

Plague Discourse:
Political, Religious, and Medical Publications in England, 1603–1666

by

Lisa Olson

Submitted in partial fulfilment of the requirements
for the degree of Master of Information

at

Dalhousie University
Halifax, Nova Scotia
March 2022

© Copyright by Lisa Olson, 2022

Table of Contents

ABSTRACT.....	v
GLOSSARY.....	vi
ACKNOWLEDGEMENTS	vii
CHAPTER 1: INTRODUCTION	1
CHAPTER 2: LITERATURE REVIEW	5
2.1 PLAGUE	5
2.1.1 <i>Physiology</i>	6
2.1.2 <i>Plague in England, 1348–1665</i>	7
2.2 THE WRITTEN WORD	12
2.2.1 <i>Printing & Language</i>	13
2.2.2 <i>Literacy</i>	15
2.2.3 <i>Accessibility</i>	16
2.3 POLITICS.....	18
2.3.1 <i>Public Health</i>	18
2.3.2 <i>1603 Epidemic</i>	20
2.3.3 <i>1625 & 1636 Epidemics</i>	23
2.3.4 <i>The English Civil War & the Interregnum</i>	24
2.3.5 <i>The Great Plague of London, 1665</i>	26
2.4 RELIGION	28
2.4.1 <i>Magic & Mysticism</i>	28
2.4.2 <i>Divine Punishment</i>	30
2.4.3 <i>The English Reformation</i>	31
2.4.4 <i>Religious Reform</i>	33
2.4.5 <i>Publications</i>	34
2.5 MEDICINE.....	35
2.5.1 <i>Medical Knowledge</i>	36
2.5.2 <i>Medical Revolution</i>	38
2.5.3 <i>Epidemiology & Prevention</i>	43
2.5.4 <i>Plague Treatments</i>	44
2.6 CONCLUSION.....	45

CHAPTER 3: METHODOLOGY	48
3.1 RESEARCH DESIGN	48
3.1.1 <i>Methodology</i>	48
3.1.2 <i>Reflexivity</i>	53
3.2 DATA COLLECTION.....	54
3.2.1 <i>Data Retrieval</i>	54
3.2.2 <i>Selection Criteria</i>	54
3.2.3 <i>Sources</i>	55
3.2.4 <i>Validity & Reliability</i>	55
3.3 DATA ANALYSIS.....	56
3.3.1 <i>Qualitative Analysis</i>	56
3.3.2 <i>Quantitative Analysis</i>	57
3.4 LIMITATIONS.....	58
CHAPTER 4: FINDINGS	59
4.1 PRIMARY NARRATIVES.....	59
4.1.1 <i>Politics</i>	59
4.1.2 <i>Religion</i>	65
4.1.3 <i>Medicine</i>	69
4.2 INTERRELATIONS	74
4.2.1 <i>Political & Religious Discourse</i>	75
4.2.2 <i>Religious & Medical Discourse</i>	80
4.2.3 <i>Medical & Political Discourse</i>	88
4.3 SUMMARY OF FINDINGS	93
4.3.1 <i>Primary Narratives</i>	93
4.3.2 <i>Interrelations</i>	94
CHAPTER 5: DISCUSSION.....	95
5.1 PRIMARY NARRATIVES.....	95
5.1.1 <i>Political Discourse</i>	95
5.1.2 <i>Religious Discourse</i>	98
5.1.3 <i>Medical Discourse</i>	98
5.2 INTERRELATIONS	101
5.2.1 <i>Political & Religious Discourse</i>	101
5.2.2 <i>Religious & Medical Discourse</i>	103

5.2.3 <i>Medical & Political Discourse</i>	106
5.3 SUMMARY OF DISCUSSION	108
5.3.1 <i>Primary Narratives</i>	108
5.3.2 <i>Interrelations</i>	109
CHAPTER 6: CONCLUSION.....	111
6.1 THEORETICAL IMPLICATIONS.....	111
6.2 FUTURE RESEARCH.....	113
BIBLIOGRAPHY.....	115
PRIMARY SOURCES	115
SECONDARY SOURCES.....	120
APPENDIX A: LIST OF PRIMARY SOURCES.....	128
POLITICAL SOURCES	128
RELIGIOUS SOURCES.....	131
MEDICAL SOURCES	132
APPENDIX B: POLITICAL DISCOURSE GRAPH.....	134
APPENDIX C: RELIGIOUS DISCOURSE GRAPH	135
APPENDIX D: MEDICAL DISCOURSE GRAPH	136

Abstract

Throughout the seventeenth century, printed texts in England increased in quantity, popularity, and accessibility. England also faced multiple outbreaks of plague during this time and the result was an influx of texts concerning the illness. The political, religious, and medical realms were looked to for answers and various authorities answered through print. Using qualitative discourse analysis and historical research, as well as quantitative content analysis, this thesis examines a sample of texts from these three spheres to gain insight into the information being conveyed to the public about the plague at this time and discover how the discourse of these three spheres coexisted. The findings of this study offer insight into the relationships between the political, religious, and medical spheres and how they were affected by plague between 1603 and 1666. They also provide timely insight into responses to widespread health emergencies, such as the current (2019–2022) coronavirus pandemic.

Glossary

Bubo (plur. Buboes): painful swellings caused by inflamed lymph nodes

Bubonic Plague: a type of plague that attacks the lymphatic gland system often causing buboes

Chirurgion: a surgeon

Endemic: the settling of a disease into a constant state of recurrence within a specific region

Epidemic: an outbreak of disease affecting many people in one locality

Miasma: 'bad air' thought to cause disease in those who inhale it

Pandemic: an outbreak of disease affecting multiple countries or continents

Plague Water: a preventative tonic made from herbs and alcohol

Pneumonic Plague: a communicable type of plague that infects the lungs

Pomander: a case for aromatic substances, intended to be worn or carried for protection against infection

Prophylactic: a preventative medicine or measure to be used against disease

Septicaemic Plague: a particularly deadly type of plague that infects the bloodstream

Venice-Treacle: theriac; an antidote for various poisons, thought by some to help treat plague

Yersinia pestis: the species of bacteria that causes plague

Acknowledgements

Thank you to my supervisor, Dr. Philippe Mongeon. Your continuous guidance and enthusiastic support were invaluable and ensured that this experience was a positive one.

I would also like to express my appreciation for having such a dedicated advising committee. Thank you, Alison Brown and Jennifer Grek Martin, for your generous contributions of time and knowledge, your insightful comments, and your dedication to excellence which demanded the best of me.

Finally, thank you to Shane and Theodore, whose constant and unwavering support preserved my sanity throughout this endeavour.

Chapter 1: Introduction

The plague pandemic known as the Black Death reached the shores of England in 1348 and went on to kill around 30–40 percent of England’s citizens.¹ Following the Black Death, the disease became endemic in England, and continued to bedevil the country for another three hundred years. While the seventeenth century saw England’s last plague epidemic, it also saw some of its worst, experiencing major outbreaks in 1603, 1625, 1636, and 1665. As Creighton notes, “the last period of plague in England, from 1603 to its extinction in 1666, was as fatal as any that the capital, and the provincial towns, had known since the 14th century.”²

Throughout the century, the political, religious, and medical sectors disseminated information about the plague using the written word. Printed texts were relatively new to English society, and the century saw an increase in texts printed in English and intended for the general public. This resulted in an increase in publications concerning the disease that were directed at a general audience. While the political, religious, and medical sectors changed significantly throughout the century, they continued to publish texts about the plague throughout the years. The government published proclamations and orders concerning public health policy, religious officials published sermons and prayers addressing the religious nature of the plague, and medical practitioners published medical tracts concerning the disease itself. Throughout this thesis, I will refer to this array of texts as ‘plague publications.’

The texts examined in this study came in the form of broadsheets, pamphlets, and short books. Broadsheets served many purposes in seventeenth-century England, and as Kyle notes, proclamations were essential instruments of government.³ Pamphlets were also multi-purpose and it has been shown that they played a part in the development of a

¹ Philip Ziegler, *The Black Death* (New York: Harper Collins Publishers, 1969), 230.

² Charles Creighton, *A History of Epidemics in Britain: From A.D. 664 to the Extinction of Plague*, vol. 1 (Cambridge: Cambridge University Press, 1891), 470.

³ Chris R. Kyle, “Monarch and Marketplace: Proclamations as News in Early Modern England,” *Huntington Library Quarterly* 78, no. 4 (2015): 771–87, <https://www.jstor.org/stable/10.1525/hlq.2015.78.4.771>.

public sphere,⁴ contributed to the seventeenth-century ‘news revolution,’⁵ and influenced public politics while introducing concepts of censorship and propaganda into the fold.⁶ Finally, it has been shown that books catered not only to the wealthy or to professionals but played a large part in the daily lives of ordinary citizens.⁷

When it comes to various publications concerning the plague, these have also been widely discussed among historians. Greenberg, for example, examines the widely available bills of mortality throughout seventeenth-century London⁸ whereas Singer studied, at length, a variety of medical tracts concerning the plague from the two hundred years following the Black Death.⁹ Jenner further examines “single-sheet textualization[s] of the plague,”¹⁰ while Grigsby and Gilman examine representations of plague in Early Modern English literature.¹¹

Despite the extent of research conducted on plague publications and the role of print in seventeenth-century England there remains a gap in the literature concerning the content being published for the public from different fields and how they complement or contradict one another. The purpose of this thesis is, therefore, to compare political, religious, and medical publications pertaining to the plague in England during the seventeenth century and establish how the knowledge creation and dissemination of these spheres related to one another. My research seeks to answer the following questions:

1. What were the main themes or narratives conveyed by political, religious, and medical plague publications?

⁴ Pascal Verhoest, “Seventeenth-Century Pamphlets as Constituents of a Public Communications Space: A Historical Critique of Public Sphere Theory,” *Theory, Culture & Society* 36, no. 1 (January 1, 2019): 47–62, <https://doi.org/10.1177/0263276418779185>.

⁵ Nicholas Brownlees, *The Language of Periodical News in Seventeenth-Century England* (Newcastle upon Tyne, UK: Cambridge Scholars Publisher, 2011), 1–229.

⁶ Jason Peacey, *Print and Public Politics in the English Revolution* (New York: Cambridge University Press, 2013), 1–123, <https://doi.org/10.1017/CBO9781107360297>.

⁷ Lynette Hunter, “Books for Daily Life: Household, Husbandry, Behaviour,” in *The Cambridge History of the Book in Britain: Volume 4: 1557–1695*, ed. John Barnard and D. F. McKenzie (Cambridge: Cambridge University Press, 2002), 514–32, <https://doi.org/10.1017/CHOL9780521661829>.

⁸ Stephen Greenberg, “Plague, the Printing Press, and Public Health in Seventeenth-Century London,” *Huntington Library Quarterly* 67, no. 4 (2004): 508–27, <https://www.jstor.org/stable/10.1525/hlq.2004.67.4.508>.

⁹ Dorothea Waley Singer, “Some Plague Tractates (Fourteenth and Fifteenth Centuries),” *Proceedings of the Royal Society of Medicine* 9 (March 1916): 159–212, <https://doi.org/10.1177/003591571600901618>.

¹⁰ Mark S. R. Jenner, “Plague on a Page: *Lord Have Mercy Upon Us* in Early Modern London,” *Seventeenth Century* 27, no. 3 (September 2012): 255, <https://doi.org/10.7227/TSC.27.3.2>.

¹¹ Byron Lee Grigsby, *Pestilence in Medieval and Early Modern English Literature* (New York: Routledge, 2004), 1–201.

2. How did the political, religious, and medical publications responding to seventeenth-century outbreaks of plague differ or overlap?

To answer these questions, I have closely examined the tone and content of an array of plague publications from each realm and compared my results. Examining this topic through a social constructivist lens, and acknowledging the complexity of the works, further facilitated a deeper understanding of the human experiences that shaped and were shaped by such discourse.

The significance of such a study lies both in its historical value and its relatability to the modern world. Firstly, analyzing the discourse surrounding these outbreaks will provide insight into societal responses to epidemic disease in seventeenth-century England. The texts examined were published by authoritative figures and were intended for a general audience, and such publications would likely have had a significant impact on how many citizens viewed and responded to outbreaks of plague.

Secondly, while this study provides historical insight into the abundance and variety of information received by the average citizen during seventeenth-century outbreaks of plague, parallels may also be drawn with the coexistence and information dissemination of the political, religious, and medical spheres during the current (2019–2022) coronavirus pandemic. Throughout the pandemic, the spread of information has been a popular topic. The term ‘infodemic’ has been used to describe the flood of information and misinformation concerning the pandemic that has abounded throughout various forms of media.¹² People have had the opportunity to share their research and their opinions with their communities and others across the world, and many have looked to politicians, priests, and doctors for answers. Sometimes their views have aligned or intersected, and other times they have completely contradicted one another. Further knowledge of the responses of authority figures to plague in seventeenth-century England, in an epidemic management context, will provide us with an opportunity to learn from the past and apply this knowledge to our current and future health emergencies.

¹² “Infodemic,” World Health Organization, March 25, 2022, <https://www.who.int/westernpacific/health-topics/infodemic>.

This thesis is separated into 6 chapters. The first chapter presents a brief introduction to the topic of study. Chapter 2 reviews pertinent literature and provides contextual background for the research through an examination of plague, the written word, and the political, religious, and medical spheres of seventeenth-century England. Chapter 3 covers the study's methodology, describing the philosophical framework and indicating methods of data collection and data analysis as well as limitations of the study. The fourth chapter presents the research findings as prominent recurring themes as well as anomalies in the texts. The fifth chapter provides a discussion of these findings within the context of previous literature, and the final chapter concludes the study.

Chapter 2: Literature Review

When the plague reached England in 1348 it brought with it a devastating death toll as part of the pandemic now known as the Black Death. Its effects lingered as plague became endemic throughout the country. As Trevelyan writes, “The Black Death remained in the soil of England, and became known as ‘The Plague.’”¹³ England subsequently experienced recurrent outbreaks of plague for three hundred years following the Black Death. By the seventeenth century, the frequency of plague outbreaks was on the decline, but plague publications were on the rise. Various bodies from the political, religious, and medical sectors published texts concerning the epidemics which were intended for the public and likely affected the ways that citizens responded to the plague.

This chapter contextualizes my research and synthesizes the literature that informed it. Section 2.1 examines the disease physiology, its prolonged presence in England, the country’s demographics at the time, and the subsequent repercussions. Previous research on seventeenth-century writing, reading, printing, and publishing is then examined in section 2.2 with a focus on literacy rates and the accessibility of printed texts. Sections 2.3, 2.4, and 2.5 then examine works concerning the political, religious, and medical spheres of seventeenth-century England as well as previous research on the corresponding plague publications. Section 2.6 concludes this chapter by outlining gaps in prior research which create the basis for the research questions that guide my study.

2.1 PLAGUE

Plague is a disease that has been affecting humans and other mammals for thousands of years. It is still found throughout the world today and while there remain small outbreaks among humans, throughout history plague has killed an estimated 200 million people.¹⁴ An estimated 1.4 million of those deaths may be attributed to the Black Death in England, and the plague stayed in the country for another three hundred years.¹⁵ It is difficult to estimate the number of deaths caused by the plague during this time.

¹³ G. M. Trevelyan, *England Under the Stuarts* (London: Methuen, 1965), 344.

¹⁴ Sarah E. Rollins, Sean M. Rollins, and Edward T. Ryan, “Yersinia Pestis and the Plague,” *Pathology Patterns Reviews* 119 (June 1, 2003): S78, <https://doi.org/10.1309/DQM9-3R8Q-NQWB-FYU8>.

¹⁵ Ziegler, *The Black Death*, 230.

During the last two hundred years, however, Slack estimates that the disease likely killed over 800,000 more people.¹⁶

2.1.1 Physiology

Plague is caused by *Yersinia pestis*, a bacterium that can multiply quickly, needing only twenty minutes to create a new generation.¹⁷ *Yersinia pestis* is transmitted by fleas and therefore is often found in rodents. While the disease cannot survive without a rodent population, the fleas will move to nearby animals and humans as the rats die.¹⁸ After feeding on an infected rat, the flea who bites a human will introduce the bacteria into their blood stream.¹⁹ Once the disease enters a human host, it typically presents in one of three ways: bubonic, pneumonic, or septicaemic.

Bubonic plague is most associated with the Black Death and subsequent plague outbreaks throughout Europe. Following a flea bite, plague bacteria travel through the lymphatic gland system to the nearest lymph node where they replicate, causing painful swellings known as buboes which present most often in the groin, armpits, or neck. While recovery is possible, if left untreated bubonic plague is often fatal.²⁰ Untreated bubonic plague can also spread to the lungs or blood causing the more severe presentations of pneumonic and septicaemic plague.

Pneumonic plague is the only communicable form of the disease as it can become airborne.²¹ It is for this reason that Hirst describes primary pneumonic plague as “probably the most infectious . . . of all epidemic diseases,” though bubonic cases complicated by pneumonia can cause a less infectious form of pneumonic plague.²² If left untreated, pneumonic plague is almost always fatal.²³

¹⁶ Paul Slack, *The Impact of Plague in Tudor and Stuart England* (Oxford: Clarendon Press, 1990), 175.

¹⁷ Ernest B. Gilman, *Plague Writing in Early Modern England* (Chicago: University of Chicago Press, 2009), 34.

¹⁸ Colin McEvedy, “The Bubonic Plague,” *Scientific American* 258, no. 2 (1988): 119, <https://www.jstor.org/stable/24988987>.

¹⁹ J. M. W. Bean, “Plague, Population and Economic Decline in England in the Later Middle Ages,” *The Economic History Review* 15, no. 3 (1963): 425, <https://www.jstor.org/stable/2592917>.

²⁰ L. Fabian Hirst, *The Conquest of Plague: A Study of the Evolution of Epidemiology* (Oxford: Oxford University Press, 1953), 30.

²¹ Hirst, 28.

²² Hirst, 29–30.

²³ Hirst, 30.

With septicaemic plague, the bacteria enter the blood stream where their quick multiplication can lead to tissue death, causing skin on the extremities to turn black. Septicaemic plague is always fatal if left untreated.²⁴ This type of plague is also able to kill its victims within a few hours of them feeling ill, before physical symptoms can appear.²⁵ It is for this reason that this form of plague is thought to be responsible for contemporary accounts of people dropping dead with no obvious symptoms.²⁶ As Gilman states, “a man might dine with his friends and sup with his ancestors.”²⁷

2.1.2 Plague in England, 1348–1665

THE BLACK DEATH

McEvedy believes that the Black Death started in marmots in Asia in 1346, and as their pelts moved along the Silk Road, so did the fleas, which then transferred to the next available host.²⁸ Black rats became the primary hosts for *Yersinia pestis*, and as they found their way onto ships, the plague spread quickly throughout the world. It reached England in 1348 when a ship arrived at a south-eastern port carrying an infected sailor.²⁹ The plague quickly spread to the remainder of England and continued to ravage the country through to 1349, likely killing around 30–40 percent of the inhabitants of England.³⁰ Through the accounts of various chroniclers Megson notes that, based on the recorded symptoms, all three primary forms of plague were present among victims of the Black Death in London.³¹ Furthermore, while different types of plague favour different climates, this provided England with little respite since the bubonic plague flourished in the summer months while the pneumonic plague thrived in the winter months.³²

SUBSEQUENT OUTBREAKS

After the 1348–49 pandemic, the plague became endemic in England and flared up recurrently throughout the years, until its last outbreak in London in 1665. While

²⁴ Hirst, 28–30.

²⁵ Hirst, 29.

²⁶ Bean, “Population and Economic Decline,” 426.

²⁷ Gilman, *Plague Writing*, 34.

²⁸ McEvedy, “Bubonic Plague,” 120.

²⁹ Ziegler, *The Black Death*, 121.

³⁰ Ziegler, 230.

³¹ Barbara E. Megson, “Mortality Among London Citizens in the Black Death,” *Medieval Prosopography* 19 (1998): 132, <https://www.jstor.org/stable/44946286>.

³² Bean, “Population and Economic Decline,” 425–26.

plague likely never left the country entirely, substantial outbreaks typically occurred every 10–20 years.³³ Though it is difficult to determine which types of plague were present in these subsequent outbreaks, they were likely primarily bubonic.³⁴ Bean notes that there is little evidence of pneumonic plague outbreaks following the Black Death as, due to its highly infectious nature, a large presence of pneumonic plague would be particularly difficult to contain.³⁵ Septicaemic plague, on the other hand, typically only presents itself during the most severe, acute outbreaks.³⁶

Following the Black Death, the next severe outbreak took place from 1361 to 1362 and was referred to as the *pestis secunda*, or the second plague. It was also widely known as ‘the children’s plague’ as it afflicted a disproportionate number of young people.³⁷ It also affected more males than females³⁸ which led to one chronicler noting that it was commonly referred to as ‘the boys’ pestilence.’³⁹ For the remainder of the fourteenth century, the plague was “largely a disease of children,” affecting disproportionate numbers of them during outbreaks in 1381, 1382, 1383, 1387, 1389, 1390, 1400, and 1401.⁴⁰ Beyond these instances, the disease itself affected everyone in its path equally, regardless of age, gender, social class, or status.

The plague eventually became known as a disease of the poor, however, because socioeconomic inequalities led to more chances of exposure for the destitute. Outbreaks throughout the fifteenth and sixteenth centuries were less frequent and less severe than previous ones. They were more common in urban settings and by the middle of the fifteenth century avoiding infection by fleeing urban areas in favour of the country was a known preventative.⁴¹ The poor, however, did not have the resources to do so, and as

³³ Alan D. Dyer, “The Influence of Bubonic Plague in England, 1500-1667,” *Medical History* 22, no. 3 (July 1, 1978): 310.

³⁴ Bean, “Population and Economic Decline,” 432; Slack, *Impact of Plague*, 65.

³⁵ Bean, “Population and Economic Decline,” 426–27.

³⁶ Bean, 425–26.

³⁷ Samuel Kline Jr Cohn, *The Black Death Transformed: Disease and Culture in Early Renaissance Europe* (London: Arnold, 2002), 213.

³⁸ Cohn, 130.

³⁹ Louth Park Abbey, *Chronicon Abbatie de Parco Lude = The Chronicle of Louth Park Abbey, with Appendix of Documents*, ed. Edmund Venables and Sir William Henry St. John Hope, trans. Arthur Roland Maddison, vol. 1, Publications of the Lincolnshire Record Society (Horncastle, UK: Lincolnshire Record Society, 1891), 40–41.

⁴⁰ Cohn, *Black Death Transformed*, 213.

⁴¹ Bean, “Population and Economic Decline,” 430.

Creighton notes, throughout these later centuries, the plague became largely “a disease of the poor in the towns” whereas the wealthy and those in rural areas were less affected.⁴² While the wealthy could often escape the path of the disease, the poor had nowhere to go and had more frequent interactions with both people and animals. While the plague was indiscriminate in choosing its victims, it flourished in the crowded areas of towns where rats were in abundance, and subsequently affected more impoverished households and eventually became associated with uncleanness.

Its partiality for the poor was noted and it was subsequently viewed as ‘the poor’s plague.’⁴³ This resulted in a conjoined fear of both the poor and the plague and, as Slack notes, led to the creation of plague policies which actually targeted the poor.⁴⁴ Muñoz notes that these government policies “categorized London’s poor into the deserving and the undeserving.”⁴⁵ They considered those affected by poverty through no fault of their own to be ‘deserving’ and subsequently provided them with charity, while those who were seen as choosing not to work, such as beggars, were considered ‘undeserving’ and were subsequently penalized.⁴⁶ Furthermore, this view of the plague as a poor person’s disease seems to have led to the wealthy actually avoiding association with it. A churchwarden in London noted four thousand deaths in his church register for 1563, most of which belonged to the poor dying of plague or fever, though he noted that the rich would not admit to dying of plague, and their causes of death were instead entered as other ailments such as dropsy.⁴⁷

SEVENTEENTH-CENTURY OUTBREAKS

By the seventeenth century, England had been experiencing plague epidemics for over two hundred years and its citizens were familiar with its devastation. While the seventeenth century marked the end of plague in England, it also saw some of the worst

⁴² Creighton, *History of Epidemics*, 1:202.

⁴³ Dyer, “Influence of Bubonic Plague,” 309.

⁴⁴ Paul Slack, “Responses to Plague in Early Modern Europe: The Implications of Public Health,” *Social Research* 55, no. 3 (1988): 447, <https://www.jstor.org/stable/40970513>.

⁴⁵ Celina Muñoz, “The Plague, the Poor, and the Problem of Medicine,” *Western Libraries Undergraduate Research Award*, no. 2 (2014), https://cedar.wvu.edu/library_researchaward/2.

⁴⁶ Muñoz; A. Lloyd Moote and Dorothy C. Moote, *The Great Plague: The Story of London’s Most Deadly Year* (Baltimore, MD: Johns Hopkins University Press, 2006), 41–42.

⁴⁷ Thomas Vickery, *The Anatomie of the Bodie of Man*, ed. Fredk Furnivall and Percy Furnivall (London: N. Trubner & Co., 1888), 163.

major epidemics since the Black Death nearly three centuries prior.⁴⁸ In London, towards the end of the sixteenth century and throughout the seventeenth century, smaller outbreaks declined in frequency and deadliness while large epidemics declined in frequency though remained devastating.⁴⁹ As Trevelyan notes, “under the Lancastrian and Tudor Kings [the plague] was for long periods together endemic and nearly continual; under the Stuarts it came in rare but violent outbursts, as though the Death itself were in the spasmodic agonies of dissolution.”⁵⁰ Megson’s research indicates that between one-quarter and two-fifths of London’s taxpayers died during the Black Death, though mortality may have been higher among the poorer classes which were not included in this study.⁵¹ While less severe, outbreaks in 1603, 1625, and 1665, are estimated to have killed approximately one-fifth of London’s population each time.⁵²

These outbreaks were also interspersed with smaller ones. Between 1500 and 1665, there were at least seventeen outbreaks in London, though most of them likely resulted in a death rate of less than 12 percent.⁵³ Outside of London, death rates were generally less severe. During the seventeenth century, approximately 80 percent of the English population lived in rural villages which were far less susceptible to severe plague outbreaks than urban areas due, in part, to low population density.⁵⁴ Between 1570 and 1670, for example, Slack estimates that two-thirds of a million people died of plague in England, and that one-third of those deaths occurred in London.⁵⁵ While fear of the plague was ubiquitous, therefore, it was not the case that every citizen personally encountered it.⁵⁶ On occasions when plague was brought to rural populations, however, it could wipe out an entire village. During the 1665 outbreak, Lord notes that “many saw the pestilence as heralding the end of the world as towns and villages were deserted and

⁴⁸ Gilman, *Plague Writing*, 34.

⁴⁹ Neil Cummins, Morgan Kelly, and Cormac Ó Gráda, “Living Standards and Plague in London, 1560–1665,” *The Economic History Review* 69, no. 1 (2016): 4, <https://doi.org/10.1111/ehr.12098>.

⁵⁰ Trevelyan, *England Under the Stuarts*, 344.

⁵¹ Megson, “Mortality Among London Citizens,” 131.

⁵² Cummins, Kelly, and Ó Gráda, “Living Standards and Plague,” 4.

⁵³ Slack, “Responses to Plague,” 435.

⁵⁴ Lucinda McCray Beier, *Sufferers & Healers: The Experience of Illness in Seventeenth-Century England* (London: Routledge & Kegan Paul, 1987), 134.

⁵⁵ Slack, *Impact of Plague*, 174–75.

⁵⁶ Beier, *Sufferers & Healers*, 134.

the dead lay in the streets with no one left to bury them.”⁵⁷ Furthermore, the economic consequences of epidemics affected everyone as rural populations relied on the resources of the towns and cities. Government revenues decreased, communities suffered under dwindling labour forces, and households were decimated as wage-earners died and children were orphaned.⁵⁸

While the plague devastated the economy, the fear surrounding the plague also devastated society. Nearly everyone feared it; people avoided each other in the streets, households were divided when some fled and others were left behind, and those who had contracted plague or been in contact with a plague-victim were shunned.⁵⁹ “Masters deserted servants, ministers abandoned congregations, adults were cruel to children, and healers abandoned patients.”⁶⁰ Some who grew reckless, however, responded by flouting regulation and abusing those enforcing it. The healthy, for example, would purposefully put themselves in danger while the sick purposefully put others in danger.⁶¹ They had been abandoned by God, medicine, the government, and their neighbours, and “they, in turn, abandoned courtesy, common sense and, finally, fear.”⁶²

Regardless of this devastation, England’s population doubled in the sixteenth and seventeenth centuries.⁶³ Heightened fertility rates may have been caused by heightened mortality rates though,⁶⁴ as has been shown to happen after natural disasters.⁶⁵ Such heightened mortality rates in this case can be partially attributed to the country’s final four major epidemics of plague. The 1603 outbreak resulted in approximately 33,347 deaths,⁶⁶ the 1625 outbreak in 41,313 deaths,⁶⁷ the 1636 outbreak in 10,400 deaths,⁶⁸ and

⁵⁷ Evelyn Lord, *The Great Plague: A People’s History* (New Haven, CT: Yale University Press, 2014), 1–2.

⁵⁸ Slack, *Impact of Plague*, 17–18.

⁵⁹ Beier, *Sufferers & Healers*, 252–53.

⁶⁰ Beier, 253.

⁶¹ Beier, 254.

⁶² Beier, 254.

⁶³ Slack, *Impact of Plague*, 186–87.

⁶⁴ Slack, 186–87.

⁶⁵ Jenna Nobles, Elizabeth Frankenberg, and Duncan Thomas, “The Effects of Mortality on Fertility: Population Dynamics After a Natural Disaster,” *Demography* 52, no. 1 (January 14, 2015): 34, <https://doi.org/10.1007/s13524-014-0362-1>; Jocelyn E. Finlay, “Fertility Response to Natural Disasters: The Case of Three High Mortality Earthquakes,” World Bank Policy Research Working Paper No. 4883, March 1, 2009, 22, <https://doi.org/10.1596/1813-9450-4883>.

