more than a brief paragraph in his book, was the great presence of city Aldermen in Trade groups such as the East India group or the Levant group.⁴⁸ This provides an interesting context when analyzing their decision to restrict overseas trade which no doubt came at their expense. Another aspect of the economy that is very relevant to a study of the plague’s impact was the dependence on rich customers for much of the industry of London. Nearly a quarter of London’s work force was dedicated to clothing trade for which the high fashion of the nobles was a key component.⁴⁹ In this context, the flight of the rich from the city would have had an exponentially greater

⁴⁷ Bell. *The Great Plague*. 187.

⁴⁸ Inwood. *History of London*. 203.

⁴⁹ Inwood. *History of London*. 208.

impact on trade because of the high presence they had in shopping, which Inwood describes as much an important social aspect of London as an economic aspect.

The historian Stephen Porter tackles the issue of the plague's impact on trade more extensively than the previous historian. He acknowledges that the aldermen's actions towards trade were mainly to follow the examples of other countries who had earlier restricted trade with areas infected with plague.⁵⁰ This loss of trade, both from the restrictions as well as other causes linked to the plague, he argues, had a great effect on the quality of life of many merchants and artisans, who suffered starvation from lack of income.⁵¹ As well as the wellbeing of those who found shopping more difficult with so many shops no longer functioning.

One business that flourished during the plague epidemic was crime. Stealing from the dead or dying was recorded and many people were convicted.⁵² There were even claims that nurses tasked with caring for the sick in quarantine were in some instances killing their patients in order to seize their property.⁵³ While the charge of murder by nurses appears farfetched it was a widely repeated charge seen in contemporary writing. Dr. Nathaniel Hodges, a physician who treated patients during the epidemic, said of nurses:

“BUT 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

⁵⁰ Porter. *Lord Have Mercy*. 190.

⁵¹ Porter. *Lord Have Mercy*. 227-228.

⁵² Jeaffreson. *Middlesex Session roles: 1665*. 363-381.

⁵³ *The Shutting up of infected houses soberly debated*. 9.

the infected to those who were well; and nothing, indeed deterred these abandoned Miscreants from prosecution their avaricious 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... And so many were the Artifices of these barbarous Wretches, that it is to be hoped, Posterity will take Warning how they trust them again in like Cases; and that their past Impunities will not be a Means of bringing on us again the like Judgment.”⁵⁴

While this appears extreme, nurses were very poorly compensated for their services and did not necessarily perform their tasks out of care for their patients but rather out of necessity for their own survival. The parishes also could not afford to be selective in who they choose to be nurses and other public health officials. The most common crime, though, appeared to be the illegal sale of property from infected homes by its own owners. Under the suffering of poverty these individuals needed the supplemental income, especially if their own parish could not take care of them, thus the punishment of people who sold their potentially infected property was a public health decision but harmed the wellbeing of those quarantined in desperate poverty.

Even before the implementation of the anti-plague measures, the poor parishes were at an inherent disadvantage compared to the rich in coping with the outbreak of plague. These inherently disadvantageous factors were commonly known by the city officials who knew based on prior experience that the poor would suffer the worst of the plague. A report by the College of Physicians in 1665 said: “hence is it that the contagion has as yet kept itself amongst the poor and indigent people living in close houses where many families are thrust together, and where there is constantly a foul

⁵⁴ Hodges. *Loimologia*. 8-9

offensive smell almost suffocating a stranger at his first approach.”⁵⁵ The streets were also extremely narrow unlike in the more open streets of the richer parishes within the city walls.⁵⁶ Sanitation was also often less developed in the poorer parishes in which filth was often simply dumped into the streets⁵⁷ although the parish authorities attempted to keep the streets clean and to remove stray animals.⁵⁸ The buildings in which the poor inhabited were built out of poorer building materials in which the fleas and rats who carried the plague could more easily live. The diets of the poor were also of lower quality which could have harmed their bodies’ ability to fight the infection.⁵⁹

The poorer and densely occupied areas outside of the city walls had long been a problem for the authorities. London had grown rapidly during a period of economic growth spurred on by London’s increasing importance as a center of Trade. Its employment opportunities as well as its entertainment and social opportunities brought every manner of person to London. For fear of the consequences of growth, especially that of spreading plague, the city, Parliament, Privy Council and King all took direct action over many decades to restrict construction and remove vagrants and beggars.⁶⁰ Their goals met with some success inside the walls, even with the tendency of the king to grant exemptions to those he favored. Fines were the limit of punishment in illegal construction and the need for funds prevented serious efforts to prevent illegal construction in the city except around the living areas of important people.⁶¹ Yet in the

⁵⁵ *Cautionary Rules for preventing the sickness*. 3.

⁵⁶ Shrewsbury, *Bubonic Plague in the British Isles*, 447.

⁵⁷ Inwood. *History of London*. 167.

⁵⁸ Porter. *Lord Have Mercy*. 217.

⁵⁹ Inwood. *History of London*. 167.

⁶⁰ Inwood. *History of London*. 192-193.