⁶⁶ Creighton, *History of Epidemics*, 1:660.

⁶⁷ Creighton, 1:660.

the 1665 outbreak in 68,596 deaths.⁶⁹ This final outbreak is often called the Great Plague of London due to its severity in the city, and given that nearly 10 percent of the country's five million inhabitants lived in London at this time, the outbreak was devastating.⁷⁰ It was the last epidemic of plague in England, though citizens did not know this and still feared its return into the eighteenth century.⁷¹

2.2 THE WRITTEN WORD

Throughout the seventeenth century there were a variety of publications available to the public. During outbreaks of plague many of the publications intended for the public concerned the illness. This thesis focusses specifically on broadsheets, pamphlets, and short books produced by the political, religious, and medical realms. Broadsheets were single-sheet publications which “performed important social functions and carried important messages.”⁷² They were used extensively by the political realm to convey information from the monarch to the people in the form of acts, orders, and proclamations. During times of plague, these often concerned the disease and the subsequent implementation of epidemic management strategies. Proclamations, in particular, were an essential part of governing during the sixteenth and seventeenth centuries, and Kyle describes them as “a linchpin of Tudor/Stuart strategies of rule.”⁷³ As sources for historical research, proclamations are valuable not only as vessels of information but as documents indicative of larger societal trends and a monarch's priorities. As Kyle notes, “the proclamation disseminated news, curtailed the flow of news, and *was* news.”⁷⁴ Broadsheets also transmitted information from the religious and medical realms, appearing in many different forms such as placards, flyers, and ordinances.⁷⁵

⁶⁸ Kira L. S. Newman, “Shutt Up: Bubonic Plague and Quarantine in Early Modern England,” *Journal of Social History* 45, no. 3 (2012): 809, <https://www.jstor.org/stable/41678910>.

⁶⁹ Creighton, *History of Epidemics*, 1:660.

⁷⁰ Moote and Moote, *Great Plague*, 26.

⁷¹ Slack, *Impact of Plague*, 311.

⁷² Andrew Pettegree, “Broadsheets: Single-Sheet Publishing in the First Age of Print. Typology and Typography,” in *Broadsheets: Single-Sheet Publishing in the First Age of Print*, ed. Andrew Pettegree (Leiden, NL: Brill, 2017), 3.

⁷³ Kyle, “Monarch and Marketplace,” 774.

⁷⁴ Kyle, 782; italics in the original.

⁷⁵ Pettegree, “Broadsheets,” 4.

Pamphlets, on the other hand, were short tracts, written in the vernacular, and sold at a low price in an attempt to reach the widest audience.⁷⁶ By the end of the seventeenth century in England, Verhoest notes that they were “the single most important print medium of their time.”⁷⁷ The historical value of pamphlets lies not only in their contents, but in their purpose as both a commodity and as a means of influential communication.⁷⁸ Pamphlets and short books were a common medium for plague publications and it was in this form that the political realm published books of plague orders, the religious realm published tracts and sermons, and the medical realm published medical tracts.

2.2.1 Printing & Language

Johannes Gutenberg popularized Western use of the printing press around 1440, revolutionizing print in Europe. England, however, was slow to pick up this trend that swept the Continent. Hamilton writes that the civil strife caused by rebellion and civil war “rendered the middle of the fifteenth century unfavorable to culture and to the introduction of a new invention auxiliary to culture.”⁷⁹ Regardless, several years after its rise in popularity in Europe, William Caxton brought printing to England. While the Latin book trade was flourishing by the 1470s, Caxton, as a translator, made the unusual decision to print books in the vernacular so that he could publish his own English translations.⁸⁰ In 1475, Caxton decided to start a printing house in England, “the only secure market for books printed in English.”⁸¹ He began printing in Westminster in 1476 and quickly went on to publish Chaucer’s *Canterbury Tales* in an attempt to make a book that was already popular among those who could afford manuscripts more available to the general public.⁸² Printed texts, after all, were substantially cheaper than scribal ones.⁸³

⁷⁶ Verhoest, “Seventeenth-Century Pamphlets,” 48.

⁷⁷ Verhoest, 48.

⁷⁸ Verhoest, 48.

⁷⁹ Frederick W. Hamilton, *A Brief History of Printing in England: A Short History of Printing in England from Caxton to the Present Time*, vol. 53, Typographic Technical Series for Apprentices—Part VIII (Chicago: United Typothetae of America, 1918), 8.

⁸⁰ Lotte Hellinga, *William Caxton and Early Printing in England* (London: British Library, 2010), 33–34.

⁸¹ Hellinga, 33, 53.

⁸² Hellinga, 57–58.

⁸³ Peacey, *Print and Public Politics*, 57.

While the demand for Latin texts remained, Caxton and other printers' English publications did well.⁸⁴

Throughout Early Modern England, citizens became increasingly literate and actively engaged in the buying of English books.⁸⁵ The Reformation further advanced the English book trade in the country with sales of English Bibles, Books of Common Prayer, and Psalms.⁸⁶ Between the years 1500 and 1540, England printed 35 percent of its materials in Latin, and the remaining 65 percent in English.⁸⁷ Throughout the remainder of the sixteenth and seventeenth centuries, books in the vernacular that were intended for the general public were on the rise.⁸⁸ Alternatively, by the early seventeenth century Latin was on the decline as a spoken language.⁸⁹ Furthermore, the continued use of Latin was increasingly seen as bombastic. In 1631, one satirist is noted criticizing writers of news periodicals for using Latin as a way to merely elevate their own standing and achieve credibility for their publications.⁹⁰ Despite losing popularity as a spoken language, Latin remained the primary language of communication between physicians in seventeenth-century England.⁹¹ The publishing of books in the vernacular for laymen, however, continued, and they touched on topics such as cooking, sewing, and gardening, but also the fields of medicine, pharmacy, botany, horticulture, chemistry, technology, and earth sciences.⁹² Thus, while physicians may have written to each other in Latin, they increasingly wrote for the public in English. It is difficult to establish the significance of such publications, however, without addressing literacy rates and their accessibility to the public.

⁸⁴ Hellinga, *William Caxton*, 172–73.

⁸⁵ Brenda M. Hosington, "The 'Renaissance Cultural Crossroads' Catalogue: A Witness to the Importance of Translation in Early Modern Britain," in *The Book Triumphant: Print in Transition in the Sixteenth and Seventeenth Centuries*, ed. Malcolm Walsby and Graeme Kemp, vol. 15, Library of the Written Word (Boston, MA: Brill, 2011), 254.

⁸⁶ Julian Roberts, "The Latin Trade," in *The Cambridge History of the Book in Britain: Volume 4: 1557–1695*, ed. John Barnard and D. F. McKenzie (Cambridge: Cambridge University Press, 2002), 142, <https://doi.org/10.1017/CHOL9780521661829>.

⁸⁷ Alexander Wilkinson, "The Printed Book on the Iberian Peninsula, 1500-1540," in *The Book Triumphant: Print in Transition in the Sixteenth and Seventeenth Centuries*, ed. Malcolm Walsby and Graeme Kemp, vol. 15, Library of the Written Word (Boston, MA: Brill, 2011), 85.

⁸⁸ Hunter, "Books for Daily Life," 514.

⁸⁹ Vivian Salmon, *The Study of Language in 17th-Century England*, 2nd ed., vol. 17, Amsterdam Studies in the Theory and History of Linguistic Science 3 (Amsterdam: John Benjamins, 1988), 3.

⁹⁰ Brownlees, *Language of Periodical News*, 83–85.

⁹¹ Greenberg, "Plague, the Printing Press," 512.

⁹² Hunter, "Books for Daily Life," 514.

2.2.2 Literacy

Literacy rates for seventeenth-century England are notably difficult to determine. Cressy notes that the only directly measurable type of literacy is citizens' ability or inability to write their signature.⁹³ This type of literacy is very much connected to one's profession and social class. In Norwich between 1530 and 1700, for example, women and labourers had the lowest levels of literacy at 11–15 percent, whereas clergy and gentry were 98–100 percent literate and merchants, tradesmen, and farmers fell somewhere in the middle.⁹⁴ Furthermore, by these standards, from 1642 to 1644, 30 percent of men living in rural England were considered literate.⁹⁵ Levels of literacy also fluctuated greatly throughout the century and across the country. For the first half of the seventeenth century, approximately 10 percent of women living in London could sign their name and by 1690 this had increased to approximately 48 percent, though such improvements were not seen in rural areas.⁹⁶

Examinations of this type of literacy, however, excludes the semi-literate. People were generally taught to read before they learned to write, so these numbers are not indicative of reading ability.⁹⁷ Those who could sign their name could probably read, but many of those who could not sign their name probably had some ability to read as well. Unfortunately, it is impossible to determine how common it was for citizens to possess the ability to read. Regardless, Peacey notes that "it was more important to live within a literate environment, where there were 'bridges' to literacy, than to possess specific skills."⁹⁸ If one member of a family could read, then information read could reach the ears of everyone in that family and beyond. Moreover, while literacy was considered unnecessary and inappropriate for the rural poor, "the presence of even one reader among a group of rural labourers could act as a significant bridge to the literate world."⁹⁹ While

⁹³ David Cressy, "Literacy in Seventeenth-Century England: More Evidence," *The Journal of Interdisciplinary History* 8, no. 1 (1977): 141, <https://www.jstor.org/stable/202599>; David Cressy, "Levels of Illiteracy in England, 1530-1730," *The Historical Journal* 20, no. 1 (1977): 2, <https://www.jstor.org/stable/2638587>.

⁹⁴ Cressy, "Levels of Illiteracy," 5.

⁹⁵ Cressy, "Literacy in Seventeenth-Century England," 144.

⁹⁶ Cressy, 146.

⁹⁷ Cressy, "Levels of Illiteracy," 2.

⁹⁸ Peacey, *Print and Public Politics*, 57.

⁹⁹ Cressy, "Levels of Illiteracy," 8–9.

it is unclear how many people could read in seventeenth-century England, it was an increasingly literate society with considerable ties to the literate world.

2.2.3 Accessibility

For those who could read, broadsheets, pamphlets and short books were widely available. Some broadsheets were intended for collectors and were therefore available for sale, often at a high price.¹⁰⁰ Many were freely distributed, however, or posted in public for all to read.¹⁰¹ Broadsheets were created by the political, religious, and medical communities, and proclamations in particular were widely accessible. Proclamations in seventeenth-century England were used to convey information about significant events such as a war, the death of a monarch, or the accession that followed. Those with international significance were often printed in multiple languages and distributed abroad.¹⁰² The majority of proclamations, however, concerned legal, political, and religious issues on a local or national scale. During epidemics of plague, therefore, they often concerned the illness. Furthermore, considerable attempts were made to ensure that all citizens heard or read proclamations. They were theatrically announced on the busiest market days and at multiple locations throughout town, often with a musical accompaniment, or with the announcer standing on a stool to increase visibility.¹⁰³ Proclamations were also posted all around town, in market squares and shops, for example, in addition to being available for purchase at a small price.¹⁰⁴ News relayed in proclamations likely permeated all levels of society.

Pamphlets, on the other hand, often had limited print runs, yet one copy could have many readers and they were so affordable that they were “within easy reach of all but the most humble labourer.”¹⁰⁵ Pamphlets were readily available for sale in the streets.¹⁰⁶ There were also many ways to access print without purchase through private networks, and the prevalence of sharing, borrowing, and gifting print, as well as

¹⁰⁰ Pettegree, “Broadsheets,” 3.

¹⁰¹ Pettegree, 3–4.

¹⁰² Kyle, “Monarch and Marketplace,” 778.

¹⁰³ Kyle, 771–87.

¹⁰⁴ Kyle, 777, 784.

¹⁰⁵ Peacey, *Print and Public Politics*, 57.

¹⁰⁶ Peacey, 65.

discussing pamphlets with family and friends, made this common.¹⁰⁷ Other forms of cheap print were also widely available as “pedlars, chapmen and hawkers distributed print across England – in the streets, in alehouses and at fairs.”¹⁰⁸

While printed works were becoming increasingly available throughout the entire country, they remained more accessible in larger towns and cities. The further a citizen was from London and the lower their social status, the less access they had to printed texts and the less likely they were to be able to read.¹⁰⁹ There is also some evidence that printed texts may have been more expensive outside of London.¹¹⁰ Furthermore, in the early seventeenth century, booksellers in rural areas were often unable to meet demand, forcing some inhabitants to go to London for news.¹¹¹ Peacey notes that this was likely in part because by the time newspapers reached rural towns, the news was obsolete.¹¹² Texts concerning important information which stayed relevant for weeks or months, however, remained well-stocked and reached all corners of the country.¹¹³ Publications concerning the plague could have stayed relevant for years and thus were likely widely available across the country. Furthermore, after 1640 “the accessibility of pamphlets and newspapers underwent a dramatic transformation” as booksellers realized the opportunities for selling in the country.¹¹⁴ The seventeenth century also saw a decrease in those working in agriculture and an increase in new wage earners who were “economically able to consume actively the exponentially increasing amounts of broadsides, pamphlets, sermons, and newssheets generated during and after the Civil Wars.”¹¹⁵

When it came to plague publications throughout the seventeenth century, therefore, London would have had the best supply, but an assortment of texts would have reached smaller towns. Rural populations still had access to a variety of printed texts, and they remained connected to the literate world even if they were not literate themselves.

¹⁰⁷ Peacey, 67.

¹⁰⁸ Peacey, 64.

¹⁰⁹ Peacey, 89; Cressy, “Levels of Illiteracy,” 8.

¹¹⁰ Peacey, *Print and Public Politics*, 57.

¹¹¹ Peacey, 63.

¹¹² Peacey, 62.

¹¹³ Peacey, 62.

¹¹⁴ Peacey, 64.

¹¹⁵ Peter Lake and Steve Pincus, “Rethinking the Public Sphere in Early Modern England,” *Journal of British Studies* 45, no. 2 (2006): 282, <https://www.jstor.org/stable/10.1086/499788>.

The information shared in broadsheets, pamphlets, and books, therefore, likely had a significant impact on English society. Political publications in particular would have had a wide audience as various monarchs did their best to suppress bouts of plague.

2.3 POLITICS

The political scene of seventeenth-century England was tumultuous and fluctuated from one reign to the next. Government consisted mainly of the monarch, the Privy Council, and Parliament. The Privy Council, part of the monarch's court, consisted of the monarch's closest advisors. Parliament was comprised of the House of Lords and the House of Commons and held a permanent seat in the Palace of Westminster, though was called and disbanded as needed throughout the century. While it was called infrequently, Parliament often clashed with the monarch and the Privy Council over fiscal and religious issues, among others, and the political landscape of seventeenth-century England was subsequently tempestuous.¹¹⁶ While England's history is littered with conflict between church and state, the majority of seventeenth-century conflicts revolved instead around monarch and Parliament.¹¹⁷ This political turbulence was exacerbated by four major outbreaks of plague.

2.3.1 Public Health

Throughout the sixteenth century, England's growing concern for public health led to the gradual creation of an epidemic management strategy which continued to evolve throughout the seventeenth century.¹¹⁸ Beginning in the late sixteenth century, under the rule of Queen Elizabeth I, books of orders intended to stay the spread of plague, listing different regulations and means of prevention, were printed, and distributed repeatedly throughout the years. While imitating plague orders from the Continent, those created in England were significantly more severe, though the harsh measures were portrayed as acts of charity.¹¹⁹ The orders were enforced by justices of the peace, who

¹¹⁶ Stuart E. Prall, *Church and State in Tudor and Stuart England*, ed. Arthur S. Link (Arlington Heights, IL: Harlan Davidson, 1993), 1–181.

¹¹⁷ Prall, 99.

¹¹⁸ Slack, *Impact of Plague*, 199–226.

¹¹⁹ Graham Hammill, "Miracles and Plagues: Plague Discourse as Political Thought," *Journal for Early Modern Cultural Studies* 10, no. 2 (2010): 88, <https://doi.org/10.1353/jem.2011.0008>; Slack, *Impact of Plague*, 207–11.

also created a tax for the relief of the sick, though at the time the orders' only authority came from "the royal prerogative unrestrained and undiluted."¹²⁰

The first book of orders was created in 1578 with the help of the College of Physicians.¹²¹ When it came to suppressing the plague, medical policies were conveyed primarily through the government,¹²² though they maintained collaboration with the College of Physicians into the seventeenth century. The orders included regulations to prevent the spread of plague such as burning the clothes and bedding of the sick and conducting funerals after dark so that there would be fewer people in attendance.¹²³ They also sometimes included mandates for days of prayer or public humiliation meant to appease God,¹²⁴ though Slack notes that some mentions of God were merely cursory.¹²⁵

Quarantine, however, was the primary means of controlling the spread of the disease. Parishes were required to facilitate the isolation of infected individuals and members of their household either by confining them to their homes or by sending them to a pesthouse.¹²⁶ If a family were confined to their house, then the healthy and the sick were locked in together for a minimum of forty days, longer if a resident died during this time.¹²⁷ Additionally, a red cross was painted on the door and a watchman was stationed outside to ensure that no one entered or exited the premises.¹²⁸ On rare occasions when the sick were allowed out, they were required to carry a white stick or mark their clothing so that others knew to keep their distance.¹²⁹

If, on the other hand, a family were sent to a pesthouse, then they were confined to a building specifically for those who had contracted or been exposed to plague. Pesthouses were mainly created during epidemics in urban areas as places where those

¹²⁰ Slack, *Impact of Plague*, 209–10.

¹²¹ Slack, 209.

¹²² Patrick Wallis, "Plagues, Morality and the Place of Medicine in Early Modern England," *The English Historical Review* 121, no. 490 (2006): 2, <https://www.jstor.org/stable/3806239>.

¹²³ Slack, *Impact of Plague*, 210.

¹²⁴ Andrew Wear, *Knowledge and Practice in English Medicine, 1550–1680* (New York: Cambridge University Press, 2000), 292.

¹²⁵ Slack, *Impact of Plague*, 241.

¹²⁶ Newman, "Bubonic Plague and Quarantine," 810.

¹²⁷ Newman, 812; Slack, *Impact of Plague*, 210.

¹²⁸ Newman, "Bubonic Plague and Quarantine," 812; Slack, *Impact of Plague*, 210.

¹²⁹ Slack, *Impact of Plague*, 210.

afflicted would go to either recover or die.¹³⁰ Those that were healthy when confined to a house or pesthouse often contracted the disease during quarantine, though there is evidence that pesthouses tried to keep the ill separate from the exposed.¹³¹ Given the high mortality rates in pesthouses, however, it was practically a death sentence.¹³²

While mandated quarantine was portrayed throughout government publications as a policy of public health, it was perceived by the public as a punishment and, as Newman shows, quarantine was not always used as an egalitarian means of maintaining public health.¹³³ Some saw quarantine as “uncharitable, cruel, and an inversion of traditional values” due to the government’s criminalization of the act of visiting the sick and disruption of “conventional patterns of kinship and neighborliness.”¹³⁴ After all, “in an age when illness and death took place at home, suffering cemented relationships between people.”¹³⁵ The ability to provide social support to the sick, and the expectation of receiving social support when sick, were derailed by this policy.

Others viewed quarantine as a punishment because it unintentionally harmed the middle class; the wealthy had left the city and the poor were supported by parishes, but quarantining the middle class caused them a financial burden.¹³⁶ Finally, quarantine could have been viewed as a punishment because that is what it sometimes was; those who did not follow plague laws could be locked in a house with the infected as punishment for their actions.¹³⁷ Overall, the main component of seventeenth-century plague policy was isolation, and while it undoubtedly helped stop the spread of disease, it was not always appreciated.

2.3.2 1603 Epidemic

Among the tumultuous landscape of seventeenth-century England, policies surrounding public health continued to evolve. Moreover, within the changing political landscapes, and with each new monarch or governing body, plague policy evolved in

¹³⁰ Ian Mortimer, *The Dying and the Doctors: The Medical Revolution in Seventeenth-Century England* (Woodbridge, UK: Royal Historical Society, 2009), 197.

¹³¹ Newman, “Bubonic Plague and Quarantine,” 813.

¹³² Beier, *Sufferers & Healers*, 252.

¹³³ Newman, “Bubonic Plague and Quarantine,” 826–29.

¹³⁴ Newman, 824.

¹³⁵ Beier, *Sufferers & Healers*, 248.

¹³⁶ Newman, “Bubonic Plague and Quarantine,” 826–27.

¹³⁷ Newman, 827–28.

different ways. After the death of Queen Elizabeth I in 1603, King James VI of Scotland swiftly ascended the throne, becoming King James I of England. This ended the Tudor reign and began the Stuart reign. This accession occurred largely without incident, in what one historian describes as “one of the most impressive and successfully managed operations of government yet achieved by the Elizabethan regime.”¹³⁸ This success is partially attributed to excellent communication derived from the use of proclamations.¹³⁹ This accession also coincided with a major outbreak of plague, however. The subsequent restrictions surrounding coronation celebrations and the limited access to the new king lessened the peoples’ confidence in his authority.¹⁴⁰ Furthermore, upon his accession James I immediately faced demands for religious reform from Puritans and, while he was a Protestant, James believed in his divine right to the throne and would not agree to reforms that would limit his power.¹⁴¹

It was also during the 1603 epidemic that the first series of weekly bills listing mortality figures were printed in London with support from royal and municipal authorities.¹⁴² Such bills were printed quickly and frequently in large quantities, and they were sold for a penny, making them a profitable endeavour.¹⁴³ While difficult to gauge the impact of these bills outside of London, they did reach rural communities, though they were probably disseminated haphazardly.¹⁴⁴ It has also been suggested that they were distributed in the country to discourage citizens who were thinking about moving to London.¹⁴⁵ Throughout the century, Bills of Mortality became common publications during plague outbreaks in London. When received by other parishes, the Bills of Mortality could also help officials monitor the situation and prepare for the potential arrival of the plague.¹⁴⁶ Reverend Ralph Josselin, for example, would go on to record figures from the London Bills of Mortality weekly during the 1665 outbreak, as, despite

¹³⁸ Kyle, “Monarch and Marketplace,” 774.

¹³⁹ Kyle, 774.

¹⁴⁰ Slack, *Impact of Plague*, 18–19.

¹⁴¹ G. E. Aylmer, *A Short History of Seventeenth-Century England* (New York: New American Library of World Literature, 1963), 22; Prall, *Church and State*, 101–4.

¹⁴² Greenberg, “Plague, the Printing Press,” 512–13.

¹⁴³ Greenberg, 510–13.

¹⁴⁴ Greenberg, 510.

¹⁴⁵ Greenberg, 526.

¹⁴⁶ Newman, “Bubonic Plague and Quarantine,” 819.

living in Earls Colne, Essex, where the plague was not a frequent visitor, he was terrified of its potential arrival.¹⁴⁷

While Bills of Mortality conveyed the death toll of the epidemic, plague orders and royal proclamations were used to communicate the emerging policies created to lessen the death tolls. Furthermore, in 1604, the plague orders originally created under Queen Elizabeth I, gained statutory support. The Plague Act supplemented the orders with penal sanctions. It gave watchmen the authority to use violence to keep people in isolation and it stated that anyone with plague sores found outside around others could be hanged, and anyone else found outside could be whipped as a “vagrant rogue.”¹⁴⁸ Such orders, now allowed to be enforced with violence, were reissued periodically by different monarchs throughout the seventeenth century. Violence, however, was the least efficient means of ensuring obedience and the state therefore relied heavily on good communication to maintain stability.¹⁴⁹ As Slack notes, “the death penalty was a deterrent rather than a reality.”¹⁵⁰ Proclamations, therefore, were used to frequently convey new information to the public. More than just documents, they were “carefully crafted utterances that would be reiterated in ceremonial, ritual, and performative contexts up and down the land.”¹⁵¹ Proclamations and plague orders were widely disseminated and the print revolution, as Peacey notes, “ensured that politics was experienced in unprecedented ways even by humble citizens.”¹⁵²

While seventeenth-century politics were characterized by a battle between monarch and Parliament, religion remained central to these disputes since the monarch, as deemed by the 1534 Act of Supremacy, was considered the Supreme Head of the Church of England. Issues surrounding Puritan reforms were among the first disagreements between the king and Parliament, but they were certainly not the last.¹⁵³ James’ extravagant spending, increasing revenues and customs duties without the consent of Parliament, and selling titles for a profit continued to lose him favour with the people as

¹⁴⁷ Beier, *Sufferers & Healers*, 207.

¹⁴⁸ Slack, *Impact of Plague*, 211.

¹⁴⁹ Kyle, “Monarch and Marketplace,” 774.

¹⁵⁰ Slack, *Impact of Plague*, 212.

¹⁵¹ Kyle, “Monarch and Marketplace,” 774.

¹⁵² Peacey, *Print and Public Politics*, 58.

¹⁵³ Prall, *Church and State*, 105.

well as Parliament.¹⁵⁴ It was during his reign, however, that the plague orders gained legal support, which solidified the presence of epidemic management policy for the remainder of the century. The process of isolating and financially supporting the sick became permanent policies in government by 1610 in towns and by 1625 in most counties.¹⁵⁵ Indeed, advances in plague policy under Elizabeth I and James I prepared the country for the next major epidemic which occurred in 1625, the same year as James' death.

2.3.3 1625 & 1636 Epidemics

Upon his death, James' son Charles took the throne and was immediately faced with an increasingly worsening epidemic. This outbreak halted London's trade for a season and "left great confusion and impoverishment behind it."¹⁵⁶ Furthermore, everyone was terrified. In 1625, Alderman Cockayne was told that "no one wanted to buy anything in London" anymore.¹⁵⁷ No one needed encouragement to stay out of the city as it was known to be both a dirty place rife with disease, and a sinful place worthy of divine punishment. Most who had the means fled to the country and as in the previous epidemic, "the magistrates, the ministers, the doctors, and the rich men seem to have left the city to take care of itself."¹⁵⁸ Fear kept the wealthy in their country homes while the poor suffered in London. Moreover, while King Charles I had no better relationship with Parliament than his father did, at the height of the epidemic he married a French Roman Catholic princess, straining his relationship with the public as well. Years later, after dissolving his third Parliament, Charles began his Personal Rule, a period during which he went eleven years before reconvening Parliament. This period is also known as the Eleven Years' Tyranny, and to survive financially without the support of Parliament, Charles uncovered ancient feudal precedents to collect money from the people through various taxes and capital levies.¹⁵⁹ This gained him no more favour with the public. It was during this time, in 1636, that the country experienced their third major epidemic of the century, though it was the least deadly of the four.

¹⁵⁴ Aylmer, *Seventeenth-Century England*, 34–41; Prall, *Church and State*, 120–21.

¹⁵⁵ Slack, *Impact of Plague*, 200.

¹⁵⁶ Creighton, *History of Epidemics*, 1:511.

¹⁵⁷ Slack, *Impact of Plague*, 189.

¹⁵⁸ Creighton, *History of Epidemics*, 1:514.

¹⁵⁹ Aylmer, *Seventeenth-Century England*, 89–90.

Records from the Privy Council during this time show that they were frequently concerned with the outbreak, its spread, and methods to contain it, though these concerns were interspersed with economic, social, and foreign affairs as well.¹⁶⁰ Moreover, throughout the epidemic Charles did attempt to maintain social order. While fleeing to the country was a trend throughout all seventeenth-century epidemics, in 1636, Charles prohibited the Bishop of Carlisle from leaving his diocese because he believed it unreasonable for someone so important to desert his people at such a time.¹⁶¹ The year 1636, however, also saw the revival of a dispute which arose during the last epidemic concerning plague fasts. Charles was concerned that such long services could foster Puritan enthusiasm as well as spread the infection and as such, banned the Wednesday fasts against the plague in London in 1625, and shortened the sermons of all plague-stricken towns in 1636.¹⁶² “Attitudes were polarised both on the religious issue and on its medical consequences.”¹⁶³

Later, religious disputes led to a brief war with Scotland, after which Charles was desperate for money. He reconvened Parliament to ask for funds in what is known as the Short Parliament, as they did not provide him with funds, and he quickly disbanded it once again. Charles was later forced to abandon efforts to impose religious reform in Scotland and called Parliament once again in what is known as the Long Parliament.¹⁶⁴ Parliament wasted no time in implementing governmental reforms but did not provide the king with the money that he sought and, soon enough, Charles feared for his life and fled.¹⁶⁵ Civil war was upon them, and both Parliament and monarch began raising an army.

2.3.4 The English Civil War & the Interregnum

During the English Civil War, the average citizen likely supported the king, as did the aristocrats, Anglican clergy, and the gentry from the north and west.¹⁶⁶ These were known as Royalists. The gentry from the east and the south as well as most Puritans

¹⁶⁰ Newman, “Bubonic Plague and Quarantine,” 812.

¹⁶¹ Slack, *Impact of Plague*, 303.

¹⁶² Slack, 237.

¹⁶³ Slack, 237.

¹⁶⁴ Prall, *Church and State*, 123.

¹⁶⁵ Prall, 123–24.

¹⁶⁶ Prall, 125.

supported Parliament and were known as Parliamentarians.¹⁶⁷ Depending on which side one supported, citizens could blame the plague on the sins of the other.¹⁶⁸ In fact, as Slack puts it, epidemics were frequently used as sticks with which to beat one's political and religious opponents.¹⁶⁹ Moreover, while no major epidemics came from the war, it was known to spread the plague as soldiers kept close quarters and regularly moved from town to town.¹⁷⁰

In 1646 the Parliamentarians captured the king. While imprisoned, however, he made a deal with the Scots who promised to help him overthrow Parliament if he applied the Presbyterian structure to English churches.¹⁷¹ After the king's escape, the war briefly resumed though he was ultimately defeated. In 1649 the monarchy and House of Lords were abolished, and the king executed.¹⁷² Legal justification for the execution was weak; it was essentially a political decision intended to "prove that kings were accountable to their subjects."¹⁷³ Oliver Cromwell and his officers wrote up a constitution to replace the Nominated Parliament called the Instrument of Government of 1653 which made Cromwell Lord Protector of the British Isles.¹⁷⁴ Cromwell faced opposition from left-wing radicals as well as former Royalists and Anglicans, and talks of rebellion and assassination led to him dividing England into twelve districts in 1655, each with their own major-general, with the purpose of eradicating dissent.¹⁷⁵ Many arrests were made, and attempts to avoid seditious assemblies led to the prohibition of many recreational events.¹⁷⁶ As Trevelyan writes:

Rogues and jolly companions; wandering minstrels, bear-wards, and Tom Goodfellows; tipsy loquacious veterans, babbling of Rupert and Goring; and the broken regiments of stage-players whose occupation was now gone; all the nondescript population that lived on society in olden times and repaid it in full by making it merry England, were swept up before the military censors, and if they

¹⁶⁷ Prall, 125.

¹⁶⁸ Slack, *Impact of Plague*, 26.

¹⁶⁹ Slack, 247.

¹⁷⁰ Slack, 72–73.

¹⁷¹ Prall, *Church and State*, 131.

¹⁷² Prall, 131.

¹⁷³ Aylmer, *Seventeenth-Century England*, 147.

¹⁷⁴ Prall, *Church and State*, 132.

¹⁷⁵ Trevelyan, *England Under the Stuarts*, 294; Prall, *Church and State*, 135.

¹⁷⁶ Trevelyan, *England Under the Stuarts*, 294.

failed to show their respectability and means of livelihood, were sent to prison or to banishment. These proceedings were not only unjust but illegal.¹⁷⁷

While many would have accepted major-generals with the sole purpose of stamping out dissent, they could not accept the banning of activities and the moral enforcement persecuting drinking, swearing, and sabbath-breaking.¹⁷⁸ In a country frequented by plague, many citizens relied on the vices that the major-generals were taking from them. Civil-military tensions were reinforced, and the actions of some major-generals were viewed by the public as “repressive puritanism,” fostering a lasting dislike of Puritan extremism.¹⁷⁹ These major-generals were removed in 1657, after less than two years in place, due to the public outcry at what some called Cromwell’s “military dictatorship.”¹⁸⁰ Oliver Cromwell died in 1658 and was succeeded by his politically inept son, Richard, who lasted less than a year in the position. What followed was bedlam and, to avoid military rule, many came around to the idea of restoring the monarchy.¹⁸¹ Charles II, son of the deceased King Charles I, was subsequently recalled from the Continent, where he had fled after his fathers’ defeat, to rule England under constitutional monarchy.¹⁸²

2.3.5 The Great Plague of London, 1665

The Restoration of the monarchy took place in 1660 when Charles II took the throne. Before arriving in England Charles issued a declaration calling for tolerance and absolving citizens of their crimes against the monarchy unless named by Parliament.¹⁸³ He seems to have been the only one seeking tolerance, however, and Charles was not on the same page as Parliament or the Church of England.¹⁸⁴ Charles reluctantly restored Anglicanism as the only acceptable religion in the country and persecuted non-conformists under the pressure of Parliament.¹⁸⁵ On two occasions Charles issued a

¹⁷⁷ Trevelyan, 294.

¹⁷⁸ Austin Woolrych, “The Cromwellian Protectorate: A Military Dictatorship?,” *History* 75, no. 244 (1990): 221, <https://doi.org/10.1111/j.1468-229X.1990.tb01515.x>.

¹⁷⁹ Aylmer, *Seventeenth-Century England*, 157–58.

¹⁸⁰ Prall, *Church and State*, 135.

¹⁸¹ Aylmer, *Seventeenth-Century England*, 161–64.

¹⁸² Prall, *Church and State*, 136.

¹⁸³ Prall, 137.

¹⁸⁴ Prall, 138.

¹⁸⁵ Prall, 138–39.

Declaration of Indulgence which would grant some freedoms to religious non-conformists, but Parliament would not accept it.¹⁸⁶

Despite the increasing discrimination towards religious non-conformists, the 1660s popularised irreligion, theatregoing, a different style of humour, and “looser sexual morality.”¹⁸⁷ In 1665 England was struck with the country’s last major outbreak of plague and such trends could easily catch the blame. As Slack notes:

Plague was a divine scourge, a retribution for the sins of mankind: sometimes for sins in general, more often for the specific misdeeds of the time or place of an epidemic. It was God’s punishment for new-fangled women’s fashions, for swearing and drunkenness, for heresy or atheism, for Protestantism or Catholicism, depending on which side you were on.¹⁸⁸

This outbreak was so devastating that it became known as the Great Plague of London, and the weekly bills were compiled and sold under the name *London’s Dreadful Visitation*.¹⁸⁹ The epidemic was also met with “unprecedented levels of textual response” from the political, religious, and medical sectors.¹⁹⁰ While the king left London for the bulk of the epidemic, he failed to escape calamity as his return in 1666 was met with the Great Fire of London. The fire burned for nearly five days and destroyed over thirteen thousand houses and eighty-four churches.¹⁹¹

While this last epidemic did not have a much higher death toll than some other outbreaks in London, “it struck the imagination more, for it came in an age of greater civilization, comfort, and security, when such calamities were less remembered and less expected, and it was followed close, as though at the Divine command, by another catastrophe to which there was no parallel in the most ancient records of London.”¹⁹² The combination of catastrophes was alarming to say the least and took its toll on public morale. The epidemic was the deadliest of the century and the fire, while less damaging, “was more spectacular, and it left its mark on the City for at least another twenty

¹⁸⁶ Prall, 139.

¹⁸⁷ Aylmer, *Seventeenth-Century England*, 182.

¹⁸⁸ Slack, “Responses to Plague,” 436.

¹⁸⁹ Greenberg, “Plague, the Printing Press,” 512.

¹⁹⁰ Kathleen Miller, *The Literary Culture of Plague in Early Modern England* (London: Palgrave Macmillan, 2017), 1.

¹⁹¹ Jack Gilpin, “God’s Terrible Voice: Liturgical Response to the Great Fire of London,” *Anglican and Episcopal History* 82, no. 3 (September 2013): 319.

¹⁹² Trevelyan, *England Under the Stuarts*, 344.

years.”¹⁹³ While it was likely an accident, most viewed the fire as a product of God’s wrath, yet somehow still blamed it on either the French¹⁹⁴ or the Jesuits¹⁹⁵ due to their links to Catholicism.

Not knowing that this was the last outbreak of plague that the country would see, the plague orders, having being reprinted with few changes from the original in 1578, were revised.¹⁹⁶ Reflecting on quarantine practices, specifically the difficulty of enforcement and its failure in preventing the spread of plague, the primary revision stated that every town was to build a pesthouse and that the sick were to be moved either to a pesthouse or shed of some kind so that they would not infect the rest of the family during their isolation.¹⁹⁷ Of course, these orders came too late for most citizens as plague in England died out completely soon after the revisions.

2.4 RELIGION

Religion played an extremely important role in seventeenth-century English society. When faced with plague, prayer was often peoples’ first response. The idea that diseases were inflicted upon humans by God was pervasive, and the concepts of sin, punishment, and repentance were familiar to all. Religion also remained a complicated matter, however, contributing to much of the conflict which arose during the seventeenth century. Until the sixteenth century, the English church was Catholic. After the Reformation, however, the church adopted Protestantism and soon formed the new branch of Anglicanism. It was further declared that the English monarch was now the Supreme Head of the Church of England, inextricably linking politics and religion. Like plague policy, therefore, religious toleration and religious plague directives varied from monarch to monarch.

2.4.1 Magic & Mysticism

When the Black Death reached England in the fourteenth century there was little medical information available to the public and people turned to religion for answers.

¹⁹³ J. P. Kenyon, *Stuart England* (London: Allen Lane, 1978), 201.

¹⁹⁴ Trevelyan, *England Under the Stuarts*, 346.

¹⁹⁵ Aylmer, *Seventeenth-Century England*, 183.

¹⁹⁶ Slack, *Impact of Plague*, 209.

¹⁹⁷ Slack, 223.

When the Catholic Church failed to provide an adequate explanation for the plague many subsequently sought answers in mysticism, superstition, and paganism instead of or in addition to Catholicism.¹⁹⁸ While there is no evidence of religious hysteria in England following the Black Death, there was a crisis of confidence in the church and a general atmosphere of pessimism and resignation.¹⁹⁹ It is estimated, after all, that the initial bout of the Black Death killed the priest who ministered to the people in nine out of twenty English parishes.²⁰⁰ This crisis of confidence along with developments in popular religion led to the continued evolution of the church throughout the remainder of the fourteenth and fifteenth centuries.²⁰¹ Following the Black Death, the English church made efforts to eliminate moral and financial abuses in monastic communities, and by the late fifteenth century, the church had recovered its reputation and provided citizens with a “vibrant faith which satisfied all levels of society,” despite recurring bouts of plague.²⁰² Confidence in the church increased and a reliance on mystical explanations for the plague subsequently waned.

The idea that witchcraft, magic, or the Devil could cause illness, however, persisted into the sixteenth and seventeenth centuries. A healer by the name of Richard Napier, for example, diagnosed and treated many patients for bewitchment in the late sixteenth and early seventeenth centuries.²⁰³ Such supernatural beliefs were brought to the forefront during instances of plague. While the seventeenth century saw a rise in skepticism surrounding magic, the disease itself was so extraordinary that “it was an obvious invitation to people of all social backgrounds who believed or half-believed in occult forces, charms, omens and portents.”²⁰⁴ Furthermore, a dominant fear in the minds of devout Protestants throughout the seventeenth century was of irreligious thoughts

¹⁹⁸ Laurie Garrett, “The Black Death,” *HIV and National Security: Where Are the Links?* (Council on Foreign Relations, 2005), 18, <https://www.jstor.org/stable/resrep05754.7>.

¹⁹⁹ Christopher Harper-Bill, “The English Church and English Religion After the Black Death,” in *The Black Death in England*, ed. Mark Ormrod and Phillip Lindley (Stamford, UK: Paul Watkins, 1996), 107, 122.

²⁰⁰ Harper-Bill, 86.

²⁰¹ Harper-Bill, 80.

²⁰² Harper-Bill, 122.

²⁰³ Ofer Hadass, *Medicine, Religion, and Magic in Early Stuart England: Richard Napier’s Medical Practice* (University Park: The Pennsylvania State University Press, 2018), 1–213.

²⁰⁴ Slack, *Impact of Plague*, 34.

penetrating the mind.²⁰⁵ Throughout the century it was considered a religious obligation for the devout to control their minds and cast out impure thoughts, and clergy published a number of texts intended to teach people how to do so.²⁰⁶ There existed also, however, a widely held belief that the Devil could insert thoughts directly into the human mind.²⁰⁷ In 1544, for example, a plague victim stabbed himself in the chest and his suicide was attributed to the Devil's influence over him.²⁰⁸ Throughout instances of plague in England, however, there existed no mass hysteria surrounding such mystical beliefs. "There was no hysterical hunt for scapegoats, no terror of plague sowers, [and] no rumour that plague had been deliberately caused by witches or other agents of the devil."²⁰⁹ Still, "seventeenth-century witchcraft accusations connected to personal illness were extremely frequent," and this did not exclude cases of plague.²¹⁰ Regardless of advances in medicine and increased skepticism concerning supernatural forces, the idea that evil beget illness persisted throughout the seventeenth century.

2.4.2 Divine Punishment

While specific occurrences of plague could be attributed to the Devil, for the most part the plague was attributed to God. Throughout the three hundred years that plague ravaged England it was widely believed that the disease was divine punishment for human sin. In examining literature from the fourteenth century, Grigsby finds that authors attributed the plague to God's punishment of people's pride, taking of false oaths, gluttony, blasphemy, or cursing.²¹¹ Grigsby also notes that the idea of a "widely dispersed divine punishment for individual human sin" was a new concept in this society, and led to writers attributing the cause of the plague to sins that nearly everybody was guilty of, likely contributing to the fear surrounding the illness.²¹² While other diseases, such as

²⁰⁵ D. Strausfeld, "Tormented by Sinful Thoughts in Seventeenth-Century England," *Mental Health, Religion & Culture* 24, no. 7 (2021): 1, <https://doi.org/10.1080/13674676.2021.1915264>.

²⁰⁶ Strausfeld, 1.

²⁰⁷ Darren Oldridge, "Demons of the Mind: Satanic Thoughts in Seventeenth-Century England," *The Seventeenth Century* 35, no. 3 (May 3, 2020): 277–92, <https://doi.org/10.1080/0268117X.2019.1603119>.

²⁰⁸ Slack, *Impact of Plague*, 21.

²⁰⁹ Slack, 294.

²¹⁰ Hadass, *Richard Napier's Medical Practice*, 1.

²¹¹ Grigsby, *Pestilence*, 101–23.

²¹² Grigsby, 123.

leprosy, were still blamed on individual sin, epidemic diseases such as plague were seen as “a sign of a massive moral failing.”²¹³

As plague persisted throughout the years and became a common experience, individuals began to take responsibility for keeping themselves healthy.²¹⁴ While individuals became more responsible for their own health, however, the concept of collective punishment for collective sin persisted through to the seventeenth century. Throughout the century, “the belief that God sent diseases in order to punish or educate human beings was pervasive” and plague was considered to be God’s “most universally recognized weapon.”²¹⁵ When it came to the plague, even if one could repent adequately, it was believed that the lack of repentance from others could still result in one’s own death.²¹⁶ Reverend Ralph Josselin, for example, was particularly terrified of the plague as he believed that the only way to fight collective punishment was collective repentance, something that he believed his town to be failing at.²¹⁷ Furthermore, compared to other diseases, the clergy reacted particularly strongly to instances of plague, “seeing it as one of the greatest manifestations of God’s power.”²¹⁸ These views led to much of the clergy fleeing their plague-ridden cities and villages and leaving citizens to face their mortality alone. Citizens of seventeenth-century England, however, were not unused to dealing with illness. In fact, there existed a “religious and social duty” to visit the sick which made citizens quite well acquainted with illness, death, and the idea of their own mortality.²¹⁹ Divine punishment existed outside of this purview, however, and as the clergy were not fulfilling their religious duty, the unexpected lack of spiritual guidance could be devastating to the remainder of the population.

2.4.3 The English Reformation

The sixteenth century saw further disruptions with the English Reformation. Initiated by Pope Clement VII’s refusal to annul one of Henry VIII’s marriages, the Church of England broke away from the Roman Catholic Church. While initially a

²¹³ Grigsby, 35.

²¹⁴ Grigsby, 124.

²¹⁵ Beier, *Sufferers & Healers*, 156.

²¹⁶ Beier, 205.

²¹⁷ Beier, 159.

²¹⁸ Wear, *Knowledge and Practice*, 277.

²¹⁹ Beier, *Sufferers & Healers*, 5.

political move, the Protestant Reformation sweeping the Continent led to a shift in theology as well. In 1534 the Act of Supremacy declared the monarch the Supreme Head of the Church of England, and Protestant reforms later took place creating the Anglican Church to take the place of the Catholic Church in English society. This Reformation inflicted many changes on the way society viewed and treated the plague. It led to the further removal of certain Catholic protections against plague such as public processions, though prayer, church attendance, and regular fasting remained encouraged.²²⁰

One significant debate of seventeenth-century England arose from conflicting Catholic and Protestant beliefs. The debate revolved around whether one ought to submit to their instincts to avoid pain, or “whether the fight to overcome pain is part of the good person’s struggle to subdue the flesh and tame one’s inner nature.”²²¹ The Catholic Church “had inherited and perpetuated medieval traditions of penance and mortification” and Catholic suffering was therefore “written . . . into the flesh.”²²² During the Black Death in particular, Catholicism led to the Flagellant Movement in which participants would mortify their flesh as a form of repentance intended to appease God’s wrath. While this process was still known in the seventeenth century, it was uncommon in England’s reactions to plague, likely due to the alternative Protestant view of suffering.

While Catholicism viewed suffering as a necessity to be embraced, Protestantism viewed it as something to avoid when possible. Protestant suffering was rooted either in “psychological angst” or persecution, and suffering was viewed as inevitable but righteous, something to avoid if possible and something to appreciate if unavoidable.²²³ Prominent seventeenth-century reactions to the suffering caused by the plague were to incorporate prayer and medicine to prevent and treat instances of plague in an effort to avoid suffering, and failing that, to embrace the suffering. A person’s recovery from the disease may be celebrated, for example, but the deaths of good people were also seen as blessings because they were freed from a difficult life and taken to heaven.²²⁴ Plague

²²⁰ Slack, *Impact of Plague*, 37.

²²¹ John R. Yamamoto-Wilson, *Pain, Pleasure and Perversity: Discourses of Suffering in Seventeenth-Century England* (London: Routledge, 2016), 22.

²²² Yamamoto-Wilson, 26.

²²³ Yamamoto-Wilson, 26, 34.

²²⁴ Slack, *Impact of Plague*, 39.

outbreaks which followed the Reformation were faced with more Protestant leaning views which focused more on avoiding pain than embracing it.

2.4.4 Religious Reform

The seventeenth century also saw many religious reforms. Nearing the end of the sixteenth century a new religious reform movement appeared in the form of Puritanism. Puritanism was founded during the reign of Queen Elizabeth I (1558–1603) and sought to rid the Church of England of the Catholic elements which remained following the Protestant Reformation. Queen Elizabeth's successor, King James I, reacted negatively to Puritan demands for religious reform and turned a "moderate desire for reform into an opposition party that ultimately would seek the overthrow of the church."²²⁵ The Puritan movement is also often associated with the English Civil War of 1642–51. The war led to churches being attacked and their property seized, and by 1645 the Church of England, for all intents and purposes, was gone.²²⁶ In addition to property damage, Anglican clergy faced many forms of abuse, including being sent to the cane fields of the Caribbean.²²⁷ The religious aspects of the war also had many effects on the population's responses to the plague. As Slack states, this surge of "Puritan enthusiasm and millenarian expectations which came with revolution and civil war . . . produced a temporary revival of providential interpretations of calamities."²²⁸ With regards to the plague, this caused several changes including an increase in fasts and public humiliations, the publication of special prayers dedicated to repentance, blame directed at the opposing political party and heightened anxiety when the plague struck one's allies rather than enemies, attacks on new women's fashions, and the criticism of those not attending church due to the disease.²²⁹

More religious reforms took place during the Interregnum and the Restoration. In 1653, the same Instrument of Government that made Oliver Cromwell Lord Protector of the British Isles provided religious toleration for all Christian denominations except for Roman Catholicism and Anglicanism, despite the majority of the population being

²²⁵ Prall, *Church and State*, 104.

²²⁶ Prall, 127.

²²⁷ Prall, 138.

²²⁸ Slack, *Impact of Plague*, 243.

²²⁹ Slack, 243.

Anglican.²³⁰ The new religious order was not all that the people had hoped and “many people found that the Puritan dream of a more highly educated clergy had wrought no improvement, which led to a general attack on religious learning.”²³¹ During the five years following the Restoration there would be a religious settlement called the Clarendon Code, a series of laws persecuting non-conformists. While King Charles II did not agree with the principles, being pro-Catholic himself, he signed each one into law making Anglicanism the only acceptable religion in the country again and restricting the freedoms of non-conformists, including not allowing them to work for the government.²³² As Prall notes, like the reign of King James I, the reign of Charles II viewed the Church of England as “a narrowly conceived structure with a precise core of doctrines and a uniformly enforced system of rituals that outlawed any and all opposition within or without its ranks.”²³³

2.4.5 Publications

The religious shifts which took place throughout the seventeenth century contributed a great deal to the religious publications concerned with plague. Towards the end of the sixteenth century, there was an increase in published religious tracts and sermons concerning the illness.²³⁴ When the plague reached London in 1563, for example, the press was used to disseminate information including “special forms of prayer against plague, and printed instructions from the bishop to be read in churches, exhorting the sick to separate themselves from the healthy.”²³⁵ These publications continued to be printed regularly throughout the seventeenth century and publications from one denomination sometimes criticized the actions of the others or blamed them for the plague. A non-conformist might blame God’s wrath on the government’s persecution of non-conformists whereas an Anglican may blame God’s wrath on the existence of non-conformists. According to several writers of the time, some of those who were to blame

²³⁰ Prall, *Church and State*, 132–33.

²³¹ Prall, 135.

²³² Prall, 138–39.

²³³ Prall, 104.

²³⁴ Slack, *Impact of Plague*, 23–24.

²³⁵ Slack, 208.

for the plague included “the persecutors of the godly, the friends of Popery and Antichrist, and the perpetrators of the Clarendon Code.”²³⁶

On the other hand, while there existed both secular and religious approaches to illness throughout these publications, they were not exclusive of each other.²³⁷ Beier notes that the religious approach can be seen in the “literature of moral medicine” which were works intended for the entertainment and instruction of laymen.²³⁸ One such publication is Bishop Lancelot Andrewes’s *A Sermon for the Pestilence* which acknowledged the role of physicians but argued that assuaging the wrath of God would be the only path to success.²³⁹ Another, primarily secular writer believed that one must begin to treat an illness with prayer before medical treatments, or else the medical treatments may not work.²⁴⁰ There never existed a true dichotomy between religious and secular texts as they all included similar elements and simply placed emphasis on different components. Many secular medical tracts, for instance, reference religious elements as “a final caveat or an introductory formality,” whereas devotional works focussed largely on providence itself.²⁴¹

2.5 MEDICINE

While religion permeated seventeenth-century society, medical knowledge surrounding plague did the same. Medical explanations for the plague did not replace the religious ones, however, they complemented them. When the Black Death reached England in the fourteenth century there was no available medical explanation for the illness and the discourse surrounding the disease was therefore largely speculative and religious, based in faith rather than fact. The primary explanation for the plague was divine punishment, though it was not the only one. While many on the Continent accused Jews of poisoning wells, Jews had been expelled from England in 1290 and such accusations were therefore nonexistent in England.²⁴² Other explanations pointed to bad air or the alignment of the planets. By the seventeenth century, however, there existed

²³⁶ Slack, 247.

²³⁷ Beier, *Sufferers & Healers*, 154.

²³⁸ Beier, 155.

²³⁹ Beier, 155.

²⁴⁰ Beier, 156.

²⁴¹ Slack, *Impact of Plague*, 38.

²⁴² Harper-Bill, “English Church,” 107.

several scientific theories surrounding the origins and nature of plague. Potential causes and remedies were subsequently widely discussed, and medical texts intended for laymen were widely circulated, complementing similar religious texts.

2.5.1 Medical Knowledge

The seventeenth century in England is widely considered to be a revolutionary period for medicine. The circulation of blood was discovered by William Harvey, for example, and in the face of the theoretical focus of university educated physicians, Thomas Sydenham, known as ‘The English Hippocrates,’ endorsed a return to empirical observation.²⁴³ Different knowledge systems also gained popularity during this time. Chemical remedies became more common, alchemy and astrology gained prominence, and certain magical traditions were brought back, widening the range of methods of healing available to practitioners.²⁴⁴ There was also a significant increase in the volume of metal-based medicines being imported into England, which provided a larger selection of medicines for ailing families to choose from.²⁴⁵

As Beier shows, however, the seventeenth century was more revolutionary for the practitioners and the general field of medicine than it was for individuals suffering from illness.²⁴⁶ In fact, there existed a culture of self-help and for the most part the ill in seventeenth-century England treated themselves or were treated by other laymen.²⁴⁷ In cases of plague, therefore, those who did not or could not see nurses or physicians could consult with relatives and neighbours and use their own knowledge to procure specific remedies from apothecaries or elsewhere.

In the centuries after the Black Death, plague tracts, medical publications about the disease often in the form of small pamphlets, became popular. They gave directions either to other physicians or to the general public recommending or condemning certain practices, they provided suggested treatments for the afflicted, and they often theorized

²⁴³ Beier, *Sufferers & Healers*, 7; Lester S. King, “Empiricism and Rationalism in the Works of Thomas Sydenham,” *Bulletin of the History of Medicine* 44, no. 1 (January 1, 1970): 1.

²⁴⁴ Hadass, *Richard Napier’s Medical Practice*, 3.

²⁴⁵ Mortimer, *Dying and the Doctors*, 207.

²⁴⁶ Beier, *Sufferers & Healers*, 7.

²⁴⁷ Beier, 4; Moote and Moote, *Great Plague*, 96.

about the origins of the plague.²⁴⁸ The first printed medical tract was published in 1486 and was about the plague.²⁴⁹ The frequency of similar publications increased greatly towards the end of the sixteenth century.²⁵⁰ Throughout the seventeenth century, medical texts written in the vernacular became widely available²⁵¹ and by the end of the century it was common for medical pamphlets and broadsides to include cures in their texts.²⁵² Medical publications drew largely on other authors, however, and the plague literature of the seventeenth century drew much from the plague literature of the past three centuries; as Slack notes, “there was little that was novel in theoretical approaches to epidemic disease until the work of Sydenham and his contemporaries after 1650.”²⁵³

Regardless, citizens of England in the seventeenth century received their medical information from a variety of sources, including books, pamphlets, neighbours, friends, relatives, personal experience, apothecaries, and physicians.²⁵⁴ Furthermore, throughout the seventeenth century there existed a genre of medical book which was directed at women, and created a “self-diagnostic trend of ‘every-housewife-her-own-physician.’”²⁵⁵ Such publications supported the notion that all women were some type of healer as well as the idea that women ought to treat ailing family and friends. Overall, there were many medical books in circulation which were intended for the layman, and in the case of the plague, “the popular medicines were as well known as the disease.”²⁵⁶ While rural areas had worse access to texts than cities did, the significance of the plague to the entire country would have assured better circulation than otherwise expected. Combined with bridges to the literate world for the illiterate and semi-literate, and the spreading of knowledge via word-of-mouth and the sharing of texts, medical plague publications would have had a wide audience.

²⁴⁸ Singer, “Some Plague Tractates,” 160.

²⁴⁹ Slack, *Impact of Plague*, 23.

²⁵⁰ Slack, 23.

²⁵¹ Jonathan Barry, “Educating Physicians in Seventeenth-Century England,” *Science in Context* 32, no. 2 (2019): 138, <https://doi.org/doi:10.1017/S0269889719000188>.

²⁵² Lauren Kassell, “Casebooks in Early Modern England: Medicine, Astrology, and Written Records,” *Bulletin of the History of Medicine* 88, no. 4 (2014): 623, <https://www.jstor.org/stable/26308958>.

²⁵³ Slack, *Impact of Plague*, 24.

²⁵⁴ Anne Stobart, *Household Medicine in Seventeenth-Century England* (London: Bloomsbury, 2016), 1–290.

²⁵⁵ Mortimer, *Dying and the Doctors*, 81.

²⁵⁶ Mortimer, 78.

2.5.2 Medical Revolution

Wallis notes that during early modern plague epidemics, religious and political efforts to suppress the plague were more significant than medical efforts.²⁵⁷ While true, the seventeenth-century medical revolution did contribute to an increase in medical efforts responding to the disease. While many households throughout seventeenth-century England relied on homemade remedies to treat their ailments, the medical revolution also popularized seeking medical help from professionals.²⁵⁸ There was a significant increase in the availability of medical services and there was a subsequent increase in the number of dying people receiving medical care or medication towards the end of their lives.²⁵⁹ These changes also coincided with the declining reliance on prayer as a response to illness.²⁶⁰

While in 1600 religious strategies were likely the only recourse for many who were dying, by 1700 the majority of those dying sought out medical help.²⁶¹ This does not signify diminishing faith, however, and Wear notes that “Christianity was from its beginning a healing religion.”²⁶² Furthermore, it was believed that God was the primary cause of the plague but that he worked through secondary, natural means,²⁶³ therefore, “medicine was never fully isolated from religion.”²⁶⁴ In fact, Wear believes that “Christianity gave medicine permission to exist” by incorporating physical healing into spiritual healing.²⁶⁵ Additionally, Mortimer notes that religion may have actually encouraged the medical revolution. Medicine, after all, was created by God just as the plague was.²⁶⁶ Religion, therefore, may have been part of the reason that new medical treatments were so quickly adopted in communities.²⁶⁷ “God had the power both to inflict

²⁵⁷ Wallis, “Place of Medicine,” 2.

²⁵⁸ Stobart, *Household Medicine*, 1–290.

²⁵⁹ Mortimer, *Dying and the Doctors*, 204.

²⁶⁰ Mortimer, 207.

²⁶¹ Mortimer, 208.

²⁶² Wear, *Knowledge and Practice*, 30.

²⁶³ Slack, *Impact of Plague*, 26.

²⁶⁴ Wear, *Knowledge and Practice*, 294.

²⁶⁵ Wear, 31.

²⁶⁶ Mortimer, *Dying and the Doctors*, 208.

²⁶⁷ Mortimer, 208.

and to cure disease,” and it was assumed that he also created medical substances and healers.²⁶⁸

Over time, however, the focus shifted from a religious approach to medicine to the remedies and healers themselves, and by the end of the century the “religious framework to medical cure had ceased to dominate attitudes to treatment in the face of death.”²⁶⁹ Mortimer believes that the seventeenth-century “relocation of human well-being from the predominantly divine to the predominantly physical should be considered one of the most profound revolutions that society has ever experienced.”²⁷⁰

PHYSICIANS

While there existed ‘learned medicine,’ based on education, and ‘popular medicine,’ based on oral tradition, medical knowledge actually existed on a spectrum “shared by the population as a whole.”²⁷¹ Laymen often utilized official remedies and physicians often utilized traditional ones.²⁷² While there existed a variety of different types of male and female healers in seventeenth-century England, only men became licensed physicians. To do so, one generally acquired a Bachelor of Arts and a Master of Arts from either Oxford or Cambridge, followed by a Bachelor of Medicine and a Doctorate in Medicine, resulting in up to fourteen years of study.²⁷³

This extensive education was intended not only to transmit medical information, but to create “a physician of good character, who could exercise good judgement and advice: a man of learning.”²⁷⁴ This also meant, however, that the reputation of licensed physicians lay with the public’s “acceptance of these humanist arguments about the virtues of learned men,” which did not always happen.²⁷⁵ Furthermore, this medical education provided students with theoretical knowledge but not practical knowledge; there existed, as Barry writes, a “tension between minds and hands.”²⁷⁶ This produced a

²⁶⁸ Beier, *Sufferers & Healers*, 154–55.