⁶¹ Inwood. *History of London*. 193-194

suburbs, liberties, and out-parishes of London the authorities were ineffective at preventing illegal construction thus these areas became crowded, crime ridden and disease filled. The inability of the authorities to control the growth of the areas directly outside the walls came from a general lack of authority in those areas and reflects a failure of London's system of decentralized authorities and its inability to ensure that the large poor parishes had adequate administrations.⁶²

With all of the disadvantages inherently present in the poor communities, and the problems directly inflicted upon the poor by the plague, the government's anti-plague policies compounded these problems by adding new harms on top of the harms already inflicted upon the poor. The anti-plague policies did harm the financial wellbeing of members of all socio-economic classes but the middle and lower class individuals suffered a disproportionately high economic hardship. And the economic power of the individual parishes was greater in the wealthier parts of the city ensuring that those who lived in wealthy parishes could be better taken care of. The government's policies failed the poor in this manner and the government did little once the outbreak began to rectify their policies' flaws.

⁶² Inwood. *History of London*. 191.

Conclusion

The Great Plague in the year 1665 in London caused a devastating loss of life, yet it did not receive as much funds from the government and private charity as the Great Fire that broke out only a few months later but in which loss of life was relatively light. The Great Plague did not receive the same attention from writers as did the Great Fire. Thomas Vincent, who considers both the Great Plague and the Great Fire to be Holy Punishment, said, “The plague so great, so lately, should not be forgotten; yet lest the fire more lately, and proportionally greater...”¹ How could the Great Fire have been greater when far fewer died than during the Great Plague?

For the wealthy the Great Fire was personally far worse. They fled the plague to their country homes or other lodging while their property in London was still intact and guarded by a loyal servant. They were safe and likely suffered economic hardships well within their means to weather. Then only a few months later the Great Fire came and took away their property and possessions, thus for the wealthy, the Great fire was a greater tragedy than the Great Plague. Apparently the city and kingdom governments agreed because they provided less Funds for the Great Plague even as they had money to spare and as the parishes ran out of money.

The government response to the plague, was more harmful to the poor than to the rich. Yet the poor appear to be more victims of circumstance rather than abuse from the wealthy and powerful during the Great Plague. The plague orders appear to be the best

¹ Vincent. *God's Terrible Voice in the City*. 28.

efforts of the Government to handle so great a catastrophe with so little preparation, and this lack of preparation may be the greatest factor in the suffering of the poor who were left behind in plague ridden London. Even so, the unofficial actions and exceptions taken during the epidemic appear to have been taken to the benefit of the wealthy and other actions such as removing the sick to other parishes were harms for the poor.

The lack of preparation was the greatest reason for the failure of the quarantine to halt the plague, although inconsistencies in the application of quarantine also contributed. The lack of pesthouses, a poor method for gathering funds, and an insufficient number of public health workers and physicians assigned to institute the quarantine all contributed to its failure early on. The inability to win over the public to the acceptance of quarantine was another contributing factor since so many people either hid their disease or bribed an official to avoid quarantine. By the peak of the epidemic it was too late to bring the situation under control as there were not enough people available to institute a quarantine for so many sick individuals.

Despite failed efforts in numerous past epidemics, the authorities did not learn from their mistakes and failed to ensure that they had enough funds and workers to carry out the tasks. Seeing as how the poor were the chief inhabitants of the city during the plague and their parishes were the least capable of handling the crisis, the poor were the greatest victims of the government's failures. The wealthy, from whom the authorities were drawn, were able to flee and abandon the city its time of need; bringing not just themselves but their wealth out of the city, which should have been used for the public health funds.

The Great Plague in 1665 and plague in general has had a significant impact on the development of English medicine, and on the role of the government. The development of a public health system in response to plague and the creation of the Bills of Mortality in the 1500's came about as a result of the dissolution of the monasteries and the need for the government to take over some of the monasteries' responsibilities. These responsibilities of providing public health and poor relief were able to become more accepted over time as important functions of the government. Modern medicine also benefited even though physicians made little innovations during epidemics of the 1600's but the growing reliance of the government on a formal medical establishment created the foundation for future discoveries such as those of John Snow who broke with traditional knowledge to successfully end the 1854 outbreak of cholera in London.²

The history of the Great Plague has implications for the modern day. The belief by the poor, that they were being treated unfairly by the government created greater resentment for the public health orders and essentially undermined the attempts by the authorities to implement their planned policies. A greater effort to achieve an egalitarian public health system might have stifled some of the resentment. The government operated under the false belief that the poor would agree that the safety of the London community outweighed the well-being of a few individuals in quarantine. The government and other members of the upper-class were shocked by the failure of the commoner to follow policy. Whether it was the urgent desire to meet with infected neighbors or the desire to attend funerals of friends and family, and the failure to provide

² Steven Johnson, *The Story of London's Most Terrifying Epidemic—and how it Changed Science, Cities and the Modern World*. (New York: Riverhead Books, 2006).

care for those in quarantine ensured its failure. Quarantine is a policy that is used into the modern day, often to great effect, but not always. The recent Ebola outbreaks in West Africa closely mirrored events in London in 1665. Individuals in quarantine on occasion broke out and spread the disease further. Many were under the belief that their quarantine was not for ensuring public health but rather some government or western conspiracy. It is important for modern policy makers to take the human factor into account and to ensure that the terrible condition of quarantine is as fair and humane as possible, in order to lessen suffering and decrease resistance to it.

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