²⁶⁹ Mortimer, *Dying and the Doctors*, 208.

²⁷⁰ Mortimer, 211.

²⁷¹ Beier, *Sufferers & Healers*, 4.

²⁷² Beier, 4.

²⁷³ Phyllis Allen, “Medical Education in 17th Century England,” *Journal of the History of Medicine and Allied Sciences* 1, no. 1 (1946): 121–22, <https://www.jstor.org/stable/24619539>.

²⁷⁴ Harold J. Cook, “Good Advice and Little Medicine: The Professional Authority of Early Modern English Physicians,” *Journal of British Studies* 33, no. 1 (1994): 4, <https://www.jstor.org/stable/175848>.

²⁷⁵ Cook, 5.

²⁷⁶ Barry, “Educating Physicians,” 137.

similar tension between licensed practitioners with their theoretical knowledge, and unlicensed practitioners with their practical knowledge.

Becoming a member of the College of Physicians was the only way to officially practice medicine as a physician throughout most of the century, and since the sixteenth century the College had been exercising their legal authority to persecute anyone practicing ‘physic’ without a license.²⁷⁷ Members of the College of Physicians viewed themselves as ‘professionals’ whereas uneducated healers were something else entirely.²⁷⁸ Regardless, licensed physicians remained but a small portion of the healers available in seventeenth-century England. It was a competitive open market of licensed and unlicensed practitioners and there was no consensus among the public regarding which was better.²⁷⁹ Licensed physicians were “vocally insecure about their status” in this market and complained about the number of competitors and the lack of respect received from laymen.²⁸⁰ University-educated physicians were considered to be of sound moral character and were expected to provide advice on how to live properly more than anything else, whereas those without a university education were looked to more for medicines and treatments with which they had experience.²⁸¹ Licensed physicians were not necessarily seen as the best medical professionals, or as the only learned medical professionals, especially since unlicensed practitioners often had more practical experience than licensed ones.²⁸²

Richard Napier, for example, was a popular self-made astrologer-physician in the early seventeenth century who treated maladies with a combination of astrology, magic, and his ability to converse with angels, in addition to traditional methods of healing.²⁸³ Napier had studied theology at Oxford and believed fervently in the use of astrology in all aspects of life, though he employed the same clinical observation and remedies in treating

²⁷⁷ Cook, “Good Advice,” 7–9.

²⁷⁸ Cook, 2.

²⁷⁹ Beier, *Sufferers & Healers*, 5.

²⁸⁰ Beier, 8.

²⁸¹ Cook, “Good Advice,” 17–18.

²⁸² Barry, “Educating Physicians,” 138.

²⁸³ Hadass, *Richard Napier’s Medical Practice*, 1–213.

patients as other physicians.²⁸⁴ On one occasion he is said to have successfully treated a girl after members of the College of Physicians failed to do so.²⁸⁵ While not a typical physician, Napier had attended university and kept abreast of contemporary discussions pertaining to theology, medicine, alchemy, and natural philosophy; that is to say, he was not a quack.²⁸⁶

Furthermore, not all physicians were threatened by their unofficial counterparts. Beier notes at least one physician who exchanged information with female healers in his town, as if they were colleagues.²⁸⁷ It was also in the seventeenth century that apothecaries “stepped out of their medieval role as the servants of licensed physicians, increasingly becoming general practitioners in their own right,”²⁸⁸ even gaining additional legal rights in 1695.²⁸⁹ Moreover, the people remarked that during outbreaks of plague many physicians fled London while a number of apothecaries remained behind to help the sick; as Beier notes, “the apothecaries’ star was rising, despite the physicians’ attempt to subordinate them.”²⁹⁰ Other medical practitioners of the time included surgeons, midwives, empirics, and cunning-folk who were typically trained through an apprenticeship.²⁹¹

ATTENDANTS & NURSES

When dealing with plague victims, however, attendants and nurses were the primary caregivers. During the seventeenth century, women of all levels of society were considered amateur healers and all women were expected to treat ill friends, relatives, and neighbours.²⁹² Mortimer shows that in southern England, up until 1650, attendants were a staple of a plague-stricken society, and they saw to a variety of duties, including housework, tending to the sick and watching them throughout the night, and, if necessary,

²⁸⁴ Michael MacDonald, “The Career of Astrological Medicine in England,” in *Religio Medici: Medicine and Religion in Seventeenth-Century England*, ed. Andrew Cunningham and Ole Peter Grell (Aldershot, UK: Scolar Press, 1996), 64–66.

²⁸⁵ Hadass, *Richard Napier’s Medical Practice*, 1–3.

²⁸⁶ Hadass, 140.

²⁸⁷ Beier, *Sufferers & Healers*, 107.

²⁸⁸ Beier, 7.

²⁸⁹ Cook, “Good Advice,” 26.

²⁹⁰ Beier, *Sufferers & Healers*, 254.

²⁹¹ Beier, 8.

²⁹² Beier, 4–5.

prepping the body for burial.²⁹³ After 1650, however, the field of nursing emerged from that of attendance; it was fulfilled more so by women with medical experience rather than any woman at all, and it was no longer independent of medical practitioners.²⁹⁴

Many physicians, however, either fled plague-stricken villages or shunned plague victims, and families therefore sought out attendants and nurses to treat their loved ones.²⁹⁵ Regarding cases of plague in East Kent, for example, between 1570 and 1679, there were ninety-seven recorded payments to “helpers paid for attendance, keeping and watching,” twenty-eight payments to nurses, and ten payments to doctors and physicians.²⁹⁶ When physicians did visit those infected with plague, they often only saw the wealthy,²⁹⁷ and the attendants and nurses who saw to everyone else were typically paid twice their normal rate due to the contagious nature of the disease.²⁹⁸ While nurses generally only directed treatment in 12–25 percent of medical cases, during the last two decades of plague in England, these highly paid nurses are thought to have directed treatment for 70 percent of plague cases.²⁹⁹

One of the potential sources of the emergence of the field of nursing as one for older, able women is the fact that “local women had almost exclusive control over the care of those suffering from contagious diseases” and during the period of 1620–60, “female care of the contagious sick also became more medicinal.”³⁰⁰ Still, many contemporaries noted a strong disdain for plague nurses, claiming that they were careless, greedy, and would murder their patients and rob them.³⁰¹ There persisted a great fear of plague nurses because they worked in such unclean conditions and could easily contract the plague, but also because they were independent women.³⁰² “Plague nurses were vilified due to their socioeconomic marginality, their close association with a much-feared disease, and because of the inextricable role they played in the process of

²⁹³ Mortimer, *Dying and the Doctors*, 145, 193.

²⁹⁴ Mortimer, 188–93.

²⁹⁵ Mortimer, 192–93.

²⁹⁶ Mortimer, 193.

²⁹⁷ Mortimer, 196.

²⁹⁸ Mortimer, 154–55.

²⁹⁹ Mortimer, 203.

³⁰⁰ Mortimer, 209–10.

³⁰¹ Lara Thorpe, “‘At the Mercy of a Strange Woman’: Plague Nurses, Marginality, and Fear during the Great Plague of 1665,” in *Women on the Edge in Early Modern Europe*, ed. Lisa Hopkins and Aidan Norrie (Amsterdam University Press, 2019), 30, <https://doi.org/10.2307/j.ctvcwp0b0.6>.

³⁰² Thorpe, 31.

quarantine, a deeply unpopular public health measure.”³⁰³ Despite this reputation, plague nurses were an integral part of London’s healthcare system and were particularly helpful in the impoverished areas that many of them hailed from.³⁰⁴ For the average plague-stricken household, nurses were virtually the only help available.³⁰⁵

2.5.3 Epidemiology & Prevention

Scientific epidemiology was founded by Greek physician Hippocrates two thousand years before plague became endemic in England. Over time, three theories emerged as to the origins of epidemics: miasma, contagion, and astral influence.³⁰⁶ All three theories were present in seventeenth-century England, though miasma and contagion dominated. Miasma, the idea of air pollution by noxious vapours, was the dominant theory of epidemiology for the preceding two thousand years.³⁰⁷ The theory of contagion, suggesting that disease could be spread from person to person, however, gained prominence during the Black Death.³⁰⁸ There would later be great debate surrounding the three theories, but, as Hirst notes, when it came to epidemic disease, writers tended to entertain “theological, astrological, miasmatic, and contagious factors simultaneously.”³⁰⁹

In seventeenth-century England theories of miasma and contagion were widely discussed, and sometimes combined due to the belief that miasma “could be picked up from the proximity of the sick and absorbed through the pores of the healthy.”³¹⁰ Preventatives and treatments accommodated both theories. The best form of prevention was recognized as fleeing from anywhere infected by miasma.³¹¹ Only a small portion of the population had anywhere to flee to, however. Other means of dispelling miasma included setting off guns or lighting bonfires in the streets.³¹² Fumigants and perfumes could also help, which gave rise to the beak-like plague doctor mask which could hold a

³⁰³ Thorpe, 31.

³⁰⁴ Thorpe, 31.

³⁰⁵ Mortimer, *Dying and the Doctors*, 203.

³⁰⁶ Hirst, *Conquest of Plague*, 22–23.

³⁰⁷ Hirst, 23.

³⁰⁸ Hirst, 23.

³⁰⁹ Hirst, 40.

³¹⁰ Slack, “Responses to Plague,” 437.

³¹¹ Slack, *Impact of Plague*, 30.

³¹² Slack, “Responses to Plague,” 437.

variety of aromatics, such as lavender, to counter the bad air. Other precautions against miasma included closing windows which faced the south wind, burning incense or rosemary in the house, and wearing perfumes or holding pomanders to the nose.³¹³ Furthermore, following the Black Death, outbreaks of plague were spread out and less frequent which led to the idea that the air in one area could be polluted by noxious emanations coming from the dead or arising from general uncleanness.³¹⁴ It was, therefore, considered the magistrates' duty to keep cities clean to prevent miasma.³¹⁵

The theory of contagion was also extremely popular, possibly due to the fact that it was especially promulgated by the government in seventeenth-century England in order to support their regulations surrounding isolation.³¹⁶ Precautions that citizens took against contraction by contagion included changing clothes and linens regularly, burning the clothes and linens of the sick, and generally avoiding those that were ill.³¹⁷ This practice, however, was at odds with social customs of the time that dictated that friends and relatives visit the sick, and it created social tension. Other methods of prevention touched on magic and astrology, such as protective amulets worn about the neck or precious stones worn on the fourth finger of the left hand which were said to offer protection.³¹⁸ Seventeenth-century theories of plague prevention were many and varied, as were methods of treating the disease.

2.5.4 Plague Treatments

Until the seventeenth century there was little distinguishing between different diseases; they were generally viewed simply as “symptoms of the general decay of the universe.”³¹⁹ During the seventeenth century, however, various writers are noted acknowledging the different presentations of plague, relating plague to other diseases, and speculating about causes and remedies.³²⁰ In attempts to treat the disease, medical

³¹³ Slack, *Impact of Plague*, 30.

³¹⁴ Hirst, *Conquest of Plague*, 23.

³¹⁵ Slack, *Impact of Plague*, 45.

³¹⁶ Slack, 230.

³¹⁷ Slack, 30.

³¹⁸ Slack, 31.

³¹⁹ Slack, 25.

³²⁰ Slack, 25–26.

practitioners drew from multiple different fields and utilized all resources.³²¹

Furthermore, in opposition to the severity of the disease, physicians remained optimistic that they would find a cure.³²²

For the ill, a variety of treatments were presented for a variety of different symptoms, and different remedies were created for the rich as for the poor. Remedies for the poor provided recipes with cheaper, more widely available ingredients than those written for the rich which often called for special ingredients such as emeralds or unicorn horn.³²³ Bloodletting was one of the most common treatments and was thought to rebalance the humours.³²⁴ Theriac, rue, walnuts, vinegar, and onions were included in many plague remedies.³²⁵ Buboes were treated with irritant dressings or by attaching a live hen or cock to it as it was thought that they would draw out the poison.³²⁶ Some ingredients and remedies, such as the common Four Thieves Vinegar, have roots in medicine and are still used in homeopathy today. Other ingredients such as arsenic and mercury, have no basis in medicine and could do nothing but harm. Either way, few medicines of the time were a match for the plague and while there existed a great many remedies which promised to cure it, the disease “was generally regarded as incurable.”³²⁷

2.6 CONCLUSION

While the seventeenth century saw the end of plague in England, it also saw some particularly severe epidemics. Furthermore, the political and religious climates of the seventeenth century were tumultuous and the medical world was in the midst of a revolution. Due to the growing popularity of the printing press in England, however, and the gradual shift from Latin to English, publications from the political, religious, and medical communities were more accessible in seventeenth-century England than ever before. Many of these publications concerned the plague and were intended for a general audience.

³²¹ Wear, *Knowledge and Practice*, 278.

³²² Wear, 278.

³²³ Slack, *Impact of Plague*, 31.

³²⁴ Slack, 30.

³²⁵ Slack, 30–31.

³²⁶ Slack, 31.

³²⁷ Beier, *Sufferers & Healers*, 208.

While we have little insight into how different people viewed and responded to these publications, they remain indicative of general responses to plague from these three spheres of society. Furthermore, political, religious, and medical figures throughout plague outbreaks held significant authority and many of these publications likely influenced public opinion, especially since they were written in the vernacular and were more widely available to the public than in previous centuries. The tradition of sharing knowledge with family, friends, and community members ensures that, of those who did not read the texts, many were likely still made aware of their contents. Plague in particular was widely discussed. Moreover, the evolution of print and the new trend of publishing in the vernacular created a society equipped to engage with publications from the political, religious, and medical spheres during times of epidemic.

This prior research on the political, religious, and medical spheres of seventeenth-century England creates the knowledge base from which my research stems and shows that experiences of plague throughout the century were complex and varied. One of the constants was the frequent publication of royal proclamations and plague orders, religious texts, and medical tracts. While there exists an abundance of research on publications from seventeenth-century England, including those discussing plague, there is little research that compares plague texts from different realms of society, written by different figures of authority.

The research further shows that the political, religious, and medical spheres were clearly intertwined during seventeenth century epidemics. Politics have been interwoven with religion in England for centuries, a concept exemplified by Richard Hooker, a priest in the Church of England during the late Tudor Period, when he asks “how should it possibly have come to pass, that the piety or impiety of the kings did always accordingly change the public face of religion, which things the prophets by themselves never did, nor at any time could, hinder from being done?”³²⁸ It is further clear that church and state were invariably intertwined throughout the sixteenth and seventeenth centuries due to the role of the monarch as the Supreme Head of the Church of England and the frequency of legislation proposed by Parliament which concerned religion.

³²⁸ Richard Hooker and Isaac Walton, *The Work of Mr. Richard Hooker, in Eight Books of the Laws of Ecclesiastical Polity: With Several Other Treatises, and a General Index. Also, a Life of the Author*, vol. 3 (London: W. Clarke, 1821), 225.

Religion and medicine have also long been connected in England. Religion has been used as both an explanation for the origin of an illness and as a treatment for such an illness. Divine wrath was often used as an explanation for an ailment, while prayer and medicine were used in conjunction with each other to treat it. Likewise, the field of medicine coincided with the political world. The sixteenth and seventeenth centuries were times of great advancement in public policy concerning public health. This was also when the government began creating an epidemic management strategy in response to outbreaks of smallpox and plague and resulted in collaboration with medical professionals.

While many authors note a multitude of connections between the political, religious, and medical spheres and their effects on society, many authors also note that plague created extraordinary circumstances. It was treated differently from other diseases and subsequently provoked different societal responses. However, there exists a gap in the literature surrounding the relationship between the political, religious, and medical spheres with respect to the plague as it is portrayed in seventeenth-century publications. The question remains, what can these plague publications tell us about the responses of the political, religious, and medical spheres to plague epidemics during this time? The purpose of my research is to compare publications concerning the plague from these three spheres and examine how they cohabit the domain of plague responses.

Chapter 3: Methodology

Exploring plague discourse in seventeenth-century England was a complex task. The landscape of English politics, religion, and medicine varied throughout the century and plague publications subsequently covered a multitude of different perspectives. This chapter details the methods chosen to best represent the diverse discourse. Section 3.1 describes the research design, noting a social constructivist framework and mixed methods approach. Section 3.2 identifies the processes used for data collection, and section 3.3 describes the qualitative and quantitative data analysis that was undertaken. Finally, section 3.4 notes the limitations of the study.

3.1 RESEARCH DESIGN

3.1.1 Methodology

To best facilitate a comprehensive study of seventeenth-century plague discourse a social constructivist framework was used along with a blend of qualitative discourse analysis and historical research, and quantitative content analysis. Social constructivism allowed me to take into account multiple viewpoints while a mixed methods approach allowed for a more comprehensive examination of the discourse.³²⁹ Qualitative analysis was necessary for this research since it focusses on the complexity of phenomena and allows for a deeper understanding of the data.³³⁰ Furthermore, a qualitative approach was optimal for taking into consideration the multifarious viewpoints present in the discourse, since qualitative research involves “embracing the idea of multiple realities.”³³¹ There were indeed multiple realities during outbreaks of plague in seventeenth-century England, as experiences varied by factors such as gender, social class, location, and profession. As such, discourse analysis was employed to record an in-depth examination of the many similarities and variances throughout the texts while historical research methods provided

³²⁹ Jessica DeCuir-Gunby, “Mixed Methods Research in the Social Sciences,” in *Best Practices in Quantitative Methods*, ed. Jason Osborne (Thousand Oaks, CA: SAGE Publications, 2008), 125, <https://doi.org/10.4135/9781412995627>.

³³⁰ Paul D. Leedy and Jeanne Ellis Ormrod, *Practical Research: Planning and Design*, 11th ed. (Boston, MA: Pearson, 2016), 251.

³³¹ John W. Cresswell and Cheryl N. Poth, *Qualitative Inquiry & Research Design: Choosing Among Five Approaches*, 4th ed. (Los Angeles: Sage Publications, 2018), 20.

the needed context and factored in the presence of historical nuances in the documents. While qualitative research was used to ensure the depth and breadth of the analysis, elements of quantitative research using content analysis were also employed to support qualitative findings and provide a means of measured and objective comparison between texts.

SOCIAL CONSTRUCTIVISM

Social constructivism created an ideal framework for this exploration into plague discourse as it acknowledges that there are multiple realities and takes individual experiences into consideration, promoting a multifarious viewpoint from which to conduct research. It further takes into account the role of social institutions, and Şimandan notes two somewhat contradictory qualities of social constructivism: the first is that people see and interpret institutions and social practices as ‘given,’ or as objective means of interpreting the world, and the second is that the concepts which form the basis of these ‘given’ structures are in a constant state of negotiation where new meanings can emerge and transform structures, institutions, and norms.³³²

The primary institutions throughout seventeenth-century England were the political, the religious, and the medical. These institutions created discourses which reflected the societal forces at play at the time of publication and the public interpreted them in their own ways, creating multiple realities through their diverse perspectives. Different realities are created through collective objective understandings and individual subjective interpretations, but these subjective interpretations can change institutions over time and themselves become objective understandings.³³³ This mutability may help explain the many changes undergone by the political, religious, and medical spheres in seventeenth-century England. Plague discourse shaped and was shaped by peoples’ subjective meanings and interpretations, and the political, religious, and medical spheres evolved in response to these developments. Using social constructivism to guide my methods allowed me to take into consideration some of the multiple realities created by

³³² Matei Şimandan, “Interpretative Methodology and Social Constructivism,” *Journal of Humanistic and Social Studies* 5, no. 1 (2014): 152–53.

³³³ Şimandan, 154.

citizens during this time, to account for the roles of the institutions involved, and helped me to a better understanding of how the discourse was created.

DISCOURSE ANALYSIS

Discourse analysis is not only an ancient practice but a transdisciplinary one. Van Dijk traces its origins back over two thousand years to the historical disciplines of *grammatica*, a precursor to linguistics, and *rhetorica*, the art of persuasive speaking and writing.³³⁴ While discourse analysis began to find its place with the emergence of the fields of linguistics in the nineteenth century, and structural analysis in the twentieth century, van Dijk places the origins of modern discourse analysis in the 1960s and 1970s along with the emergence of sociolinguistics.³³⁵ Over time, disciplines such as philosophy, psychology, artificial intelligence, sociology, and anthropology began to focus on the study of the written and spoken word and in doing so advanced and diversified the field of discourse analysis.³³⁶

Discourse can now be defined in an abundance of different ways. While many utilize a strictly linguistic definition of the word, for the purpose of this research I align my definition of discourse with that of scholars such as Blommaert and Foucault who view discourse as more than complex verbal systems. Blommaert defines discourse as “all forms of meaningful semiotic human activity seen in connection with social, cultural, and historical patterns and developments of use.”³³⁷ This aligns with the social constructivist perspective of these texts creating meaning in society and contributing to its culture. My research also focusses on discourse throughout publications from authoritative figures and institutions, so Foucault’s views on the connection between discourse and power also guide my analysis. As Foucault notes, “discourse is not simply that which translates struggles or systems of domination, but is the thing for which and by which there is struggle, discourse is the power which is to be seized.”³³⁸ Plague

³³⁴ Teun A. van Dijk, “Introduction: Discourse Analysis as a New Cross-Discipline,” in *Handbook of Discourse Analysis: Disciplines of Discourse*, ed. Teun A. van Dijk, vol. 1 (London: Academic Press, 1985), 1.

³³⁵ Van Dijk, 1–2.

³³⁶ Van Dijk, 5–7.

³³⁷ Jan Blommaert, *Discourse: A Critical Introduction*, Key Topics in Sociolinguistics 3 (Cambridge: Cambridge University Press, 2005), 3.

³³⁸ Michel Foucault, “The Order of Discourse,” in *Untying the Text: A Post-Structuralist Reader*, ed. Robert Young (Boston, MA: Routledge & Kegan Paul, 1981), 52–53.

publications, like the political, religious, and medical institutions of seventeenth-century England, held the power to affect change in society.

Discourse analysis is a broad term which includes a multitude of different approaches, but its primary purpose is to “explore meanings and examine structures within communication (inter)actions.”³³⁹ The search for a deeper level of understanding was prioritized, and Braun and Clarke note that on this matter thematic analysis often coincides with discourse analysis, “where broader assumptions, structures and/or meanings are theorized as underpinning what is actually articulated in the data.”³⁴⁰ Thematic discourse analysis was therefore the primary method used in identifying prominent themes and characteristics throughout plague publications.

This study was driven by the research questions and elements of theoretical thematic analysis were therefore employed, focussing on providing detailed analyses of the main themes present in political, religious, and medical plague publications and how they related to one another.³⁴¹ Thematic discourse analysis allowed for an in-depth examination of the texts as themes were identified at a latent level, going beyond the semantic details and examining underlying ideas and concepts throughout the texts.³⁴² Beyond the identification of the texts’ meaning, examining themes at a latent level also allowed for a more extensive study of the texts to identify the features that gave them meaning.³⁴³ From a social constructivist perspective, these publications are creating meaning as shared artefacts produced by particular institutions in a given society. It is through the similarities and differences that I was able to see where this meaning was shared in society and where it was not.

Within these common themes, efforts were made to identify the different experiences of those writing the texts. Evidence of the existence of these multiple realities was provided through the presentation of diverse perspectives and linguistic variations

³³⁹ Kristina M. Scharp and Lindsey J. Thomas, “Discourse Analysis,” in *The International Encyclopedia of Communications Research Method*, ed. Jörg Matthes, vol. 1 (Hoboken, NJ: Wiley Blackwell, 2017), 479.

³⁴⁰ Virginia Braun and Victoria Clarke, “Using Thematic Analysis in Psychology,” *Qualitative Research in Psychology* 3, no. 2 (January 2006): 84–85, <https://doi.org/10.1191/1478088706qp063oa>.

³⁴¹ Braun and Clarke, 84.

³⁴² Braun and Clarke, 84.

³⁴³ Braun and Clarke, 84.

from a range of texts.³⁴⁴ Social constructivism affirms that there is value in complexity and this principle was embraced throughout this analysis.³⁴⁵

HISTORICAL RESEARCH

Additionally, a historical research approach was vital for taking into account the historical nature of the sources being examined. Social constructivist researchers often “focus on the specific contexts in which people live and work in order to understand the historical and cultural settings of the participants.”³⁴⁶ Historical research helped me accomplish this. With historical research, the task “is not merely to describe *what* events took place but to present a *factually supported* rationale to suggest *how* and *why* they may have happened.”³⁴⁷ To do this, I examined both primary and secondary sources, delving into seventeenth-century English society to get to the core of the content created during plague outbreaks. Historical context was essential for creating a framework from which to interpret the data and understanding how events were given meaning and how the discourse was created facilitated a better understanding of the data. The historical research method also allowed me to incorporate previous research from a variety of disciplines, methods, and perspectives into my analysis.

CONTENT ANALYSIS

Finally, quantitative content analysis was used to facilitate a more comprehensive analysis of the texts. Content analysis is an overarching term that usually refers to a comprehensive and methodical examination of human communication.³⁴⁸ In fact, the origins of content analysis as a research methodology lie in the study of mass communications during the 1950s.³⁴⁹ Quantitative content analysis is a research method “in which features of a text are systematically categorized and recorded so that they can be analyzed.”³⁵⁰ While thematic discourse analysis was necessary for an in-depth analysis, quantitative content analysis provided objective data which helped inform the

³⁴⁴ Cresswell and Poth, *Qualitative Inquiry & Research Design*, 20.

³⁴⁵ Cresswell and Poth, 24.

³⁴⁶ Cresswell and Poth, 24.

³⁴⁷ Leedy and Ormrod, *Practical Research*, 278; italics in the original.

³⁴⁸ Leedy and Ormrod, 257.

³⁴⁹ Marilyn Domas White and Emily E. Marsh, “Content Analysis: A Flexible Methodology,” *Library Trends* 55, no. 1 (Summer 2006): 22, <https://doi.org/10.1353/lib.2006.0053>.

³⁵⁰ Kevin Coe and Joshua Scacco, “Content Analysis, Quantitative,” in *The International Encyclopedia of Communications Research Method*, ed. Jörg Matthes, vol. 1 (Hoboken, NJ: Wiley Blackwell, 2017), 346.

process of identifying themes and supported qualitative findings. It allowed for the “systematic observation and quantification of patterns in texts”³⁵¹ and was subsequently used to give body to the data and quantify the prevalence of certain concepts and ideas throughout the texts. This allowed for more accurate comparisons between the content of the different texts which further helped identify common themes and shared meanings throughout the political, religious, and medical spheres.

Using a combination of these three methods allowed me to conduct a comprehensive deep dive into the discourse surrounding the plague in seventeenth-century England. Discourse and content analysis allowed me to examine the communications extensively and the historical research method facilitated a contextual understanding of how and why the plague discourse is how it is. Furthermore, the social constructivist framework structured the focus of my attention onto the institutions and the complexity and subjectivity of human experiences in seventeenth-century England to better understand how meanings become normalized in a given society.

3.1.2 Reflexivity

I developed my love of history during my first year of university when I realized that it was far more interesting and relevant than I had inferred from my high school history lessons. Since then, it has been my goal to make history more accessible to those in other disciplines as well as members of the general public. In 2018, it was noted that historians tend to have an “aversion to public discourse,” and if they were more involved in society then it could help shape the future by learning from the past.³⁵² This is my goal, and it led me to study information management. I believe that history is best studied in conjunction with other disciplines because it can inform a multitude of topics and both of these disciplines now affect the way that I view the world. I believe that everything we do is shaped by the past and if we fail to acknowledge the past then we are destined to repeat it. Furthermore, I believe that understanding how discourse is shaped by people and societies will help inform future decisions.

³⁵¹ Coe and Scacco, 346.

³⁵² Cormac Shine, “Our World Is Changing. It’s Time for Historians to Explain Why.,” *The Guardian*, January 18, 2018, sec. Education, <http://www.theguardian.com/higher-education-network/2018/jan/18/our-world-is-changing-its-time-for-historians-to-explain-why>.

I studied the Black Death and its aftermath in university, and when I lived in England, I studied the country's history and learned about its culture. This knowledge and insight help build a foundation for my current research. It also means, however, that I hold preconceptions about the country, and I recognize that historians have a long history of altering the historical narrative with their bias, the risk of which must be mitigated. Remaining entirely objective is impossible, however, and social constructivist researchers "recognize that their own background shapes their interpretation, and they 'position themselves' in the research to acknowledge how their interpretation flows from their own personal, cultural, and historical experiences."³⁵³

3.2 DATA COLLECTION

3.2.1 Data Retrieval

The data needed for this research lay in various textual publications surrounding the topic of plague in seventeenth-century England. My examination of political publications was centred primarily on royal proclamations and plague orders given by the monarch or another body of government. For the religious realm these publications were largely sermons, tracts, and prayers. Finally, in studying medical responses to the disease, I looked at plague tracts and other publications from medical practitioners. These texts were found entirely on *Early English Books Online (EEBO)*, a database available through Dalhousie University (www.proquest.com/eebo). *EEBO* is managed by ProQuest and houses four collections of books (Early English Books I, 1473–1640; Early English Books II, 1641–1700; Thomason Tracts; Early English Books Tract Supplement) which include over 140,000 titles from over 250 libraries.³⁵⁴ It is the most comprehensive database for early modern works and provides digitized images of each book.³⁵⁵

3.2.2 Selection Criteria

Social constructivism also played a part in determining what data would be included in my research. While larger books about the plague were not uncommon in the

³⁵³ Cresswell and Poth, *Qualitative Inquiry & Research Design*, 24.

³⁵⁴ "Early English Books Online," ProQuest, accessed November 27, 2021, <https://about.proquest.com/globalassets/proquest/files/pdf-files/brochures/brochure-eebo.pdf>.

³⁵⁵ "Early English Books Online."

seventeenth century, smaller books and pamphlets were more accessible to the average citizen as they were less costly and more easily conveyed to the illiterate and semiliterate, making them more popular.³⁵⁶ In order to gain a better understanding of the experiences of the average citizen, therefore, the data that I included in my research came from shorter texts which would have been easily available to the public. I also limited my selection to texts which were currently legible in their available format as scanned texts online and which neatly fit into the categories of political, religious, and medical texts. Texts were identified as being political, religious, or medical in nature by the title and content as well as by the author and their profession, where available. There were no ethics or privacy concerns with these sources as they are all historical publications available publicly or through Dalhousie University.

3.2.3 Sources

Political sources collected included broadsheets such as acts and royal proclamations as well as plague orders coming from the monarch, the Parliament, the aldermen, or other political bodies. In total, twenty-six broadsheets and six books of orders were examined. The retrieved religious texts included broadsheets, pamphlets, and books such as those published by the Church of England as well as various religious officials from a variety of different religious denominations. For the religious section, three broadsheets and seven pamphlets and books were examined. Finally, the collected medical texts were broadsheets, pamphlets, and books authored by licensed physicians and medical organizations. Three broadsheets and seven pamphlets and books were examined. The reason that more broadsheets were consulted from the political sector than the others was because the books of plague orders were frequently reprinted with few changes and reiterated much of the same content throughout the years. More broadsheets were therefore examined to provide the same variety of data as was collected for the other two sections. For a list of all primary sources please see Appendix A.

3.2.4 Validity & Reliability

To ensure the validity and reliability of my data, as recommended by Leedy and Ormrod, I employed reflexivity to acknowledge the influence of my bias, strove to ensure

³⁵⁶ Hunter, "Books for Daily Life," 515; Peacey, *Print and Public Politics*, 56–91.

that my interpretations were kept separate from the data by storing them in different locations, and revised my interpretations of the data over time while intentionally seeking evidence to contradict them throughout the research.³⁵⁷ For the qualitative analysis I followed the comprehensive steps laid out by Braun and Clarke to ensure a systematic analysis of the data.³⁵⁸ Patton also states that “the discipline and rigor of qualitative analysis depend on presenting solid descriptive data” and my focus was therefore on taking extremely detailed notes.³⁵⁹ Furthermore, I followed Rourke and Anderson’s steps for creating a valid coding protocol for the quantitative content analysis.³⁶⁰ I also used a triangulation strategy to ensure the validity of my work by collecting data from multiple sources to find consistencies or inconsistencies in the data.³⁶¹ Finally, I employed my supervisory committee as secondary interpreters of the data.

3.3 DATA ANALYSIS

3.3.1 Qualitative Analysis

With the goal of identifying themes throughout the texts, I used Braun and Clarke’s six-step process for thematic analysis to analyze them. First, I read the texts and took some initial notes. Second, I re-read the texts, identified key points and potential patterns from each collection of texts, and coded the data accordingly. Third, I organized these codes into potential themes and sub-themes. Fourth, I refined these themes and re-read the texts to ensure that they made sense with regards to the extracts and the entire collection of texts. Fifth, I further refined and named the themes while identifying how they fit into the broader narrative. Finally, I selected key extracts and analyzed them in the context of the research questions.³⁶²

As Patton notes, “because each qualitative study is unique, the analytical approach used will be unique.”³⁶³ In this case, I undertook this process for each collection of texts

³⁵⁷ Leedy and Ormrod, *Practical Research*, 260.

³⁵⁸ Braun and Clarke, “Using Thematic Analysis,” 77–101.

³⁵⁹ Michael Quinn Patton, *Qualitative Evaluation and Research Methods*, 2nd ed. (Newbury Park, CA: Sage Publications, 1990), 375.

³⁶⁰ Liam Rourke and Terry Anderson, “Validity in Quantitative Content Analysis,” *Educational Technology Research and Development* 52, no. 1 (2004): 5–18, <https://www.jstor.org/stable/30220371>.

³⁶¹ Leedy and Ormrod, *Practical Research*, 88.

³⁶² Braun and Clarke, “Using Thematic Analysis,” 87–93.

³⁶³ Patton, *Qualitative Evaluation*, 372.

(political, religious, and medical). I also incorporated a close reading of each text to further analyze the discourse and explore the meanings and structures encompassed by the identified themes.³⁶⁴ Furthermore, I conducted close readings on other primary and secondary sources to situate the themes more accurately within their historical context. After analyzing the data, I synthesized my interpretations and evidence before comparing the themes between the three realms and further analyzing and comparing the discourse between them.

3.3.2 Quantitative Analysis

In addition to this thematic analysis, I incorporated elements of Rourke and Anderson's system for developing a "theoretically valid protocol" for conducting quantitative content analysis.³⁶⁵ With codes already established, I tested the coding protocol, removing and rewording categories as needed, and I developed guidelines for the implementation of the coding protocol to ensure consistency and validity throughout the scoring and interpretation of the data.³⁶⁶

Each code was given a score of 1, 2, or 3, based on its prevalence throughout the text. Given the varying lengths of the texts, there was no requirement for the frequency or number of sentences or paragraphs dedicated to the topic. Those rated a '1' were mentioned only briefly throughout the text; those rated a '2' were mentioned frequently or examined considerably throughout the text; and those rated a '3' were discussed extensively and were of primary concern to the text. Leedy and Ormrod recommend having multiple raters who work "independently, without knowledge of one another's ratings."³⁶⁷ While this was not possible in this situation, after conducting my initial ratings, I rated the same texts twice more without consulting my previous results and finally re-read the texts to address any discrepancies between the ratings. Lastly, the totals for each code were calculated and divided by the highest possible total for the number of texts examined, giving each code a rating out of 1. Visualizations were created to display the data and can be found in Appendices B–D.

³⁶⁴ Scharp and Thomas, "Discourse Analysis," 479.

³⁶⁵ Rourke and Anderson, "Quantitative Content Analysis," 8.

³⁶⁶ Rourke and Anderson, 11–12.

³⁶⁷ Leedy and Ormrod, *Practical Research*, 137.

3.4 LIMITATIONS

There are some limitations to my data analysis. Firstly, this study examines a relatively small sample of texts and the sources that I examined were more easily accessible to citizens of London than elsewhere in the country and may, therefore, not be widely representative of the plague discourse present in rural communities. The medical texts examined were also produced by recognized physicians and this study therefore does not take into consideration the views of unlicensed medical practitioners. Moreover, my reliance on written documents opens my research up to writer bias. Historians have a long history of altering historical narratives with their bias, and history has largely been written by straight, cisgender, white males and may, therefore, fail to take into account other marginalized groups in society. The texts examined were also written by figures of authority with the ability to alter the historical narrative, and the findings of this study should not be seen as indicative of wider plague responses.

Furthermore, the primary sources that I used are hundreds of years old. In some cases, this means that someone made the decision to preserve these sources and it is just as likely that they made a similar decision to discard sources that they deemed unimportant. Discarded sources may have been useful for understanding the discourse surrounding the plague and this may, therefore, limit my understanding of the discourse. Furthermore, some of these texts are damaged, the scans are poor, or the type is illegible, further limiting my use of these sources if there was no transcription available. Finally, I cannot ignore the possibility that, despite my best efforts, personal bias may have affected my interpretation of the data.

Chapter 4: Findings

The findings of this study consist of the identification of prominent themes found throughout the texts. In this chapter, the findings are presented as answers to the research questions which drove the study: ‘what were the main themes or narratives conveyed by political, religious, and medical plague publications?’ and ‘how did the political, religious, and medical publications responding to seventeenth-century outbreaks of plague differ or overlap?’ Section 4.1 will examine the results related to the first research question by exploring the primary narratives identified throughout the political, religious, and medical texts. Section 4.2 will present the results related to the second research question by examining related themes throughout the political, religious, and medical discourse. Finally, section 4.3 will provide a summary of the findings. Note that the original spelling and emphasis were retained throughout quotes from primary sources; no emphasis was added.

4.1 PRIMARY NARRATIVES

Through the examination of twenty-six broadsheets and six pamphlets and books, three primary themes were identified in the political discourse. These included the obligation of civic duty and obedience, the repercussions following disobedience and neglect, and a focus on the poorer members of society. For the religious discourse, three broadsheets and seven pamphlets and books were examined, and the overarching themes which were identified were that the plague was a punishment from God for the sins of men and that repentance was necessary, though God’s mercy was the only thing that would stay the plague. Finally, in examining three broadsheets and seven pamphlets and books, the primary narrative throughout the medical discourse was identified as an acknowledgement of the uniqueness of the disease and a wide variety of responses concerning the causes, preventatives, and treatments.

4.1.1 Politics

CIVIC DUTY & OBEDIENCE

One of the primary recurring themes throughout the political publications was the role of civic duty and obedience in stopping the spread of plague. All citizens had some

sort of civic duty that they owed their municipality during times of plague. Everyone was obligated to follow the basic rules created as part of the country's epidemic management strategy, such as reporting sick members of one's household, not selling bedding or apparel from an infected house, and not allowing children to attend funerals.³⁶⁸

Depending on one's profession or living situation, however, certain people were given additional rules to follow or roles to fulfill. To prevent the spread of infection, for example, the "common huntsman" was ordered to kill stray dogs during this time³⁶⁹ and coach drivers were ordered to air out their coaches after transporting sick passengers.³⁷⁰ Homeowners were also required to clean the streets in front of their houses every day,³⁷¹ and those with wells or pumps were ordered to collect ten buckets of water to run down the channel every morning and evening.³⁷²

In addition to these responsibilities, many citizens were appointed by political officials to positions specifically created during epidemics. Throughout orders printed in 1603, 1625, and 1629, for example, viewers were to be appointed to examine the bodies of the dead before burial and determine the most likely cause of death.³⁷³ Furthermore, throughout the orders of 1646 and 1665, people were to be appointed as examiners, watchmen, and searchers. Examiners were appointed in each parish with the task of

³⁶⁸ Court of Aldermen, *Orders Conceived And Published By the Lord Major and Aldermen of the City of London, concerning the Infection of the Plague*. (London, 1665).

³⁶⁹ Court of Aldermen, "Orders to be vsed in the time of the infection of the Plague vvithin the Citie and Liberties of London, till further charitable prouision may be had for places of receite for the visited with infection.," 1625, Early English Books, 1475-1640 (STC), EEBO.

³⁷⁰ Court of Aldermen, *Orders Conceived And Published*, sec. Hackney Coaches.

³⁷¹ City of London, *Orders Formerly Conceived and Agreed to be published by the Lord Major and the Aldermen of the City Of London: And The Justices of Peace of the Counties of Middlesex and Surrey, Concerning The Infection of the Plague. And now Re-printed and published by Order of the Honourable House of Commons*. (London, 1646), sec. Orders for cleansing and keeping of the Streets sweet; Court of Aldermen, *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, 1665), 3.

³⁷² Court of Aldermen, "Orders to be vsed."

³⁷³ James I, *Orders, thought meete by his Maiestie, and his Priuie Counsell, to be executed throughout the Counties of this Realme, in such Townes, Villages, and other places, as are, or may be hereafter infected with the Plague, for the stay of further increase of the same*. [...] (London, 1603), para. 4; James I, *Orders Thought Meet By His Maiestie, And his Priuie Councell, to be executed throughout the Counties of this Realme, in such Townes, Villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same*. [...] (London, 1625), para. 4; Charles I, *Orders thought meet by His Maiestie, and his Priuie Councell, to bee executed throughout the counties of this realme, in such townes, villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same* [...] (London, 1629), para. 4.

keeping track of who in the parish was sick and of what illness, and if they were to find anyone infected with plague then they were to report back to the constable.³⁷⁴ Watchmen were appointed to guard every infected house, making sure that no one entered or exited the house,³⁷⁵ and searchers were appointed to examine the bodies of the dead and determine cause of death.³⁷⁶ Other potential appointments could be as tender,³⁷⁷ keeper,³⁷⁸ bearer,³⁷⁹ or burier.³⁸⁰

Furthermore, these orders were to be enforced by justices of the peace, mayors, bailiffs, and other officers in towns and cities, vice-chancellors on university grounds, and bishops and deans on Cathedral grounds.³⁸¹ Enforcement was a particularly important role because as one set of orders noted, disorder and lack of direction caused many citizens to spread the plague.³⁸² Justices of the peace in particular were expected to keep their counties orderly. While they were given some rules, they were also given the authority to implement any new rules or orders that they deemed necessary for the health of their subjects.³⁸³

Additionally, it was made very clear that whatever role one took on, they had to do it well. Appointed and political officials were expected to be exceptional at their jobs.

³⁷⁴ City of London, *Orders Formerly Conceived*, sec. Examiners to be appointed in every Parish.; Court of Aldermen, *Orders Conceived And Published*, sec. Examiners to be appointed in every Parish.; Court of Aldermen, *Orders And Directions*, 1–2.

³⁷⁵ City of London, *Orders Formerly Conceived*, sec. Watchmen.; Court of Aldermen, *Orders Conceived And Published*, sec. Watchmen.; Court of Aldermen, *Orders And Directions*, 2.

³⁷⁶ City of London, *Orders Formerly Conceived*, sec. Chirurgions.; Court of Aldermen, *Orders Conceived And Published*, sec. Chirurgions.; Court of Aldermen, *Orders And Directions*, 2.

³⁷⁷ House of Lords, “An Order of the Lords, for the better direction of the Overseers appoynted in the severall Parishes of the city of Oxford, against the spreading of the Infection of the Plague.,” May 12, 1645, Early English Books, 1641-1700 (Wing), EEBO.

³⁷⁸ England and Wales, “An Act for the charitable reliefe and ordering of person infected with the Plague.,” 1630, Early English Books, 1475-1640 (STC), EEBO; Court of Aldermen, *Orders Conceived And Published*.

³⁷⁹ House of Lords, “Order of the Lords.”

³⁸⁰ England and Wales, “charitable reliefe”; Court of Common Council, “Orders conceiued and thought fit, asvvel by the Lord Maior of the City of London and the Aldermen his Brethren, as by the Iustices of Peace in the Countie of Middlesex, the Borough of Southwarke, and County of Surrey to be obserued within their seuerall limits respectiuey [...],” 1608, Early English Books, 1475-1640 (STC), EEBO; Parliament, “By the Lords and others His Majesties Commissioners. An Order for the Observance and Execution of the Statute made for the Reliefe and Ordering of Persons infected with the Plague.,” August 1, 1644, Early English Books, 1641-1700 (Wing), EEBO; House of Lords, “Order of the Lords”; Court of Aldermen, *Orders Conceived And Published*.

³⁸¹ England and Wales, “charitable reliefe”; Parliament, “By the Lords.”

³⁸² James I, *Orders*, 1603, para. 17.

³⁸³ James I, *Orders*, 1625, paras. 12, 14; James I, *Orders*, 1603, paras. 12, 14; Charles I, *Orders*, paras. 12, 14.

While appointing examiners, for example, care was to be taken that the aldermen selected “persons of good sort and credit” for the position.³⁸⁴ In appointing female searchers, special care was to be taken to appoint women who were “of honest reputation, and of the best sort as can bee got in this kinde.”³⁸⁵ They were still reprimanded for not doing their jobs well enough, however, and it was ordered that, due to “great abuse in misreporting the disease,” chirurgeons (surgeons) would be appointed to accompany the women “to the end there may bee a true report made of the disease.”³⁸⁶ There were many additional duties to be taken on during this time by both regular citizens and law enforcement, and doing them badly was not a good option.

DISOBEDIENCE, NEGLECT, & PUNISHMENT

Disobedience in following plague orders, the refusal to fulfill the position one was appointed for, and neglect in fulfilling one’s role were not tolerated by the government, though they did, at times, occur. In justifying new rules and orders for the city of Oxford, for example, one author cited the “dreadfull effects of negligence in the present dangerous disease.”³⁸⁷ Furthermore, the texts frequently threatened punishment for such offences and they appeared frequently throughout the publications. Most texts cited public safety as the reason for punishment. For example, one text forbade the citizens of London from attending a fair in the infected town of Bristol upon pain of punishment “for a contempt so much concerning the uniuersall safety of our people of our said Citie.”³⁸⁸ Another noted that those who disobeyed the orders given would be persecuted as rioters, disturbers of the peace, or enemies to public safety.³⁸⁹ Furthermore, many of the publications threatened punishment specifically to make an example of the perpetrator.³⁹⁰ A 1603 proclamation, for example, concluded with “And because we perceiue that heretofore

³⁸⁴ Court of Aldermen, *Orders Conceived And Published*, sec. Examiners to be appointed in every Parish.

³⁸⁵ City of London, *Orders Formerly Conceived*, sec. Chirurgions.

³⁸⁶ City of London, sec. Chirurgions.

³⁸⁷ University of Oxford, “Rules and Orders Made By The Vice-Chancellor of the Vniversity of Oxford, and Iustices of Peace, for the Good and Safety of the Vniversity, City and County of Oxford.,” August 25, 1665, Early English Books, 1641-1700 (Wing), EEBO.

³⁸⁸ James I, Proclamation, July 8, 1604, Tract Supplement, EEBO.

³⁸⁹ University of Oxford, “Rules and Orders.”

³⁹⁰ Court of Common Council, “Orders conceiued”; Charles I, Proclamation, August 11, 1625, Early English Books, 1475-1640 (STC), EEBO; James I, Proclamation, May 29, 1603, in *A booke of proclamtions, published since the beginning of his Maiesties most happy reigne ouer England, &c. Vntill this present moneth of Febr. 3. Anno Dom. 1609* (London, 1610), 20–21.

there hath bene a great neglect in obeying Proclamations published upon iust causes, we doe admonish all those whom this Proclamation concerneth, to be so wary, as we haue not iust cause to make them an example of contempt, which we must and will doe,” if citizens disobey said proclamation.³⁹¹

Additionally, those who refused an appointment or failed to complete the position adequately also faced many threats of punishment. One text noted that appointed viewers who either refused the position or compromised it “through fauor or corruption,” would be “punished by imprisonment, in such sort as may serue for a terrour to others.”³⁹² Women who refused an appointment or failed to fulfill the position were also denied their pensions from the hospital or parish, and it was noted that negligent dog-killers who “wittingly spare and shew fauour in not killing any such Dogge or Bitch” would subsequently lose his job and be imprisoned.³⁹³ While appointed positions were frequently dangerous and brought those appointed in close contact with the disease, the punishments for not fulfilling the positions adequately could be more severe.

Officials expected to enforce plague policy were less frequently threatened throughout the publications, however, it was made clear that they would be punished for negligence just as any appointed citizens would be. One proclamation stated, for example, that, “whosoever in this businesse . . . shall be found Remisse or Negligent, whether they be Maiors, Sheriffes, Justices of Peace, Bailiffes, Constables, or other Officers, or persons of what degree, qualitie, or condition soever, must expect to receive such condigne punishment as by the strictest Lawes or Statutes of the Realme, or otherwise may be inflicted upon them.”³⁹⁴ Regardless of status or profession, it is made clear that those who disobeyed plague orders or failed to do their duties in preventing the spread of plague could be severely punished.

POVERTY

Finally, throughout these publications much attention was given to those living in poverty. Political publications frequently included plague remedies which took into account the accessibility of certain medicines to the poor. Orders often included sections

³⁹¹ James I, Proclamation, May 29, 1603.

³⁹² James I, *Orders*, 1603, para. 4.

³⁹³ Court of Aldermen, “Orders to be vsed.”

³⁹⁴ Charles I, Proclamation, April 22, 1636, Early English Books, 1475-1640 (STC), EEBO.

dedicated to inexpensive and easy remedies, for example, and advice sections with titles such as “sundry good Rules and easie Medicines, without charge to the meaner sort of people.”³⁹⁵ It was also widely suggested throughout the texts that everyone who was able ought to help the poor through the epidemic. It was implied that it was expected of people either as a facet of civic responsibility or Christian charity. Poor relief facilitated by parishes was often addressed in the form of poor taxes collected by justices of the peace,³⁹⁶ for example, as well as church collections allocated for the parish’s infected poor.³⁹⁷ Furthermore, texts from 1665 prohibited the visiting of “Taverns, Alehouses, and other places of common entertainment” due to the epidemic, and further ordered that “the money thereby spared, be preserved and imployed for the benefit and relief of the poor visited with the infection.”³⁹⁸

It was not merely charity driving these policies, however, as the government supported the theory of contagion and understood that poverty entailed closer quarters and reduced cleanliness, conditions likely to spread the infection. A proclamation from 1666 epitomized this sentiment, noting that the poor must be looked after, with “want and nastiness being great occasions of the Infection.”³⁹⁹ Others suggested that the poor must be provided for “lest they should wander abroad, and thereby infect others.”⁴⁰⁰ Consequently, while the government made efforts to look after the poor who lived in parishes, they severely punished those found wandering. Orders published in 1646 state:

Forasmuch as nothing is more complained on, then the multitude of Rogues and wandering Beggers that swarm in every place about the City, being a great cause of the spreading of the Infection, and will not be avoided, notwithstanding any Order that hath been given to the contrary: It is therefore now ordered, that such Constables, and others whom this matter may any way concerne, doe take speciall care, that no wandering Begger be suffered in the Streets of this City, in any

³⁹⁵ James I, *Orders*, 1603, sec. An advise set downe [...].

³⁹⁶ James I, *Orders*, 1603, para. 3; James I, *Orders*, 1625, para. 3; Charles I, *Orders*, para. 3; England and Wales, “charitable reliefe”; Charles I, Proclamation, October 7, 1636, Early English Books, 1475-1640 (STC), EEBO; City of London, *Orders Formerly Conceived*, para. 3; Charles II, “Rules and Orders To be observed by all Justices of Peace, Mayors, Bayliffs, and other Officers, for prevention of the spreading of the Infection of the Plague.” 1666, Tract Supplement, EEBO.

³⁹⁷ Charles I, Proclamation, August 11, 1625; Charles I, Proclamation, October 7, 1636.

³⁹⁸ Court of Aldermen, *Orders Conceived And Published*, sec. Orders concerning loose Persons and idle Assemblies.

³⁹⁹ Charles II, “Rules and Orders.”

⁴⁰⁰ England and Wales, “charitable reliefe.”

fashion or manner whatsoever upon pain of the penalty provided by the Law to be duly and severely executed upon them.⁴⁰¹

In 1665 it was further noted that “no Pedlers, petty Chapmen, Tinkers, Hat-dressers, Fidlers, Beggars, or other Vagabonds, be permitted or suffered to pass or wander up and down this County from place to place; nor none to beg out of their own Parishes, upon the Penalties that are by the Statutes of the Realm to be inflicted upon the Constables, and other Officers, that neglect their duty therein.”⁴⁰² While the poor communities in parishes were supported, therefore, vagrants were frequently persecuted in the name of public health.

4.1.2 Religion

SIN & PUNISHMENT

Unsurprisingly, it was made clear throughout the religious texts examined that the plague was widely believed to be a punishment from God. It was thought to be delivered by an avenging angel⁴⁰³ as both a product of God’s wrath and as “the execution of *Justice* in the highest degree.”⁴⁰⁴ This justice was being enacted in response to the sins of men. As one author put it, “Mans sinne is the cause of Gods plague, and Gods plague is but the effect of mans sinne.”⁴⁰⁵ Proof of this, according to one author, “needs no farther search then the guilt of our owne consciences; and the iniquity of the times beyond measure sinnefull.”⁴⁰⁶ As another wrote, “Heaven would have no quarrell with us, did not we by our impieties, warre with the God of Heaven.”⁴⁰⁷

⁴⁰¹ City of London, *Orders Formerly Conceived*, sec. Beggars.

⁴⁰² University of Oxford, “Rules and Orders.”

⁴⁰³ Church of England, *A short forme of Thankesgiuing to God, for staying the contagious sickenes of the Plague: To be used in Common Prayer, on Sundayes, Wednesdayes, and Fridayes*. (London, 1604), sec. Prayers, and Thankesgiuings; Church of England, *A short Forme of Thankesgiuing to God For staying the contagious sickenesse of the Plague: To be vsed in Common Prayer, on Sundayes, Wednesdayes, and Frydayes: set forth by Authority*. (London, 1625), sec. The first Collect; “The Observations of Mr. Lillie, and many Famous and Learned Divines, touching the present Visitation of the Plague of Pestilence; With a Prayer to be used in all Families, for sheathing of the Sword of the Destroying Angel, and to divert Gods heavy Judgments [...]” 1665, Early English Books, 1641-1700 (Wing), EEBO.

⁴⁰⁴ Robert Wright, *A Recept To Stay The Plague. Delivered in a Sermon by R.W. Minister of Gods Word*. (London, 1636), 19.

⁴⁰⁵ I. L., *A Divine Balsam To Cure The bleeding Wounds of these dangerous Times. Or, The true cause of two grand and heavie Judgements of Almighty God now upon this Kingdome*. [...] (London, 1642).

⁴⁰⁶ Wright, *To Stay The Plague*, 15.

⁴⁰⁷ L., *Divine Balsam*.

While it was widely agreed that sin was the cause of the plague, it was also believed that the plague was a deserved punishment for the transgressions of men. As one author put it: “Why are we so diseased but because God is so much displeased? Wee have grievously sinned, therefore are we so grievously plagued.”⁴⁰⁸ This sentiment was repeated throughout the texts. One prayer noted, “we have drawn down thy Iudgments upon us and thou hast justly sent the plague of pestilence amongst us,”⁴⁰⁹ while another cried “how grieuously and iustly wee haue bene chastened for our sinnes.”⁴¹⁰ Among the authors of these texts, at least, it was believed that the plague was a just punishment for the sins of English citizens.

God’s wrath was also not limited to any one group of sinners. His punishment was collective, and all were affected. As one sermon noted, “the hand of Gods wrath seemeth to bee stretched out in generall, without respect of persons, age or degree.”⁴¹¹ The punishment was still viewed as just, however, since all could be considered sinners. While “some had offended more griuously then other some . . . *all were guilty*.”⁴¹² This view justified the widespread illness and designated repentance as the primary and most fundamental response to outbreaks of plague.

MAN’S REPENTANCE & GOD’S MERCY

In nearly every text it was made very clear that repentance was the primary means of staying the plague and was absolutely necessary if things were to improve. There were many facets to this repentance, however. Turning away from sin was an essential component of this repentance. One author claimed that, like other diseases, taking away the cause of the illness would also halt the effects, therefore taking away the sin would subsequently remove the plague from society.⁴¹³ Another suggested that everyone “endeavour by prayer and supplication to amend his life, to become new creatures, to reform themselves of their wicked practices, and to renounce all sinful ways, to keep and obey God's commandments, enterprise the holy Sabbath, and his blesed ordinances; And

⁴⁰⁸ L.

⁴⁰⁹ “Observations of Mr. Lillie.”

⁴¹⁰ Church of England, *Thankesgiuing to God*, 1604, sec. Prayers, and Thankesgiuings.

⁴¹¹ Wright, *To Stay The Plague*, 7.

⁴¹² Wright, 11.

⁴¹³ Wright, sec. To the Reader.

that ye may all do, apply yourselves to such rules and precepts that may bring happiness to your immortal soul.”⁴¹⁴

It was further noted that multiple forms of repentance were needed to stay such a widespread and deadly disease. While one author noted that “fasting keeps the spirit of Prayer awake,”⁴¹⁵ another noted that fasting from food was not enough and you must also see that you “fast from sin, envy, oppression and persecution, that you lose the bands of wickedness, undo the heavy burthens, and set the oppressed free, that you deal your bread to the hungry, [and] that you visit the fatherless and widows.”⁴¹⁶

Finally, given that the plague presented as a collective punishment, repentance from a few would not alleviate the disease. As one author noted, the answer to collective punishment was collective repentance: “If every man would sweep his owne doore, the streets would soon be cleane; and if every man would cleane his own hands, purifie his owne heart; purge himself of his particular and personall corruptions, and forsake his . . . beloved and bosome sins, there would then be a wished for alteration, and a blessed reformation amongst us. . . . let every one amend one and I pray God amend us all.”⁴¹⁷

In addition to repentance, these texts frequently spoke of God’s mercy. As one author noted, “The Lord is full of compassion and mercie, long suffering, plenteous in goodnesse and pitie. His mercy is greater then the heauens, and his gracious goodnesse reacheth unto the cloudes.”⁴¹⁸ While repentance was important, it was God’s mercy that was believed to prevent or stop epidemics of plague. Luckily, it was believed that God wanted to bestow his mercy upon his subjects:

God delights not in the death of any sinner, but had rather that he should turne from his wickednesse and live. The Lord hath graciously promised, that when he doth send pestilence amongst his people, if his people which are called by his name shall humble themselves, pray unto him, seek his face, and turn from their

⁴¹⁴ “Observations of Mr. Lillie.”

⁴¹⁵ Henry Burton, *A most Godly Sermon: Preached at St. Albons in Woodstreet on Sunday last, being the 10 of October, 1641. Shewing the necessity of Selfe-denyall and Humiliation, by Prayer and Fasting before the Lord, in regard of the present Plague we now lye under. Which God, in his good time, remove from amongst us.* (London, 1641), Doct. 4.

⁴¹⁶ Thomas Salthouse, *A Brief Discovery Of The Cause for which this Land Mourns, and is Afflicted. With Several Remedies To Be Applied in Order to the Removal Of the Present Visitation.* [...] (London, 1665), 3.

⁴¹⁷ L, *Divine Balsam.*

⁴¹⁸ Church of England, *Thankesgiuing to God*, 1604, sec. The Psalme.

evil wayes, he wil then hear from heaven, be mercifull to their sins, and will heale the land, the sores of the land are the sins of the land.⁴¹⁹

As one author asserted, turning away from sin and towards repentance was the solution and would grant you God's mercy since he would rather you "return unto him then perish without him."⁴²⁰ Therefore, if citizens sought repentance and turned away from sin and towards God, then he may have been inclined to bestow his mercy upon them.

God's mercy was the most important factor in staying the plague and the plague's removal was not facilitated because humans had adequately repented for their sins, but because God was so merciful. One prayer noted that "It is thy goodnesse, and meere fauour to us, that thou hast rather chosen to glorifie thy Mercy in sauing us, then to magnifie thy Justice in our destruction."⁴²¹ It was further made clear that humans were not deserving of this mercy. One sermon expressed that people should hope that God does not direct his punishment according to the severity and frequency of men's sins but rather according to his own benevolence.⁴²² God's mercy long surpassed what the "most wretched sinners" deserved and only through God's mercy would the plague meet its end.⁴²³ While humans were not deserving of his mercy, it was also noted that they must not take advantage of it. One sermon revelled in the staying of the plague but warned against further transgressions:

Its a great mercy of God that their is a suspension of his Justice, for it is his mercy that wee are not all consumed: But if that mercy bee abused, then the wrath of the Lord is no longer restrained, but even from heaven itselfe, from whence commeth the influence of all good blessings to the sonnes of men, even from thence shall his wrath be sent forth: and when men poyson the Ayre with sinne, then God will poyson men with the Ayre: and the very breath of one man shall be the baine, infection, and death of another: which is not only the going out of his wrath, but the execution thereof, the last circumstance in the Text.⁴²⁴

⁴¹⁹ L, *Divine Balsam*.

⁴²⁰ L.

⁴²¹ Church of England, *Thankesgiuing to God*, 1625, sec. The first Collect.

⁴²² Wright, *To Stay The Plague*, 12.

⁴²³ Church of England, *Thankesgiuing to God*, 1604, sec. Prayers, and Thankesgiuings.

⁴²⁴ Wright, *To Stay The Plague*, 20.

A return to sin after the removal of the plague would have been seen as ungrateful, after all, and could result in an even worse plague being sent from the heavens.⁴²⁵

4.1.3 Medicine

THE PLAGUE IS UNIQUE

One theme repeated throughout the medical texts was that the plague was unique, rather it was a “feirce Fury, which is . . . not a disease, but a Monster.”⁴²⁶ Many of the texts compared it to other diseases, noting that it was different. One physician wrote that it was different from all other fevers of a similar nature,⁴²⁷ and others claimed that it was “the most terrible and fearefull” of all diseases.⁴²⁸ Hering further insisted that there was “nothing so acute [and] violent . . . neither so contagious and pernicious” as the plague.⁴²⁹ One text even compared the 1665 epidemic to previous plague outbreaks, noting that the “nature of the present *Pest* . . . in many things differs from the *Pests* of former times.”⁴³⁰

Some texts contradicted themselves or others on this matter, however. John Woodall claimed that his remedy could be used for multiple different diseases, stating in particular that “the Disease of the small Pox, hath great affinity with that most fearefull Disease of the *Plague*, being also contagious and deadly often times.”⁴³¹ Theophilus

⁴²⁵ Church of England, *Thankesgiuing to God*, 1604, sec. Prayers, and Thankesgiuings.

⁴²⁶ Francis Hering, *Certaine Rvles, Directions, Or Aduertisments For This Time Of Pestilentiall Contagion: With A caueat to those that weare about their neckes impoisoned Amulets as a Preseruatiue from the Plague* [...] (London, 1625), sec. To The High And Potent King [...].

⁴²⁷ Theophilus Garencières, *A Mite Cast into the Treasury Of the Famous City of London; Being A Brief and Methodical Discourse of the Nature, Causes, Symptomes, Remedies and Preservation from the Plague, in this Calamitous Year, 1665. Digested into Aphorismes, by Theophilvs Garencieres Doctor in Physick*. (London, 1665), 7.

⁴²⁸ I. W., *A Briefe Treatise of the Plague Wherein is shewed, The [brace] Naturall cause of the Plague. Preseruatiues from the infection. Way to cure the infected. Newly corrected with new additions and many approoued Remedies*. (London, 1603), sec. Of the naturall causes of the infection of the aire, and of the plague.; *The Plagues Approved Physitian Shewing the naturall causes of the Infection of the Ayre, and of the Plague. With diuers observations to bee used, preserving from the Plague, And signes to know the Infected therewith*. [...] (London, 1665), sec. Of the Naturall causes of the infection of the Aire, and of the Plague.

⁴²⁹ Francis Hering, *A Modest Defence Of The Caueat Giuen To The Wearers Of impoisoned Amulets, as Preseruatiues from the Plague: Wherein that point is somewhat more lergely reasoned and debated with an ancient Physician, who hath maintained them by publicke writing* [...] (London, 1604), sec. To The Reader.

⁴³⁰ Society of Chymical Physitians, “An Advertisment From The Society of Chymical Physitians, Touching Medicines by them prepared, in pursuance of his Majesties Command, For the Prevention, and for the Cure of the Plague.” 1665, Early English Books, 1641-1700 (Wing), EEBO.

⁴³¹ John Woodall, *The Cvre Of The Plague By An Antidote Called Aurum Vitæ. Being well approved to be an easie safe, and perfect cure thereof; as also of contagious Agues, or Feavers begining either Hot or Cold*. [...] (London, 1640), sec. The Vertue of the precedent Antidote, in the cure of the small Pox.

Garencières similarly claimed that his proposed antidote worked against dozens of ailments,⁴³² though he also declared that it was clear the plague was poisonous because “it slighteth all remedies by which other diseases are cured, that proceed either from intemperry obstruction, or putrefaction.”⁴³³ Despite these two occasions, it was for the most part agreed that the disease was unparalleled.

The medical discourse also frequently argued that plague was a natural disease, rather than solely divine. The essence of the illness actually had some describing it as unnatural, however. The plague was frequently referred to as poisonous or venomous, and as Hering noted, “The very name of poison or venom implieth (in my conceit) an absolute contrariety and hostility vnto Nature. . . . poison is absolutely, perpetually & irreconcilably opposed vnto nature.”⁴³⁴ It was Nature, therefore, that was attempting to “thrust out her venomous enemy” according to Woodall.⁴³⁵ Wounds such as blisters, sores, boils, carbuncles, and buboes were therefore seen as the result of Nature forcing the poison out of the body.⁴³⁶

Thus, physicians could be seen as servants or ministers of Nature, tasked with assisting Nature in her quest to expel the venom.⁴³⁷ This view of the plague also led to the use of specific treatments which often differed from those used for other diseases. Sweating as a method of treatment was lauded over purging because it was thought that sweating would help Nature expel the disease through the pores.⁴³⁸ One text subsequently provided an antidote that would cause sweating to help expel the disease.⁴³⁹ Others were more in-depth. Garencières, for example, noting the uniqueness of the plague wrote that because it only kills “by its malignity, and poisonous quality, and not by any preternatural heat, or Intemperry” it required treatment with cordials and “sudorifick Antidotes,” arguing that other common treatments such as purging, bleeding, and vomiting would

⁴³² Garencières, *Mite Cast*, 8.

⁴³³ Garencières, 1.

⁴³⁴ Hering, *Modest Defence*, 13–14.

⁴³⁵ Woodall, *Cvve Of The Plague*, sec. A Description Of The Cordial Antidote Called Aurum Vitae.

⁴³⁶ Hering, *Modest Defence*, sec. To The Reader; “An approved Antidote or Cordiall Medicine, that by Gods favour cureth the Pestilentiall Feaver, or Plague, with other contagious Agues or Feavers, beginning either hot or cold [...],” 1650, Tract Supplement, EEBO.

⁴³⁷ “An approved Antidote”; Garencières, *Mite Cast*, 5.

⁴³⁸ “An approved Antidote”; Woodall, *Cvve Of The Plague*, sec. Of the rule and order to be held in the taking of this Antidote for the cure of the Plague.

⁴³⁹ “An approved Antidote.”

counteract Nature's attempt to expel the disease and subsequently kill the subject.⁴⁴⁰ He further attested that whereas with other fevers you would usually avoid meat and alcohol, with the plague "good meat and drink cannot hurt, but rather allay it."⁴⁴¹ While a few noted similarities with other diseases, therefore, the plague was generally regarded by physicians as an anomaly.

PHYSICIANS' RESPONSES VARIED

Physicians' responses to this unique disease were also varied and multiple. The medical discourse discussed potential causes of the epidemics, preventatives and ways to avoid becoming ill, and treatments for the disease. Theories varied greatly from physician to physician, however.

Causes

The causes attributed to the epidemic throughout these texts were multifarious. Miasma, contagion, and astral influence were all addressed by multiple physicians and sometimes one text attributed two or three of them to the cause of the epidemic. Nearly every text examined either argued or acknowledged that plague was contagious. Hering, for example, noted in 1604 that some citizens of London had begun to believe that the plague was not contagious and responded by calling this an "vnreasonable Paradox," stating "I know not how it commeth to passe, that nothing can be spoken so absurdly, which is not defended by some of the Philosophers. If anyone of our coat, should maintaine this monstrous and pernicious heresie, the Tribe of Physicians would be so farre from disputing the matter with him, as they would straight send him that Anticeras to purge his braine with Hellebore."⁴⁴²

Miasma was addressed almost as frequently as contagion. Many cited some variation of "poysonous vapours,"⁴⁴³ a "pestilential constitution of the air,"⁴⁴⁴ or "an infected, corrupted and putrified Ayre"⁴⁴⁵ as a cause of the epidemic. One author claimed that "it is very good when one goeth abroad, to have something in their hands to smell

⁴⁴⁰ Garençières, *Mite Cast*, 4–5.

⁴⁴¹ Garençières, 7.

⁴⁴² Hering, *Modest Defence*, sec. To The Reader.

⁴⁴³ Woodall, *Cvre Of The Plague*, sec. A Description Of The Cordial Antidote Called Aurum Vitae.

⁴⁴⁴ Garençières, *Mite Cast*, 4.

⁴⁴⁵ W., *A Briefe Treatise*, sec. Of the naturall causes of the infection of the aire, and of the plague.

too, the better to avoide those noisome stinkes, and filthy favors which are in every corner”⁴⁴⁶ and provided recipes for preservatives to keep “venomed ayre” from entering the body.⁴⁴⁷ Some also touched on the role of astral influence. Garencières, for example, argued that since it was believed that the positions of stars and planets could “cheer up and preserve the life of all things,” then it must also be that they can do bad: “from whence comes first the safety and preservation of all things, from thence also proceeds their death and destruction.”⁴⁴⁸

Many texts also combined or drew upon multiple theories. Hering reinforced both theories of miasma and contagion, noting that bodies should not be buried in churchyards because vapours from the bodies would poison the air and when citizens congregated there every week they would become infected and spread it to the rest of the city.⁴⁴⁹ Another text provided preservatives from the infection which included holding a vinegar-soaked sponge to the nose to prevent infection from bad air, as well as the airing of houses, beds, and clothes to prevent infection via contagion.⁴⁵⁰ Yet another text combined theories of astral influence and miasma, stating that some of the ways that the air could be corrupted were through “the influences, aspects, coniunctions, and opposition of ill planets,” as well as solar and lunar eclipses.⁴⁵¹ Garencières, on the other hand, noted that while a “peculiar disposition in the heavens”⁴⁵² likely caused the plague, it was also contagious “because its poison is easily imparted, and communicated from one to another.”⁴⁵³ Altogether, all three theories were present throughout the medical discourse and none of the texts argued against any one theory.

Preventatives & Remedies

Like the theories surrounding the epidemic’s origins, proposed preventatives, remedies, and treatment methods for the disease were ample and diverse. One thing that was generally agreed upon when curing the plague was that you must “fly to remedies

⁴⁴⁶ *Plagues Approved Physitian*, sec. Observations to be used, preserving from the Plague.

⁴⁴⁷ *Plagues Approved Physitian*, sec. Preservatives against the Plague, and Pestilence.

⁴⁴⁸ Garencières, *Mite Cast*, 4.

⁴⁴⁹ Hering, *Certaine Rvles*, para. 2.

⁴⁵⁰ “Lord haue mercy vpon vs. A speciall Remedy for the Plague.,” 1636, Early English Books, 1475-1640 (STC), EEBO.

⁴⁵¹ W., *A Briefe Treatise*, sec. Of the naturall causes of the infection of the aire, and of the plague.

⁴⁵² Garencières, *Mite Cast*, 4.

⁴⁵³ Garencières, 1.

without the losse of a moment of time,” since if the disease progressed too far then it could not be cured and would likely kill the patient.⁴⁵⁴ It was also expressed by many, however, that it was very easy to cure if you caught it in time. Garencières wrote that the plague was “one of the easiest diseases in the world to be cured,” if his suggested antidote be taken within four hours.⁴⁵⁵ Another claimed that if their antidote be taken “before the Disease have overmuch weakened them,” then they would be recovered by the following day; if they “have any running Sores, and be much weakened” then the antidote would nevertheless heal the sores and the “Patient will quickly recover perfect health.”⁴⁵⁶ Additionally, one dose of Woodall’s antidote was said to “taketh away the Pestilentiall Feaver, and therby cureth the Plague, that the patient frequently becometh well the very next day.”⁴⁵⁷

While many claimed that the disease was easy to cure if you took a specific antidote within a specific amount of time, however, the antidotes provided were numerous and varied greatly, as did the preservatives. Still, despite the plethora of preventatives and remedies that the texts provided, many of which fervently insisted that they would work, one physician admitted in 1604 that “it is generally confessed by all, That the specificall Antidot of the Pest is yet vnknownen.”⁴⁵⁸

Furthermore, while the remedies established by physicians varied greatly, they maintained boundaries surrounding their search for answers. Hering, for example, argued that the search for the cure should be in the cures of other similar diseases and condemned illogical remedies and preventatives and the charlatans who sold them.⁴⁵⁹ Many people, however, still created and sold such illogical and superstitious remedies. Some licensed physicians made a point of discounting these remedies and those who sold them throughout their texts. Hering wrote extensively on the wearing of arsenic amulets as a preventative because he “greatly feared, that through an vnfound and idle persuasion of their force, other more rationall and effectuall remedies were neglected.”⁴⁶⁰ He opposed

⁴⁵⁴ Garencières, 2.

⁴⁵⁵ Garencières, 2.

⁴⁵⁶ “An approved Antidote.”

⁴⁵⁷ Woodall, *Cvre Of The Plague*, sec. A Description Of The Cordial Antidote Called Aurum Vitae.

⁴⁵⁸ Hering, *Modest Defence*, 21.

⁴⁵⁹ Hering, 21.

⁴⁶⁰ Hering, 1.

the theory of using poison to treat a poison and subsequently claimed that the most learned physicians would not support it either.⁴⁶¹ Given “the varietie of safe, wholesome and saluiferous Medecins” available, Hering believed that those who used remedies such as empoisoned amulets were like “foolish flies, who forsake the sweet herbs and flowers to buzze about the candle, so long till their wings be singed, and themselues oft times burned with the Flame.”⁴⁶²

Garencières exhibited a similar sentiment, noting that “it is not a strange infatuation for people so to slight their lives, as to cast them credulously upon the trial of a drop of I know not what; of a water of I know not whom, and to neglect those remedies, which for the space of 1600 or 1700 years, have been found grounded upon reason, authorised by the best Physicians in all ages, and approved certain by a constant experience?”⁴⁶³ Hering expressed further concern for those that find themselves persuaded by imposters to use these false preventatives and remedies⁴⁶⁴ and Garencières went on to advise, “Let every one beware of those that set up bills for the curing of this and other diseases; *Good wine needs no bush*; the wonders they promise, lay an ambush to your purses, and their care of your health, is lesse then that of your wealth.”⁴⁶⁵ While many avenues for treatment were explored, therefore, recognized physicians remained focused on the realm of medicine and did not venture into the realm of superstition or magic.

4.2 INTERRELATIONS

While the political discourse agreed with much of what was put forth in the religious discourse, the religious texts expressed conflicting opinions regarding the government. The religious and medical discourse, on the other hand, aligned on some aspects and disagreed on others. One commonality between the two was the idea that the natural and the divine were connected. While there also existed some agreement on the convergence of religion and medicine in response to the plague, their arguments

⁴⁶¹ Hering, 22–34.

⁴⁶² Hering, 35.

⁴⁶³ Garencières, *Mite Cast*, 3.

⁴⁶⁴ Hering, *Certaine Rvles*, sec. That Amulets confected of Arsenicke, are no good preservatives against the Plague.

⁴⁶⁵ Garencières, *Mite Cast*, 3.

addressed different priorities, and the religious texts focused on upholding religion above medicine while the medical texts focused on reconciling the two. Finally, the medical and political texts maintained a level of symbiosis throughout the discourse. While the medical texts acknowledged political authority and supported public policy, the political texts supported the medical field and assertions made by them. Both collections of texts agreed that the plague was, at least partially, a natural disease that responded to natural remedies, and both texts supported the authority of the other institution.

4.2.1 Political & Religious Discourse

POLITICAL DISCOURSE

The political publications presented two primary themes concerning religion: that the divine played a role both in the causes and remedies of the plague, and that God had the ultimate authority, though the monarch was a close second.

Divine Aspects of the Plague

Many of the political texts examined briefly mentioned religion, while some discussed it extensively, and a few not at all. It was clear from the majority of the texts that the authors, like those of the religious texts, believed God to be involved in all aspects of life, including the causes, the nature, and the removal of the plague. Those that made only cursory mentions of religion frequently indicated a common belief that the divine played a role in the plague. Many claimed that plague policy and other measures would work with God's blessings, some thanked God for the staying of the plague, and others worried, 'God forbid,' that it would worsen. Others referred to the marks left on the body by the plague as God's marks or God's tokens⁴⁶⁶ and a book of orders condemned disorderly drinking as "the common sinne of this time."⁴⁶⁷

The texts that delved more extensively into religious aspects of the plague often focused either on the divine causes of the plague, or on the use of religion in staying the plague. Those that focused on the causes, like the religious texts, attributed the plague to God's punishment for man's sin. One text noted that "it hath pleased *Almighty God* to

⁴⁶⁶ James I, *Orders*, 1603, sec. What is to be done when there is any rising or swelling in any part.; James I, *Orders*, 1625, sec. What is to be done when there is any rising or swelling in any part.; Charles I, *Orders*, sec. What is to be done when there is any rising or swelling in any part.

⁴⁶⁷ City of London, *Orders Formerly Conceived*, sec. Tipling houses.

send forth his destroying *Angel* amongst Us, to scourge and chastise a stiff-necked and perverse Generation of People, by spreading the *Black-Cloud of Plague* and *Pestilence*, over many famous Nations & Cities beyond the Seas.”⁴⁶⁸ Meanwhile, those that provided more emphasis on the use of religion in staying the plague wrote of God’s mercy or the need for Christian charity during such times. One text accentuated the need to attend the monthly fasts and the twice-weekly public prayers, for example, “by which means God may be inclined to remove his severe hand both from amongst you and us.”⁴⁶⁹ Another more vehemently stressed the need for collective repentance, arguing that everyone must

endeavour to cure the sinful Plague of the Heart, to amend their Lives, to become new Creatures, to bear a high esteem of the Blessed Sabbath, and an ardent affection to his gracious Ordinances; That the Lord may say unto London, as he did unto Israel, Return thou back-sliding People, and I will not cause mine anger to fall upon you; for I am merciful, saith the Lord, and I will not keep anger for ever. A gracious saying, and worthy of acceptance.⁴⁷⁰

Regardless of the focus or intensity of the statement, nearly every political text acknowledged a divine element to the plague epidemics and their views aligned effortlessly with many of the views expressed throughout the religious texts.

Royal vs Divine Authority

Furthermore, as the religious texts did, the political texts propagated the idea that God had the ultimate authority. As was previously noted, these political texts promoted the idea that God was responsible for bringing as well as staying the plague. God’s mercy was considered to be one of the only ways to truly stop the plague because sin and punishment fell under his jurisdiction. One constant throughout the political texts was the frequent republishing of the order that infected houses have a red cross painted on the door followed by the words ‘Lord have mercy on us,’⁴⁷¹ and God’s mercy was often cited

⁴⁶⁸ Court of Aldermen, *Orders And Directions*, 1.

⁴⁶⁹ Charles II, “Rules and Orders.”

⁴⁷⁰ Court of Aldermen, *Orders And Directions*, 1.

⁴⁷¹ Court of Common Council, “Orders conceiued”; Court of Aldermen, “Orders to be vsed”; House of Lords, “Order of the Lords”; City of London, *Orders Formerly Conceiued*, sec. Orders concerning infected Houses, and Persons sick of the Plague.; Court of Aldermen, *Orders Conceiued And Published*, sec. Orders concerning infected Houses, and Persons sick of the Plague.; Court of Aldermen, *Orders And Directions*, 3; Charles II, “Rules and Orders.”

as the reason for the disease's waning.⁴⁷² Furthermore, God was thought to be responsible for allowing or preventing various plague policies and medicines from working, and many texts provided natural means of staying the plague while acknowledging that they would only work "through the goodnesse of Almighty God."⁴⁷³

While there was no debate between the political and religious spheres that God was the ultimate authority, the particulars of the matter did not always align. While the political texts sometimes referred to God as the "Divine Majestie,"⁴⁷⁴ and clearly acknowledged his authority, the earthly king remained a close second. Just as the king was viewed as a legal authority, he was viewed as a religious authority, and while these political texts clearly propagated the idea that God was the ultimate authority, they less frequently, and more subtly, noted that defying the king in the name of religion was unacceptable. Orders published throughout the first half of the century frequently contained the note that "if there be any person Ecclesiasticall or Laye, that shall hold and publish any opinions (as in some places report is made) that it is a vain thing to forbear to resort to the Infected, or that it is not charitable to forbid the same, pretending that no person shall die but at their time prefixed, such persons shall be not onely reprehended, but by order of the Bishop, if they bee Ecclesiasticall, shall be forbidden to preach."⁴⁷⁵ Therefore, while the king may have had less authority than God, he still considered himself to have more religious authority than religious officials throughout the church.

RELIGIOUS DISCOURSE

Religious texts rarely addressed political matters to any great extent, however, some authors took the opportunity to register their opinions on the current government and their actions. This propensity resulted in scattered commentary regarding the state of government and the convergence of religion and law.

⁴⁷² James I, Proclamation, July 8, 1604; Charles I, Proclamation, October 11, 1625, Tract Supplement, EEBO; Charles I, Proclamation, January 22, 1626, Tract Supplement, EEBO.

⁴⁷³ James I, Proclamation, October 18, 1603, Tract Supplement, EEBO.

⁴⁷⁴ James I, Proclamation, July 8, 1604; Charles I, Proclamation, November 11, 1640, Early English Books, 1475-1640 (STC), EEBO.

⁴⁷⁵ James I, *Orders*, 1603, para. 16.

State of Government

The religious texts proved to be a vessel for the authors to express their opinions and share their political views. While some comments were supportive of the government, the majority were critical. Authors like Burton supported the government's persecution of Catholics, for example, while others expressed disagreement with the persecution of Quakers, blaming the sins of government for the plague. George Bishop exemplified this in 1664, publishing a broadsheet addressed to the king and Parliament which stated "Thus saith the Lord; Meddle not with my People, because of their Conscience to me; and banish them not out of the Nation, because of their Conscience: For, if you do, I will send my Plagues upon you; and you shall know that I am the Lord."⁴⁷⁶ Bishop clearly believed that the government persecution of Quakers provoked God's retribution. Thomas Salthouse believed the same and wrote a pamphlet with a similar message the following year, exclaiming "Oh! England, thy leaders have caused thee to err."⁴⁷⁷ He stated that "Persecution is the crying sin for which the Land mourns" and argued that God had subsequently begun to exact his judgement through the plague.⁴⁷⁸ He went on to demand:

Cease smiting with the fist of wickedness, and if you expect an answer of your Prayers and fasting, which you pretend is for removing this dreadful Visitation, and to prevent the spreading and increase of the infection now begun in your Metropolitan City, where you first began to persecute, imprison, and transport the people of God out of the Land of their Nativity, for their Religion and Righteousness sake: Oh then remove those grievous yokes of bondage which is unjustly laid upon that innocent people, who are persecuted and imprisoned, under the reproachful denomination of Quakers.⁴⁷⁹

Alternatively, in 1642 with England on the brink of civil war, one author wondered, in light of the political and religious turbulence, if in addition to the widespread plague, God's judgement was being laid specifically upon the church and the kingdom.⁴⁸⁰ He stated that "a terrible tempest at this instant is over our heads; in regard

⁴⁷⁶ George Bishop, "To the King, and both Houses of Parliament," September 25, 1664, Early English Books, 1641-1700 (Wing), EEBO.

⁴⁷⁷ Salthouse, *Brief Discovery*, 7.

⁴⁷⁸ Salthouse, 3.

⁴⁷⁹ Salthouse, 4.

⁴⁸⁰ L, *Divine Balsam*.

whereof the Ark of this Church is tost with various and perilous waves; and the Ship of the State of the Kingdom, is now in great danger.”⁴⁸¹ Through collective repentance, however, he claimed that God would save England from destruction while facilitating “a most happy concurrence and union” between king and Parliament.⁴⁸²

Religious Authority

Commentary on the state of government was the primary form of political discourse throughout the religious texts, though others addressed religious authority and the place of the law. Viewpoints varied from author to author. Wright endowed political officials with significant power over religious affairs. He stated that “The Booke of the Law shall remaine with the King. So that the King hath power not onely to command in Ciuill Affaires, but in matters concerning Divine Religion” as did various kings from biblical times.⁴⁸³ He went on to argue that governors were wiser than regular men and while everyone should pray and do what they must for themselves and their family, there was no need to worry about public fasts, for example, unless a political official had ordered one.⁴⁸⁴

Burton was of a different belief. He clearly promoted religion over law, stating that “a Christian must deny himself in all ciuill Relation, if Princes or States make Lawes against the Law of Christ, against his Religion, & his pure Ordinances, threatning punishment to those that will not observe them.”⁴⁸⁵ While this was not directly aimed at the English government, he went on to criticize them for not holding a day of humiliation to stay the plague, after the day of thanksgiving. He proposed gatherings among families and parishes for fasting and prayer, stating “I hope this is not against the Law, I am sure it is not against Gods Law, to have such meetings.”⁴⁸⁶ While Wright likely agreed with the viewpoint put forth by the king, that God had the ultimate authority but that the king had the right to direct the country’s religion, Burton’s view of God’s law clearly surpassed his view of the king’s law. The sample of texts provided no conclusive viewpoint on the

⁴⁸¹ L.

⁴⁸² L.

⁴⁸³ Wright, *To Stay The Plague*, 3–4.

⁴⁸⁴ Wright, 4–5.

⁴⁸⁵ Burton, *A most Godly Sermon*, Doct. 2.

⁴⁸⁶ Burton, Doct. 4.

matter, though it seemed that religious opinions concerning the government varied greatly.

SYNTHESIS

The political texts consistently supported much of what was written or implied throughout the religious texts. The political discourse, however, acknowledged many widely accepted religious beliefs in what often seemed like a formality. Both collections of texts acknowledged a divine component to the plague, and both acknowledged that God had the ultimate authority. While the political discourse implied that the king interpreted that authority, this was not agreed upon throughout the religious texts. The political discourse seemed to toe the line between acknowledging religious formalities and maintaining political and religious authority. The religious texts often refrained from discussing politics though they occasionally used the opportunity to share political opinions which varied widely and may have criticized or supported the government.

4.2.2 Religious & Medical Discourse

RELIGIOUS DISCOURSE

One theme present throughout the religious discourse was the connection between the natural and the divine. Spiritual and physical health were written about in conjunction with one another, as were God and Nature. A second theme present within the religious discourse was the idea that religion came before medicine regarding causes and cures for the plague.

Natural and Divine

The religious discourse presented the natural and the divine as linked entities. The health of the spirit was believed to be connected to the health of the body, for example, and one sermon noted that the true cause of the plague was “the corruption of manners that corrupts our bodies, and rottenness in sinne that brings rottenness in the flesh.”⁴⁸⁷ Sin was seen as the corruption of the soul and plague as the corresponding corruption of the body. One prayer therefore proposed that each person look to the plague in their heart to turn from their sins and seek healing of the “wounds and infection both of soule and

⁴⁸⁷ Wright, *To Stay The Plague*, 15.

body.”⁴⁸⁸ Another text showed an inextricable connection between body and soul as it provided a divine antidote for the plague which claimed to work against the illness by healing the sinner’s sick soul.⁴⁸⁹

In addition to the connection between body and soul, the religious discourse drew many connections between God and Nature. One text, written by a chaplain, discussed extensively the role of astral influence in determining the cause of the plague and predictions for its future. He spoke of God and Nature as complementary forces, noting that “*God and Nature* punish none by proxy”⁴⁹⁰ and that “the infinite mercy of God, and the providence of Nature” ensured that there would always be a warning preceding the plague, for “any one that will diligently observe it.”⁴⁹¹ He also noted, however, that predictions made based on astral influence could be affected by God “frustrating the course of *Second Causes*, or taking advantage of us for *our Sins*.”⁴⁹² This text attributed the first cause of the plague to divine intervention and the secondary causes to nature. A sermon published in 1636 echoed this idea. Unlike the previous text, however, Wright condemned those that focused on the second cause, noting that “its not this or that Coniunction of the Planets, or the sundry Eclipses of the Sunne and the Moone that wisards fondly imagine; but the Lord of heauen and of heauenly creatures, of the earth and all that therein is, that so draweth the sword of his wrath, that the very ayre, and breath of our life shall be our poyson for the sinne of the Soule.”⁴⁹³

Other writers also placed the importance of God above that of Nature, and some actually described God as the God of Nature.⁴⁹⁴ This description supported a primary focus on the Divine as the ultimate, all-encompassing source of the plague and an entity outranking Nature. One author further deemed the plague too severe for natural measures, noting that “in this great mystery we must look beyond and above nature, to the God of

⁴⁸⁸ Church of England, *Thankesgiuing to God*, 1625, sec. The first Collect.

⁴⁸⁹ “An Unparalel’d Antidote Against the Plague: Or, a special Remedy for a Sick Soul; Whereby a Sinner may recover himself from the Vale of Teares to the Hill of Ioy.” 1665, Early English Books, 1641-1700 (Wing), EEBO.

⁴⁹⁰ *The Prophecie Of one of His Maiesties Chaplains, Concerning the Plague and Black-patches: With Mr. Gadburies happy and joyful Predictions, for the Decrease of the Plague both in the City and Suburbs [...]* (London, 1665), 5.

⁴⁹¹ *Prophecie*, 2.

⁴⁹² *Prophecie*, 5.

⁴⁹³ Wright, *To Stay The Plague*, 15–16.

⁴⁹⁴ Wright, 14; L, *Divine Balsam*.

Nature.”⁴⁹⁵ While the texts tended to favour the divine, they noted natural elements of the disease and occasionally incorporated the two.

Religion over Medicine

While many of the texts acknowledged the connection between the divine and the natural, this emphasis on God over Nature transferred into opinions surrounding plague treatment and methods of staying the plague where the discourse favoured religious means over medical ones. Many of the texts promoted divine remedies over natural ones, and a few texts promoted the use of medicine in addition to the divine by providing natural remedies to be used in conjunction with divine remedies, although secondarily.

While many acknowledged some connection between the divine and the natural, they still held the former well above the latter. One author noted, for example, that physicians had theories surrounding natural causes of the plague, “But Divines (who transcend them in this their judgement) are of another opinion, ascribing it to the wrath of God, and to the sin of man.”⁴⁹⁶ He believed that divines held more authority on the subject than physicians did because he believed it to be a primarily divine phenomenon. Wright echoed this thought in a sermon when he stated that while “naturall men seeke out naturall causes . . . hee that fauours of any Religion, cannot but say . . . this is the hand of God,” further undermining the authority of the physicians.⁴⁹⁷

Some texts also utilized idioms or metaphors to convey divine remedies through the use of medical language. For example, Wright’s sermon stated that the medicine needed to treat the plague was “a precious *Oyntment*, and Playster of *Attonement*.”⁴⁹⁸ Another author wrote a broadsheet titled *An Unparel’d Antidote Against the PLAGUE* which recommended the following:

First, *Fast and Pray*; then take a quart of the *Repentance of Niniveh*, and put in two handfulls of *Faith* in the *Blood of Christ*, with as much *Hope* and *Charity* as you can get, and put it into a Vessell of a clean *Conscience*, then boyle it on the Fire of *Love* so long, till you see by the Eyes of *Faith*, the black fome of the Love of this World stink in your Stomach, then scum it cleane off with the spoone of Faithfull *Prayer*; when this is done, put in the Powder of *Patience*, and take the

⁴⁹⁵ L, *Divine Balsam*.

⁴⁹⁶ L.

⁴⁹⁷ Wright, *To Stay The Plague*, 20–21.

⁴⁹⁸ Wright, 3.

cloath of Christs *Innocencie* and strain all together in His Cup, then drink it burning hot next thy heart, and cover thee warme, with as many Cloaths of Amendment of Life, as God shall strengthen thee and enable thee to beare, that thou mayst sweat out all the Poyson of *Covetousness, Pride, Whoredome, Idolatry, Usury, Swearing, Lying*, with such like. And when thou seest thyself altered from the aforementioned Vices; Take the Powder of *Say-well*, and put it upon thy Tongue, but drink twice as much *Do-well* daily, then take the Oyle of *Good-Works*, and Annoint therewith thy Eyes, Eares, Heart, and Hands, that they may be Ready and Nimble to Minister to the poor Members of Christ; when this is done then in Gods Name arise from Sin willingly, Read in the *Bible* daily, take up the Cross of *Christ* Boldly, and stand to it Manfully, bearing all Visitations Patiently, Pray Continually, Rest Thankfully and thou shalt Live everlastingly, and come to the *Hill of Joy* Quickly; To which Place, hasten us Good Lord speedily.⁴⁹⁹

Claiming that this antidote was unparalleled, this author was clearly promoting repentance and divine remedies over natural ones.

While less common, some texts incorporated natural remedies in with the divine ones, though not as the primary means of healing. One text wrote, “and as the learned Divines, Mr. Lillie and several others observe the only Plague-Water for this present Infection, is, to cleanse and wash your hearts of all filth and wickedness, to humble yourselves under this present Judgment, and to forsake your sins; that so the Lord may be pleased to command the slaying Angel to sheath his sword and to put their Arrows into the Quiver, which are now dispersed into several parts of the City.”⁵⁰⁰ Later in the text, however, the author contradicted himself when he provided a list of medicines to be used for those infected by the plague, including a note that “they may take two or three spoonfuls of Plague-water.”⁵⁰¹

This contradiction presumably arose from a desire to stress divine remedies over natural ones, and he was not the only author to emphasize the former while providing the latter to be used secondarily. Another text stated that “the great and principal *Antidote* against the *Plague* is, hearty Repentance and fervent Prayer: For Prayer upon Repentance is of all things most powerful with God,”⁵⁰² though it also noted, “*Venice-Treacle* being taken in time, is the onely *Antidote* against all Plagues and Poisons whatsoever.”⁵⁰³ Many

⁴⁹⁹ “Unparel’d Antidote.”

⁵⁰⁰ “Observations of Mr. Lillie.”

⁵⁰¹ “Observations of Mr. Lillie.”

⁵⁰² *Prophecie*, 6.

⁵⁰³ *Prophecie*, 3.

of the religious texts examined promoted the use of divine methods over natural ones, and the few that also provided natural remedies made it very clear that they were to be used secondarily and would only work with God's blessing.

MEDICAL DISCOURSE

Like the religious discourse, the medical also addressed the connection between the natural and the divine. A second theme present throughout the medical texts was the attempt to reconcile the spheres of medicine and religion within the context of the plague.

Natural & Divine

As in the religious texts, the medical texts made it clear that the health of the body and the health of the soul were related. The College of Physicians, for example, provided instructions for preservatives and remedies for the 'plague of the body' and far more extensive instructions for the 'plague of the soul.' For instance, preservatives for the 'plague of the body' included the taking of Elder-leaves, whereas preservatives for the 'plague of the soul' included "in the place of Elder-leaves, *Elders Examples*, following and imitating the Elders of Israel."⁵⁰⁴ Garençières also saw the plague as a spiritual disease, noting a "malignant and occult quality" which "lieth chiefly in the spirits, or spiritual parts of the blood."⁵⁰⁵ The physicians writing these texts clearly viewed the plague as both a natural and a divine malady.

Furthermore, like the religious texts, the medical discourse acknowledged a connection between God and Nature, though they also further developed the idea. Like some of the religious texts previously examined, many of the medical texts promoted the idea that the primary cause of the plague was divine, but the secondary causes were natural. It seemed an undisputed fact among physicians that the plague was sent from God, and one text noted that in addition to Divines, "all learned Physitians" agreed that the plague was "the stroke of Gods wrath for the sinnes of mankind."⁵⁰⁶ Furthermore, while the texts all provided natural preventatives and cures for the plague, and many believed that God supported these endeavours, most physicians also acknowledged that

⁵⁰⁴ Royal College of Physicians of London, *The Kings Medicines for the Plague, Prescribed for the yeare 1604. by the whole Colledge of Physitians, both Spirituall and Temporall. And now most fitting for this dangerous time of Infection, to be used all England over.* (London, 1636), sec. The first part.

⁵⁰⁵ Garençières, *Mite Cast*, 4.

⁵⁰⁶ Hering, *Certaine Rvles*, para. 1.

none could work unless sanctioned by God. Some texts noted that their recommended remedies would heal the patient “by the grace of God,”⁵⁰⁷ or that the medicine would cure the plague “by Gods favour.”⁵⁰⁸ Another stated that God’s mercy would allow the plague’s venom to evaporate through sweating and that after taking a remedy the patient would “by Gods mercy” be able to travel safely among others again.⁵⁰⁹

Several authors further noted that for these remedies to work, patients must first be right with God. One physician wrote that the primary antidote to the plague was “heartie repentance and conuersion to God,” noting that without it, these other remedies would not work.⁵¹⁰ Given that the cause of the plague was sin, he claimed that natural medicines could not possibly work until the cause had been dealt with, and suggested to the king and to Parliament that they hold “a generall humiliation of the people by prayer and fasting” to start everyone on the path to repentance.⁵¹¹

Another text claimed that curing the plague was easy and the reason so many were dying was because “God Almighty hath taken away their judgment, that they should not see, nor believe the means he hath appointed for them.”⁵¹² In Garençière’s view, the disease was easy to cure if caught quickly, but God was preventing the undeserving from catching it quickly. While natural remedies worked, therefore, they only worked when God allowed them to, on whom God allowed them to. As multiple texts noted, God held the ultimate power, including over peoples’ health. One text described him as “the true Physitian of soule and body”⁵¹³ and the College of Physicians referred to him as “the best Physician.”⁵¹⁴ While God was shown to have the ultimate power and the divine was shown to be the primary cause of the plague, however, the medical texts frequently focused on the secondary natural causes.

In addressing arguments proposed by some religious folks that the plague was solely divine and not natural, Hering admitted that “that which God inflicteth upon men

⁵⁰⁷ W., *A Briefe Treatise*, sec. Preseruatiues against the Plague or Pestilence.

⁵⁰⁸ “An approved Antidote.”

⁵⁰⁹ Woodall, *Cvre Of The Plague*, sec. Of the rule and order to be held in the taking of this Antidote for the cure of the Plague.

⁵¹⁰ Hering, *Certaine Rvles*, para. 1.

⁵¹¹ Hering, para. 1.

⁵¹² Garençières, *Mite Cast*, 2.

⁵¹³ *Plagues Approved Physitian*, sec. A Godly Prayer.

⁵¹⁴ Royal College of Physicians of London, *Kings Medicines*, sec. 1.

by the ministerie of angels, is not to be reckoned among natural effects,” however, he believed that “by the appointment of God, natural causes should be mooved, and actuated by the angels.”⁵¹⁵ While he believed in angels doing God’s work, he believed that those angels could use natural methods to do so, for example, delivering God’s wrath to men in the form of the plague. Others echoed this sentiment. One text cited “noisome vapours” as a common vessel of the plague, for example, noting that they were “sent from the Almighty, who alone defendeth from, sendeth to, and of his mercifull providence cureth the *Plague*; unto whom be ascribed all honour, and glory Amen.”⁵¹⁶ While admitting that the divine was the primary cause of the plague, however, the medical discourse heartily defended the presence of natural elements in the disease. One author admitted that the plague was sent by God, for example, but claimed that “if any man would heereupon conclude that it were not contagious, common experience would put out his Eies.”⁵¹⁷

Religion & Medicine

While some of the religious texts condemned science in the name of religion, the medical discourse frequently incorporated the two, arguing for the coexistence of religion and medicine and the use of divine and natural remedies in conjunction with one another. To do so they co-opted and built off beliefs presented throughout the religious discourse. They harnessed the idea that God was the God of Nature, for example, to justify natural methods and remedies. As one physician put it, “God Almighty hath an overruling hand, whereby he doth guide and direct naturall causes and effects.”⁵¹⁸ If the natural were part of the divine, it then followed that God would support science and the creation of medicine, which is what many physicians contended.

The Society of Chymical Physicians supported this argument. They created medicines to prevent and cure the plague, and argued that “the great God, who hath given us a heart and light to search into the mysteries of *Nature*, and the *mysterious nature* of diseases, will so second our endeavours by his special blessing, as to make us and our *Remedies* as his own hands, to secure the sound, and save the sick from this devouring

⁵¹⁵ Hering, *Modest Defence*, sec. To The Reader.

⁵¹⁶ Woodall, *Cvre Of The Plague*, sec. The Copy of a Certificate [...].

⁵¹⁷ Hering, *Modest Defence*, sec. To The Reader.

⁵¹⁸ Hering, sec. To The Reader.

Maladie.”⁵¹⁹ They believed that God not only provided the necessities to research natural phenomena but that he would also play a role in ensuring that the medicines created from this research were effective. Another text claimed that their proposed antidote “by a hidden speciall faculty (no doubt from above) helpeth Nature; utterly to vanquish her dreadfull enemy the Plague.”⁵²⁰ If antidotes had divine faculties and were intended to help Nature, then the divine and the natural must have been connected, and God must have supported the use of medicines in treating ailments.

Furthermore, one text argued that God not only approved of such medicines, but that he expected people to take care of themselves by the natural means that he had provided:

Doth not the whole Historie of the Bible, both the old and new Testament command unto vs the lawfull meanes whereby we are to be preserued from dangers. Therefore they are greatly too blame that contemne the good meanes which God hath appointed for their safetie, and doe willfully, rashly, and foolishly runne themselues into all kinde of dangers, saying, GOD is able to preserue them if it please him, themselues neither vsing the lawfull meanes God hath appointed, not yet eschewing the danger: which meanes according to the iudgment of the best Writers vpon this matter, thou shalt heere finde briefly, which I pray God may be profitable vnto thee, and that he will keepe vs from all plagues and dangers which wee have iustly deserued.⁵²¹

If God was responsible for the creation of natural remedies, then not using them when they were available could be considered offensive. While the medical texts agreed with much of what was argued throughout the religious texts, they also harnessed those arguments and built off them to justify the use of medicine in treating the plague.

SYNTHESIS

Both the religious and medical discourse agreed that the natural and the divine were linked, and much of the religious discourse agreed that the plague was a partially natural disease. The religious texts fervently argued that religion should come before medicine, however, likely due either to their strong religious beliefs or a fear of religion’s declining influence in society. The medical texts, on the other hand, calmly

⁵¹⁹ Society of Chymical Physitians, “Advertisement From The Society.”

⁵²⁰ “An approved Antidote.”

⁵²¹ W., *A Briefe Treatise*, sec. To the Reader.

acknowledged divine superiority while arguing that the natural world was a product of the divine, and medicine was therefore in line with religion, not against it. While their focus was undoubtedly the natural aspects of the disease, the medical discourse spent significant effort on the religious implications, and whether this was because they firmly believed in the plague's divine aspects or because they were responding to the vehemence of the religious discourse's opposing views and trying to appeal to the religious population is unclear. Overall, both collections of texts supported many of the same points, however the focus and the tone of their arguments differed. While authors from both spheres believed that the primary causes of the plague were divine and the secondary causes were natural, the religious texts naturally ascribed more importance to the divine and the medical texts focussed more on the natural.

4.2.3 Medical & Political Discourse

MEDICAL DISCOURSE

The medical discourse did not address the political realm extensively, though when it did, it was unfailingly supportive of both the government and its policies.

Supported Government

While medical texts did not focus on politics frequently, they often made reference to the political realm and, unlike some of the religious texts previously examined, they were generally supportive of the king, the government, and the political officials. One text, for example, wished good health upon the king and Parliament, praying that God keep them “from the rage of this man-slaying Hydra.”⁵²² Other texts were dedicated to the monarch or other political officials. One text began with “To THE HIGH AND POTENT KING CHARLES KING OF GREAT *Britaine, France* and *Ireland*, with the High and Honourable Court of Parliament, now assembled health and happiness.”⁵²³ Another addressed “the Right Honourable Sir JOHN LAWRENCE Knight, Lord Maior of the City of LONDON: With the Right Worshipfull the ALDERMEN his Brethren.”⁵²⁴ While cursory, these statements were placed very prominently at the

⁵²² Hering, *Certaine Rvles*, sec. The Epistle Dedicatorie.

⁵²³ Hering, sec. The Epistle Dedicatorie.

⁵²⁴ Garençières, *Mite Cast*, sec. The Epistle Dedicatory.

beginning of texts. Furthermore, a text written by the College of Physicians was titled *THE KINGS Medicine for the Plague*,⁵²⁵ and a broadsheet from the Society of Chymical Physitians advertised medicines for the plague which had been prepared “in pursuance of his Majesties Command.”⁵²⁶ Such notes indicate a certain kinship between the monarch and the primary medical institutions of the time.

Additionally, Woodall’s text included “The Copy of a Certificate, concerning the Vertue of the precedent Antidote; called *Aurum Vitae*, from the Justices, Ministers, and other the Officers of the Parish of S. *Margaret Westminster*” which lauded his cure.⁵²⁷ While receiving this certificate indicated some good sentiment between the physician and the political officials of the parish, as well as personal interaction between the physicians and the officials, this certificate was also used to give authority to Woodall’s publication and antidote when there were so many other antidotes being produced at the same time.

Supported Government Policy

Many of the medical texts also lent support to government policies put in place during times of epidemic. Plague policy supported many of the ideas put forth by the medical community and sometimes featured collaboration with the medical community, so, purposefully or not, physicians often supported these policies. Since contagion was a common theory among medical writers, some authors expressed support for policies intended to prevent spread through contagion. One text supported the notion that one should air out the clothing of the infected, for example.⁵²⁸ Another sought to limit contact with vagrants⁵²⁹ and those who had died from the plague, lest it spread among the living.⁵³⁰ Other texts simply implored readers to do their civic duty in staying the plague. Some stressed the importance of doing one’s duty to keep the city clean and prevent the spread of the infection, for example.⁵³¹ One text noted that any who were bound by duty or office to stay in an infected city, had no business fleeing,⁵³² while another provided

⁵²⁵ Royal College of Physicians of London, *Kings Medicines*.

⁵²⁶ Society of Chymical Physitians, “Advertisement From The Society.”

⁵²⁷ Woodall, *Cvre Of The Plague*, sec. The Copy of a Certificate [...].

⁵²⁸ Royal College of Physicians of London, *Kings Medicines*, sec. Sundry Medicines for the Plague.

⁵²⁹ Hering, *Certaines Rvles*, sec. Certaine directions for the vse of the poorer sort of people [...].

⁵³⁰ Hering, para. 2.

⁵³¹ Hering, paras. 4-7; Royal College of Physicians of London, *Kings Medicines*, sec. Sundry Medicines for the Plague.

⁵³² Hering, *Modest Defence*, To The Reader.

preventative measures for those that were bound by office to visit the sick.⁵³³ Whether it was their purpose or not, such statements from physicians supported the authority of politicians issuing and enforcing such policies.

POLITICAL DISCOURSE

One theme from the political discourse was the frequently reiteration and support of theories and information created by the medical sphere. The political discourse also supported and recognized the authority of recognized physicians, particularly through collaboration with the College of Physicians.

Supported Medical Theory

As was previously mentioned, the medical texts clearly propagated the idea that the plague was, at least partially, a natural disease. They believed in natural causes, preventatives, and remedies. The political texts supported these beliefs. The political discourse propagated the idea that the plague was contagious and showed ample support for natural medicines in preventing and curing the plague. As was previously mentioned, the medical discourse entertained multiple epidemic theories though the most prominent one was contagion. While occasionally addressing miasma, the political texts strongly reinforced the idea that the plague was contagious. They specifically stated on many occasions that the plague was contagious, or simply referred to it as ‘the contagion,’ and their plague policies supported this notion.

In the orders of 1603, for example, they advised that the clothing and bedding of the infected be either burned or aired out “for that the contagion of the plague groweth and encreaseth no way more.”⁵³⁴ In the orders of 1665, it was added that “care be taken of Hackney Coachmen, that they may not (as some of them have been observed to doe) after carrying of infected persons to the Pesthouse, and other places, be admitted to common use, till their Coaches be well aired, and have stood unimployed by the space of five or six daies after such service.”⁵³⁵

In addition to supporting practices of cleaning and airing, the texts strongly advised against people congregating in groups and many proclamations stated that courts

⁵³³ Hering, *Certain Ryles*, sec. Preservatives against the Pestilence.

⁵³⁴ James I, *Orders*, 1603, para. 13.

⁵³⁵ Court of Aldermen, *Orders Conceived And Published*, sec. Hackney Coaches.

would be adjourned until conditions improved. In 1625 Charles I issued a proclamation adjourning his courts since “although by Gods mercy that grievous sicknes is much asswaged in those Cities and parts adjoining,” there was still a risk that drawing people together for the term could further disperse the infection.⁵³⁶ Five years later he issued a proclamation adjourning the courts again and demanding that those who retired to the country for the summer and returned to London or Westminster in the winter stay in the country all winter, unless on urgent business, to prevent further spreading of the plague.⁵³⁷

Quarantine was also a key policy throughout the years and further spoke to the belief in contagion. The orders of 1646, for example, noted that if anyone left an infected house to travel elsewhere, then the parish from whence they came had to retrieve them at their own cost and bring them back during the night to face their punishment, decided upon by the Aldermen and Justices of the Peace, further, the house of the one who housed the escapee had also to “bee shut up for twenty days.”⁵³⁸ Furthermore, after the revision of the orders in 1666, it was ordered that every town and city create their own pest-house in case of another epidemic.⁵³⁹ Such buildings greatly helped with quarantine and with keeping the healthy apart from the sick. This evidence shows that for the entirety of seventeenth-century plague epidemics, the government supported the notion that the disease was contagious.

In addition to their emphasis on the contagious nature of the disease, the political texts frequently provided natural preventatives, remedies, and practices to help treat and stop the spread of the plague. Most of the books of orders for example provided multiple recipes for treating the plague. The 1603 orders provided a preservative from the plague, noting that if you take it every morning, then “by the grace of God you shall be safe from the Plague,” going on to state that “no man which is learned, if he examine the simples of this medicine whereof it consisteth, and the nature and power of them, can deny but that it

⁵³⁶ Charles I, Proclamation, October 11, 1625.

⁵³⁷ Charles I, Proclamation, September 9, 1630, Early English Books, 1475-1640 (STC), EEBO.

⁵³⁸ City of London, *Orders Formerly Conceived*, sec. No person to be conveyed out of any infected house.

⁵³⁹ Charles II, “Rules and Orders.”

is a medicine of great efficacy against the Plague.”⁵⁴⁰ The authors clearly believed the plague to have natural qualities if such natural remedies could work so well.

In addition to recipes and medicines, the political texts frequently mentioned practices which indicated natural elements of the disease. Some, for example, suggested perfumes and fires to cleanse the air of a house.⁵⁴¹ Others noted that cold temperatures may help the plague dissipate⁵⁴² whereas others still condemned the presence of filth and standing water around the city.⁵⁴³ The political discourse therefore supported the presence of a variety of natural elements in the disease, even more so than it supported its divine elements.

Supported Recognized Physicians

Furthermore, the political discourse frequently supported the authority of physicians and the use of consulting physicians to treat the plague. The government particularly supported the College of Physicians. Books of orders frequently featured collaboration with the College and provided multiple pages of advice and recipes from learned physicians for treating and preventing the plague. Furthermore, a text from 1625 ordered that consultation be had with the College of Physicians and certain physicians and surgeons be appointed to work with those infected with the plague. It further demanded that those appointed be the only ones to treat plague victims and that they do not treat anyone who does not have the plague.⁵⁴⁴

The government therefore clearly believed in the use of medical practitioners in treating the disease. A list of orders published in 1666 further noted that “what relates to Physicians, Chyrurgeons, and such other persons as are necessary for the preservation and help of such who shall be Infected, the same is left to your particular care and discretion.”⁵⁴⁵ While the government therefore left the seeking and use of medical practitioners to the individual at this time, they made it clear that they believed them to be

⁵⁴⁰ James I, *Orders*, 1603, sec. Preseruatiues Cordials: A well approoued Medicine to preserue.

⁵⁴¹ James I, *Orders*, 1625, sec. An aduise set downe [...]; Charles I, *Orders*, sec. An aduise set downe [...].

⁵⁴² James I, Proclamation, October 18, 1603; James I, Proclamation, September 16, 1603, Tract Supplement, EEBO; James I, Proclamation, September 23, 1606, Tract Supplement, EEBO; Charles I, Proclamation, October 11, 1625; Charles I, Proclamation, September 9, 1630; Charles I, Proclamation, October 7, 1636.

⁵⁴³ Court of Aldermen, “Orders to be vsed.”

⁵⁴⁴ Court of Aldermen.

⁵⁴⁵ Charles II, “Rules and Orders.”

necessary in the treatment of the plague, just as their supplying of recipes and advice throughout the years clearly showed them to believe that natural remedies were fundamental in treating the disease. Political discourse supported both physicians and their natural remedies.

SYNTHESIS

While the medical and political texts support one another's content throughout their publications, the medical and political spheres also supported one another's authority. While the medical texts did not spend much time addressing political matters, they frequently showed support for political officials and plague policy. Given the resistance that the medical sector faced from the religious sphere, this may have been an attempt to strengthen their relationship with the political sphere and gain an ally. The political texts, on the other hand, supported the idea that the plague had natural elements to it and that it could be treated and prevented through natural means, subsequently providing authority to recognized medical practitioners.

4.3 SUMMARY OF FINDINGS

4.3.1 Primary Narratives

The political discourse was primarily concerned with the good of the public and focussed on the need for citizens to do their due diligence in preventing the spread of the plague. They believed everyone to have a role to play in defeating epidemics, and threatened punishment for those that did not fulfill them. The political discourse also expressed significant concern for the poor members of parishes, but they did not support beggars or other poor that wandered the streets. The religious discourse was characterized by a focus on divine retribution, sin, repentance, and God's mercy. It was widely believed that the plague was sent by God as punishment for the sins of men, and while repentance was deemed the necessary response, they claimed that it was only through God's mercy that things would improve. Beyond this, the nature of the discourse varied from author to author. The medical discourse was focused on the nature of the disease and how it was different from others, while presenting a variety of different responses to it from physicians. Theories concerning its origins, preventatives, and treatments all varied.

4.3.2 Interrelations

The political and religious fields seemed to clash occasionally. While the political texts remained primarily neutral, they asserted their dominance over religious matters, acknowledging religious customs while maintaining their authority over religion and religious officials. The religious texts only occasionally mentioned politics. When they did, they expressed conflicting political opinions but showed no reservations concerning outright criticism of the government. The religious and medical spheres appeared to have a precarious relationship. The religious texts acknowledged a connection between the divine and the natural but belittled the field of medicine in the larger context. Whether this was due to their strong beliefs or fear of their declining influence in society is unclear. The field of medicine, on the other hand, seemed to be fighting this reaction in an attempt to reconcile the two spheres. While their focus was the natural, they acknowledged the superiority of the divine, whether because they believed it or because they were pandering to religious members of society. Finally, the medical and political spheres had a somewhat symbiotic relationship. The medical texts showed nothing but support for the government and various political officials and policies, while the government collaborated with medical institutions and accepted much of their knowledge as fact. Both spheres supported one another and likely benefited from the other's support as they faced push-back from the religious sphere.

While the political discourse supported both divine and natural theories surrounding the plague and remained primarily uncontroversial with both spheres, they showed the medical sphere significantly more support than the religious sphere. The religious discourse varied and showed both support and opposition for the political and medical spheres although opposition was more common, particularly towards the medical realm. Finally, while the religious sphere was often critical of medicine, the medical texts sought to reconcile the two spheres in light of the plague. The medical discourse did not much involve itself with politics but frequently made cursory acknowledgments of political authority. The College of Physicians and the Society of Chymical Physicians in particular showed support for the king.

Chapter 5: Discussion

While studies pertaining to publications concerning plague in England are common, the results of this study add to the existing body of literature. These results contribute to the field of information studies by creating a better understanding of the way that print was used by the political, religious, and medical realms during seventeenth-century plague epidemics. They also contribute to historical studies by eliciting a better understanding of the relationships between the three realms. This chapter situates these findings within the academic literature to answer the research questions posed earlier. Section 5.1 discusses findings related to the first research question: ‘what were the main themes or narratives conveyed by political, religious, and medical plague publications?’ It discusses themes presented as part of the primary narrative of each collection of texts. Section 5.2 discusses findings related to the second research question: ‘how did the political, religious, and medical publications responding to seventeenth-century outbreaks of plague differ or overlap?’ It examines the relationships between the three realms that were evident in the findings of the study. Finally, section 5.3 presents a summary of the discussion.

5.1 PRIMARY NARRATIVES

5.1.1 Political Discourse

The notion that everyone had a duty to fulfill in staying the plague was a sign of the severity and prevalence of the disease. Citizens were not just being affected by the plague, but they were expected to affect change through their actions. The disease was widespread, so the response needed also be widespread. While epidemics of plague had always been extensive, the role that the public was expected to play in suppressing the disease was less significant in previous centuries. The continued severity of outbreaks of plague in seventeenth-century England suggested that the scope of public health measures needed to be widened and adapted to meet the scope of the disease. The emphasis throughout the political texts on everyone fulfilling their civic duties and obeying plague orders, therefore, is indicative of the fact that England’s epidemic management strategy,

which had been instituted in the sixteenth century, was being adopted as an established part of society.⁵⁴⁶

Plague policy was clearly a large part of legislation, and political action throughout the years 1603–1666 also evolved during this time. While the plague orders consisted of much of the same information throughout the years, there were additions and changes made to policy over the century. Additionally, plague orders gained legal support in 1604 through an act which also provided the first penal sanctions for those who disobeyed quarantine orders.⁵⁴⁷ In this way the plague also expanded upon the duties of those in law enforcement and assigned law enforcement duties to many who had not done them before. The plague responses seen throughout the political publications show an increased concern for public health in response to the severity and prevalence of plague epidemics at the time.

It was further made clear throughout the political texts that disobedience and negligence would be met with potentially severe punishment. While likely rooted partially in concern for the public and in an assertion of authority, the ferocity of the political response suggests that disobedience and negligence may have been common. The plague created difficult circumstances for everyone, and some level of disobedience was to be expected. The quarantine policies implemented during this time were more severe than other countries and were not viewed favourably by the public.⁵⁴⁸ It was also noted that some grew reckless and flouted regulation, purposefully endangering themselves and others.⁵⁴⁹ Given the numerous threats of punishment throughout the publications, disobedience seems like it may have been a likely response.

Conversely, Slack notes that the threats were often more severe than the actual punishments and “the death penalty was a deterrent rather than a reality.”⁵⁵⁰ In the face of a disease so mysterious and destructive, these threats could simply have been an attempt by the political sphere to assert authority and convey that they were in fact doing something. Furthermore, Kyle argues that violence was not an efficient means of creating

⁵⁴⁶ Slack, *Impact of Plague*, 200.

⁵⁴⁷ Slack, 211.

⁵⁴⁸ Hammill, “Miracles and Plagues,” 88; Slack, *Impact of Plague*, 210–11; Newman, “Bubonic Plague and Quarantine,” 824.

⁵⁴⁹ Beier, *Sufferers & Healers*, 254.

⁵⁵⁰ Slack, *Impact of Plague*, 212.

order and the government subsequently relied on political publications for communicating with the public and maintaining stability.⁵⁵¹ While the texts examined frequently threatened punishment, it seems likely that this was a method of enforcement in itself. Since threats of punishment were communicated widely throughout the population, then perhaps fear prevented significant episodes of disobedience.

Moreover, the data also showed that the political sector paid much attention to the poor during outbreaks of plague. While the texts frequently expressed concern for poorer citizens, however, they also on occasion perpetuated a fragmented view of poverty. While they initiated aid for the poor, they also supported the notion that plague was a disease of the poor. Furthermore, they frequently threatened punishment for vagabonds, vagrants, and other transient people. This supports the argument that there were two types of poor in London, and they were each treated differently by the government. As Muñoz articulates, the government programs created in response to plague epidemics “categorized London’s poor into the deserving and the undeserving.”⁵⁵² She claims that “England’s poor laws show evidence of distinction between defensible hardship and inexcusable poverty. Poor policies called for punishment of healthy beggars through whippings, while the deserving poor were allowed in almshouses, illustrating the drastic differences in treatment of the poor.”⁵⁵³ Moreover, Slack argues that plague regulations were being implemented as a means of social control and went hand in hand with England’s Poor Law. “The threat from the poor in early modern towns seemed all the greater because they were perceived to be sources of infectious disease,” and measures taken against contagion frequently resulted in the persecution of the poor as well.⁵⁵⁴ Transient people, therefore, were particularly affected by plague policies which were intended to control their actions as much as they were intended to preserve the health of the rest of the population.

⁵⁵¹ Kyle, “Monarch and Marketplace,” 774.

⁵⁵² Muñoz, “Problem of Medicine.”

⁵⁵³ Muñoz.

⁵⁵⁴ Slack, “Responses to Plague,” 447.

5.1.2 Religious Discourse

The view that plague was a punishment from God had pervaded English society since the arrival of the Black Death and Beier notes that in the seventeenth century the plague was still viewed as a weapon of God which was used to punish human beings.⁵⁵⁵ This view was unsurprisingly supported throughout the religious texts examined which claimed that the plague was a punishment sent from God in response to the sins of men. The texts also clearly ascribed to the belief that the plague was a collective punishment and required collective repentance, a belief which Grigsby notes emerged around the time of the Black Death.⁵⁵⁶ Beier mentions a seventeenth-century reverend who worried about the repercussions of his fellow townsmen not repenting well enough,⁵⁵⁷ and this fear also reverberated throughout the religious discourse.

Throughout the discourse blame was also laid for the plague. They frequently blamed all men, claiming that it was a deserved punishment for their sins and that they could not possibly repent enough and only God's mercy would save them. The multitude of religious and political changes which took place throughout the century, however, assured the presence of more targeted attacks. Slack notes that epidemics were used "as a stick to beat political or religious opponents."⁵⁵⁸ This was evident in the texts examined as certain writers condemned Popery, for example, or the government's persecution of non-conformists. While many views presented throughout the religious publications were extreme, these texts were written primarily by religious officials who Wear notes "reacted to plague in a more intense and sustained way than any other illness, seeing it as one of the greatest manifestations of God's power."⁵⁵⁹

5.1.3 Medical Discourse

The idea that plague was unique permeated the medical discourse. While some of the texts compared it to other diseases, for the most part it was viewed as an unknown, for which answers had yet to be found. The fact that plague could present as bubonic, pneumonic, or septicaemic likely contributed to the confusion since they all presented

⁵⁵⁵ Beier, *Sufferers & Healers*, 156.

⁵⁵⁶ Grigsby, *Pestilence*, 123.

⁵⁵⁷ Beier, *Sufferers & Healers*, 159.

⁵⁵⁸ Slack, *Impact of Plague*, 247.

⁵⁵⁹ Wear, *Knowledge and Practice*, 277.

with different symptoms. The different variations of the disease were not understood at the time and multiple presentations were not seen in other ailments, adding to the distinctiveness of the disease. This view of plague as unique may also have contributed to the wide variety of information presented throughout the texts, since “against plague all the resources of medicine were brought into play.”⁵⁶⁰ Each author attempted to answer questions surrounding the disease within the context of the natural world but the unknown nature of plague led to physicians drawing on all kinds of medicine and theories, exploring all logical avenues, and experimenting, which led to a varied and sometimes contradictory array of voices. As Wear notes, medical writers “drew upon the knowledge and practices of medicine, surgery and pharmacy, and of regimen and environmental health” in attempts to prevent and cure plague.⁵⁶¹

This was the case with both the causes and the treatments of the disease. As was previously mentioned, there existed three primary theories concerning the origins of epidemics: contagion, miasma, and astral influence. Hirst notes that while miasma was historically the most prominent theory, contagion gained ground with the Black Death.⁵⁶² Throughout the texts examined there was no debate surrounding which theory was the most likely; authors frequently drew on more than one theory and none discounted any one theory. This further supports Hirst’s assertion that “in marked contrast to most authorities of the eighteenth and nineteenth centuries—a time of fierce battles between the rival schools of miasma and contagion—the authors of [medieval plague] tractates had little sense of any radical inconsistency between these ideas. In fact, we often find theological, astrological, miasmatic, and contagious factors simultaneously entertained as possible causes of epidemic disease.”⁵⁶³ This approach clearly persisted into the seventeenth century, likely due, in part, to uncertainty about the most plausible theory and an attempt to play it safe by covering all the bases. With more expertise in theory than in practice, licensed physicians dedicated significant effort to these theories.

With preventatives and cures, physicians similarly drew upon a vast array of knowledge. They embraced a multitude of remedies. Some texts promoted one antidote

⁵⁶⁰ Wear, 278.

⁵⁶¹ Wear, 278.

⁵⁶² Hirst, *Conquest of Plague*, 22–23.

⁵⁶³ Hirst, 40.

and others provided lists of remedies but the only time they argued against a cure was when it involved poison or superstition and went against the physician's rational approach to treating the disease. Some of the texts spoke of frauds selling such fake cures, though given the disdain that some physicians had for unlicensed practitioners,⁵⁶⁴ some of these 'frauds' may have simply been healers that licensed physicians did not approve of. Licensed physicians, after all, were trusted more with giving life advice whereas unlicensed practitioners typically had more experience actually administering treatment.⁵⁶⁵ Furthermore, licensed physicians, such as the ones writing the medical discourse, tended to flee plague-ridden areas and leave the sick to be treated primarily by nurses and other unlicensed healers.⁵⁶⁶ That is not to say, however, that the remedies mentioned in these texts did not reach the hands of those actually administering to the sick. Remedies were included in nearly all of the medical texts examined and Kassell notes that even outside of instances of plague it was common for cures to appear in pamphlets and broadsheets by the end of the century "as practitioners capitalized on London's medical marketplace."⁵⁶⁷

Despite the many cures presented by physicians Beier notes that plague "was generally regarded as incurable," a sentiment which was echoed in only one of the texts examined.⁵⁶⁸ Still, throughout the discourse, physicians put forth a plethora of different remedies, often with great zeal. As Wear notes, "despite the immense destruction of the plague and its close association with the wrath of God, medical writers exuded quiet (or sometimes clamorous) optimism that plague could be prevented and cured."⁵⁶⁹ With the political texts frequently threatening punishment and the religious texts preaching of God's wrath, the optimism from the medical community during this time likely contributed to the increased interest in medicine and subsequent medical revolution.

⁵⁶⁴ Cook, "Good Advice," 7–9; Beier, *Sufferers & Healers*, 8.

⁵⁶⁵ Cook, "Good Advice," 17–18.

⁵⁶⁶ Mortimer, *Dying and the Doctors*, 192–203.

⁵⁶⁷ Kassell, "Casebooks," 623.

⁵⁶⁸ Beier, *Sufferers & Healers*, 208.

⁵⁶⁹ Wear, *Knowledge and Practice*, 278.

5.2 INTERRELATIONS

5.2.1 Political & Religious Discourse

Unsurprisingly, the political texts addressed religion frequently. They reinforced the idea that the plague was sent by God for the sins of men and that he had control over its outcome. Many of the divine references made in the political texts were merely perfunctory and limited to parentheses, however. According to Slack, this practice of political texts relegating divine authority to second place started as early as 1595, and in the early seventeenth century it was clear that many town governments' "appeals to supernatural agencies were merely the formal lip-service paid to outdated assumptions."⁵⁷⁰ While many of the divine references made in the political texts were perfunctory, however, several were more elaborate and had a greater effect on society. As Wear notes, the assigning of days of prayer and humiliation throughout the country during plague time "instilled into the population the belief that God was efficacious."⁵⁷¹ Allowing such religious practices may also have been in the political sphere's best interest as they were forms of social control which could be regulated by both governmental and religious authorities. The texts also, at times, capitalized upon the ideas of 'Christian charity' and 'religious duty' in pursuing the desired responses to plague epidemics.

While the political texts supported many religious practices and ideas surrounding the plague, however, they also had very clear boundaries about what types of religious views were permitted. Slack notes that some texts published around the end of the sixteenth century indicate that the government feared that "it could be claimed that government policies, and the notion of contagion on which they rested, were a denial of God's pre-eminent role in the incidence of an epidemic."⁵⁷² This fear appears to have persisted into the seventeenth century. The political discourse acknowledged God as the ultimate authority but refused any religious explanation for the plague which opposed their laws. Arguing that one's death was predetermined and that the plague policies implemented by the government were consequently pointless, after all, would have

⁵⁷⁰ Slack, *Impact of Plague*, 241.

⁵⁷¹ Wear, *Knowledge and Practice*, 292.

⁵⁷² Slack, *Impact of Plague*, 230.

undermined the government's authority and the king's role as Supreme Head of the Church of England. The king, therefore, believed himself to retain the authority to interpret religion for the country, a concept not always appreciated throughout the religious discourse.

While the government held relatively static views on religion, views that supported the widespread beliefs of the population while reinforcing the government authority over religious officials, the religious discourse consisted of a variety of perspectives. While the typical struggle between church and state was replaced by a struggle between monarch and Parliament in the seventeenth century,⁵⁷³ religion still played a significant part in the political turmoil of the time. This turmoil was reflected throughout the religious texts. Views on the state of government, the sins of government, and the religious authority of government varied greatly throughout the texts though were primarily negative. Religious attacks on the political sphere can be partially attributed to the gradual shift in power from the religious to the political. While the king made sure to assert his dominance over religion, certain religious texts likely laid the blame for the plague on the political sphere in an attempt to bring them down a notch and reclaim some of their power.

Still, perspectives throughout the religious discourse varied and this appears to be in part due to the authors' different denominations. Two of the texts examined were written by the Church of England, for example, and since the king was the Supreme Head of the Church of England, these texts unsurprisingly either supported or failed to mention political matters. Two other texts were written by Quakers who vehemently criticized the government, which was also unsurprising due to the government's persecution of non-conformists. Similarly, Puritan views likely differed from Anglican views, particularly during the English Civil War when most Puritans supported Parliament while Anglican clergy supported the king.⁵⁷⁴ The sample of religious texts examined saw more government criticism than support, however, it is clear that opinions varied by religion and a larger sample size would be needed to adequately assess the political views present in the religious discourse.

⁵⁷³ Prall, *Church and State*, 99.

⁵⁷⁴ Prall, 125.

5.2.2 Religious & Medical Discourse

In many ways this study's findings regarding the connections between religious and medical discourse support the existing literature on the topic. While the medical discourse aligned with much of what was asserted throughout the religious discourse, the tones of the texts differed. The religious texts seemed to be defending religion while the medical texts seemed to be pleading for understanding.

As many have noted, the physical and spiritual and the natural and divine were widely thought to be connected at the time. Both the religious texts and the medical texts support this idea. As Wear states: "Christianity was from its beginning a healing religion. Christ, as a sign of his divinity, had healed the sick in body and mind, and the early Church Fathers and later writers used the image of Christ the Physician, and constantly employed medical metaphors in religious teaching. Christianity was concerned with both spiritual and physical healing."⁵⁷⁵ This perspective was supported throughout the religious discourse, though it was frequently implied that corruption of the soul led to a corruption of the body, so the remedy was to heal the soul – which would in turn heal the body. Little attention was paid to natural remedies.

The medical texts similarly acknowledged the connection between the divine and the natural, a point also made clear throughout previous literature. As Slack notes, it was widely believed that God was the primary cause of plague though he worked through secondary, natural means.⁵⁷⁶ And as Wear notes, due to this belief, "medicine was never fully isolated from religion."⁵⁷⁷ Even outside of instances of plague, the medical realm clearly believed the physical and the spiritual to be connected and the College of Physicians had long had ties to the English Church, who were themselves given the authority to grant licenses to physicians in the sixteenth century, though this power was later restricted.⁵⁷⁸ While the religious and medical discourse aligned on their belief in the connection between the physical and the spiritual, therefore, the medical texts vehemently emphasized the use of natural remedies in treating illness while the religious texts disregarded them.

⁵⁷⁵ Wear, *Knowledge and Practice*, 30.

⁵⁷⁶ Slack, *Impact of Plague*, 26.

⁵⁷⁷ Wear, *Knowledge and Practice*, 294.

⁵⁷⁸ Allen, "Medical Education," 132.

While Slack notes that “there was never an absolute dichotomy between medical and devotional works,” he also writes that “the very existence of two genres of publications on plague, with their separate emphases, encouraged exaggeration of one or other side.”⁵⁷⁹ Medical texts, therefore, often mentioned the divine as a “final caveat or an introductory formality” while the religious texts “naturally insisted on the role of providence and on the possibility of its action outside the normal course of nature.”⁵⁸⁰ The data support this notion. While both groups of texts acknowledged the connection between the natural and the divine, their views often diverged from there, though they rarely contradicted one another to any great extent. As Wear notes, religion indicated that it was “permissible” to use natural remedies, but only if accompanied by prayer seeking that God imbue the remedies with healing powers.⁵⁸¹ When they allowed the use of medicine, there were always caveats. Medicine, on the other hand, may have felt obligated to acknowledge the role of the divine in the health of the people in order to appeal to a wider audience. While the majority of the population believed in God and his role in the plague, they may have needed convincing and religious reassurance when it came to using medicine to treat it. While both groups of texts seemed to prescribe to the idea that the divine and the natural were connected and that the primary cause of the plague was divine and the secondary causes were natural, their tone and emphasis varied.

Some historians have argued that religion may have encouraged the medical revolution since the plague was created by God, as were the people and medicines which were being used to treat it.⁵⁸² Wear notes that “in a sense, Christianity gave medicine permission to exist; by incorporating it as a work of God, Christian theologians lessened the possibility of conflict between physical and spiritual healing.”⁵⁸³ While this perspective may have been prevalent in society, it was not well supported throughout the texts examined which were written by religious officials. The religious texts rarely outright opposed the use of natural medicines, however, they frequently made clear that divine remedies were of primary importance. They also occasionally attacked the

⁵⁷⁹ Slack, *Impact of Plague*, 38.

⁵⁸⁰ Slack, 38.

⁵⁸¹ Wear, *Knowledge and Practice*, 31.

⁵⁸² Mortimer, *Dying and the Doctors*, 208; Beier, *Sufferers & Healers*, 154–55.

⁵⁸³ Wear, *Knowledge and Practice*, 31.

approaches that physicians took to the disease. The ferocity of their arguments may very well stem from apprehension surrounding religion's declining influence in society. As Slack notes, "When preachers attacked those 'deists' and 'naturians' who interpreted plague in terms of the weather, or the humours, or physical circumstances in the suburbs, or some other 'causes in nature', they showed how much they were on the defensive."⁵⁸⁴ The tone of the religious texts was subsequently one of a sector of society which felt threatened, possibly with good reason since the medical revolution of the seventeenth-century corresponded with a decrease in people's dependence on prayer in response to illness.⁵⁸⁵ It is unclear if other members of society reacted the same way, though it is safe to say that some of the religious officials in seventeenth-century England did not fully support the medical revolution.

If the religious texts took on a defensive tone, the medical texts took on a pleading tone. As if in response to the religious reluctance to accept the medical revolution, the medical texts sought to reconcile the realms of religion and medicine. While the medical discourse acknowledged that divine remedies should be employed first, they obviously stressed natural remedies more, sometimes so vehemently that it resulted in an attack on religious perspectives. Slack notes that while fleeing an infected city was common practice, some could not do this due to necessity or duty, and this led to the belief that God would protect those who remained. Some physicians subsequently argued that this view prevented people from taking the proper precautions and even claimed that "the extreme providential interpretation which they attacked had led to the common opinion that plague was not infectious at all, 'as though God could not be God and the plague infectious,'" although Slack also notes that there were "remarkably few overt statements in the printed literature to this effect, and none at all before 1603."⁵⁸⁶ The medical texts examined support this notion: while physicians occasionally vehemently argued against the denial of the existence of natural elements of the disease, such as the idea that it was contagious, they widely accepted the less harmful divine perspectives without fight.

While there was the occasional conflict between religion and medicine throughout the medical texts, their primary focus was on natural healing and they attempted to justify

⁵⁸⁴ Slack, *Impact of Plague*, 240–41.

⁵⁸⁵ Mortimer, *Dying and the Doctors*, 207.

⁵⁸⁶ Slack, *Impact of Plague*, 43.

the use of medicine in a religious context, imploring people not to reject medicine and physicians outright due to religious beliefs. Historians have argued that medicine was so readily accepted during this time partially because of its connection to the religious. Wear suggests that religion allowed medicine to exist, and that people were expected to use the methods provided by God to preserve their health.⁵⁸⁷ Mortimer also notes that religion may have helped popularize medicine since the ingredients used to make remedies were a product of God,⁵⁸⁸ and Beier cites a belief that God created medicines and healers so religion must have subsequently supported medicine.⁵⁸⁹ This was not a perspective that was portrayed throughout the religious texts. The results of this study show that those who authored the religious texts concerning the plague did not view medicine so favourably, in fact they frequently discredited physicians. While the idea that God supported the use of medicine was not present in the religious discourse, however, it was propagated throughout the medical texts. While the religious discourse was defensive and zealous, the medical discourse was beseeching. It agreed with much of what was asserted throughout the religious discourse, minus the fanaticism, but argued that the natural world was of God's making and therefore pleaded with the public to admit the field of medicine into society.

5.2.3 Medical & Political Discourse

Alternatively, the medical and political discourse examined complemented one another. The medical discourse supported both political officials and their policies, and the political discourse supported physicians and their theories and treatments. The medical texts frequently addressed the monarch and government courteously while acknowledging their authority. While such statements were often cursory, they implied a general sense of amity between physicians and politicians. These statements were likely in response to the support that the monarch provided the College of Physicians. The data showed little support from the religious sector, so the medical sector was likely all the keener to secure an ally with the political sphere.

⁵⁸⁷ Wear, *Knowledge and Practice*, 31–32.

⁵⁸⁸ Mortimer, *Dying and the Doctors*, 208.

⁵⁸⁹ Beier, *Sufferers & Healers*, 154–55.

The College of Physicians held the power in the medical community, and it had always been supported by the monarch.⁵⁹⁰ It retained only a small influence over the public, however. Over the course of the sixteenth and seventeenth centuries their influence increased as the plague persisted and the medical revolution took hold. The College of Physicians as well as unlicensed medical practitioners gained more prominence over time.⁵⁹¹ In 1578 the Privy Council sought advice from the College of Physicians to include in the first book of plague orders⁵⁹² and their advice was subsequently included in orders published throughout the remainder of the sixteenth and seventeenth centuries. Furthermore, it was the seventeenth-century king's duty to preserve the public's health, which he did in part by "delegat[ing] some of his authority to the London College of Physicians, whose members possessed the requisite sound moral character, allowing them to be entrusted with duties of governance."⁵⁹³ The field of medicine likely supported the political realm because of its support of medical advancement. Mortimer notes that in the year 1600 most dying could do nothing but pray for recovery whereas by the year 1700 most dying would seek medical help.⁵⁹⁴ The political realm supported this change, and based on the data, they did so far more than the religious realm.

Medical texts also supported plague policies implemented by the government, likely because the government frequently based these policies upon the natural theories and medicines put forth by the medical field. Wallis notes that during early modern plague epidemics "religious rituals to propitiate God and charitable or civic efforts to alleviate poverty and contain the threat of social disorder" were more significant than efforts to treat the sick.⁵⁹⁵ He also acknowledges, however, that "measures to establish and maintain urban cleanliness in the streets and air were often significant, but they were driven largely by civic initiatives that circumvented medical practitioners."⁵⁹⁶ This

⁵⁹⁰ Harold J. Cook, "Policing the Health of London: The College of Physicians and the Early Stuart Monarchy," *Social History of Medicine* 2, no. 1 (1989): 1–33, <https://doi.org/10.1093/shm/2.1.1>.

⁵⁹¹ Beier, *Sufferers & Healers*, 7–8.

⁵⁹² Slack, *Impact of Plague*, 209.

⁵⁹³ Cook, "Good Advice," 20–21.

⁵⁹⁴ Mortimer, *Dying and the Doctors*, 208.

⁵⁹⁵ Wallis, "Place of Medicine," 2.

⁵⁹⁶ Wallis, 2.

appears to be true, as plague policies and political publications frequently addressed medical theories and treatments.

While the views of physicians varied, plague policy referenced those that were widely accepted such as the ideas that plague was contagious and that isolating the sick and keeping cities clean would help fight the disease. Though the political realm supported prominent medical theories, they also had their own agenda. While the medical texts addressed multiple theories of epidemics, the political texts particularly promoted the theory of contagion. According to Slack, this was done to lend support to the regulations that they were trying to implement, namely the isolation of the sick.⁵⁹⁷ In 1578 the Privy Council specifically stated that the plague was not miasmatic, like it had been in previous years, but rather was contagious.⁵⁹⁸ While miasma was not explicitly mentioned among the political discourse examined, Slack also notes that theories of miasma and contagion were often combined because it was thought that miasma “could be picked up from the proximity of the sick and absorbed through the pores of the healthy.”⁵⁹⁹ Thus, while the texts did not explicitly mention miasma, they may have taken the theory into consideration regardless and included it in their concept of contagion.

5.3 SUMMARY OF DISCUSSION

5.3.1 Primary Narratives

The focus of the political texts on civic duty is evidence of the evolving epidemic management strategy. While the threat of punishment for disobedience was pervasive and disobedience surely occurred on occasion, previous literature indicates that the threat may have been used as a method of enforcement and the punishments may not have been as severe as they threatened to be. The threats themselves may have helped prevent disobedience. Furthermore, while much attention was given to poverty throughout the texts, they also reinforced a split view of poverty where one type was deserving of help and the other was not, especially during times of plague.

⁵⁹⁷ Slack, *Impact of Plague*, 230.

⁵⁹⁸ Slack, 208.

⁵⁹⁹ Slack, “Responses to Plague,” 437.

The religious texts focussed largely on God and viewed the plague as a widespread divine punishment for the sins of men, as they had throughout centuries of plague epidemics. The primary components of the plague as viewed from a religious perspective changed little throughout the centuries and their focus remained on sin, collective punishment, repentance, and God's mercy.

The medical discourse on the plague was vast and varied during this time. Medicine was rudimentary and the plague was viewed as an unknown, so physicians explored all avenues in trying to make sense of it and entertained all possibilities. Yet, throughout episodes of this mysterious disease, physicians maintained their optimism, or at least their confidence in medicine. Of course, physicians had nothing to lose since they generally fled plague-stricken areas and many likely wrote these texts from the comfort of their country homes. Still, this positivity in the face of the plague likely contributed to the gradual acceptance of medicine in seventeenth-century England, especially when other realms of society were responding with threats of civic and divine punishment.

5.3.2 Interrelations

The political discourse addressed religious issues often in what appears to be at times merely a formality, and at others, a purposeful attempt to involve the religious realm in maintaining social control and guiding responses to plague epidemics. There also existed, however, a fear that religious claims surrounding the plague could undermine the government's policies. The religious discourse, on the other hand, varied greatly and whether one was supportive or critical of the government appears to be partially influenced by one's religious denomination. Of those who were combative, the declining influence of religion in the face of politics likely contributed to their negative opinions.

The religious and medical discourse agreed on many of the same issues, however, their tones differed greatly. Christianity has always concerned itself with healing and acknowledged the connection between the physical and the spiritual, and medicine at this time acknowledged the same and was frequently intertwined with religious beliefs. The religious realm tended to belittle the medical realm, however. While it is true that there was never a true rivalry between the religious and medical texts, the data is conflicted concerning the idea that religion helped popularize medicine because of the connection between the natural and the divine. This idea was promoted throughout the medical texts

which attempted to reconcile the two realms, but the religious discourse strongly emphasized divine causes and remedies to disease over natural ones. While the religious discourse was defensive, perhaps in response to their declining influence in society, the medical discourse was imploring readers to understand that the use of medicine need not be profane.

The medical and political discourse complemented one another. The medical texts spared few words for politics, but they supported political authorities and plague policy, and at times collaborated with the government. The monarch had always supported the College of Physicians and continued to do so throughout seventeenth-century plague epidemics, which subsequently supported the entire medical profession in England. They also collaborated with the College of Physicians on plague orders and harnessed medical theories in developing plague policies. While the influence of medicine may have been less than that of religion or politics, the policies created by the government were significant and aligned with many medical theories. Unlike the religious texts, the political texts supported the evolution of medical services during this time and likely contributed to the growing authority of the medical field and the medical revolution that took place during the seventeenth century. Still, political texts during this time favoured the theory of contagion over other theories entertained by physicians in an effort to justify their policies of isolation. Regardless of the possibility that the political sphere might pick and choose medical theories to suit their needs, the political realm supported the medical realm, and did so far more than the religious realm did. As both the medical and political spheres faced resistance from the religious sphere, they likely sought allies in one another.

Chapter 6: Conclusion

Citizens of England during the period from 1603 to 1666 were provided with a multitude of different publications, from the political, religious, and medical sectors of society, concerning the frequent epidemics of plague. I have shown throughout this work that the discourse created by the different realms presented a variety of views, which were at times contradictory. Each realm interpreted the plague within the context of its own worldview, but the seventeenth century was a transformative period and these views changed over time. Seventeenth-century England experienced multiple monarchs and political strife, it faced religious turmoil as laws surrounding religion were instated and abolished, and it saw the birth of a medical revolution. Nevertheless, all three spheres remained related with many of the same ultimate goals. As Cook states, “the medical, religious, and political policies of the period mandated order and obedience for the good of all.”⁶⁰⁰

6.1 THEORETICAL IMPLICATIONS

While many have studied political, religious, and medical responses to plague throughout England’s history, few have compared the three. This study has provided a more complete view of the different forces at play in seventeenth-century responses to plague. It also provided a brief overview of the type of information available to the average person concerning plague epidemics. The combination of thematic discourse analysis and quantitative content analysis was a favourable choice for this study. While qualitative analysis was necessary to provide the insight needed to answer the research questions, quantitative content analysis provided an additional layer of depth to the study. It further corroborated the primacy of key concepts identified throughout the thematic discourse analysis and allowed for a comparison between the prevalence of certain concepts across the different sectors. This study has subsequently supported, and expanded upon, previous literature.

At the beginning of this study, I outlined two primary research questions, the first of which sought to discover the primary themes present throughout these three collections

⁶⁰⁰ Cook, “Good Advice,” 21.

of texts. The main themes present throughout the political texts were a focus on civic duty and punishment, as well as a focus on poverty within the context of the plague. The religious texts focussed more on the plague as a punishment from God for the sins of men and the need for both repentance and God's mercy in halting the disease. Finally, the main narrative present in the medical discourse was that the plague was unique and the ways that physicians responded to it subsequently varied.

The second research question sought to discover how the political, religious, and medical publications differed or overlapped. The political discourse included aspects of religion and medicine in its publications, though it paid more attention to medicine and frequently addressed religion as more of a formality than anything else. The religious texts sometimes discussed politics, primarily negatively, though views varied from religion to religion. They also addressed medicine, occasionally acknowledging its value but frequently affirming its insignificance compared to religion. Finally, the medical discourse addressed religion as a permanent facet of society and therefore as an obstacle in getting society to accept medicine. It supported the political realm, however, likely in response to support received by the political realm. All three spheres influenced plague-ridden seventeenth-century England, and the plague subsequently influenced the political, religious, and medical atmospheres of the country.

Overall, the tumult of the period led to a slow decline in the influence of the religious sphere in English society, as it was being encroached upon by increasing political authority and an interest in medicine which birthed new attitudes towards religion. While previous literature noted the role of religion in allowing society to accept medicine, this perspective did not appear in the religious discourse but rather, in the medical discourse. The declining influence of religion appears to have occasionally led to defensive publications attacking both the government and the field of medicine. It seems that the political and medical spheres subsequently sought support from one another, an act which likely contributed to the progression of the medical revolution and its effects on seventeenth-century society. Plague outbreaks in seventeenth-century England contributed to the collaboration and engagement of the political and medical spheres in facilitating change while the religious sphere responded with a defensive and static position.

6.2 FUTURE RESEARCH

There exist many avenues from which this research could be expanded. As was previously noted, this study indicates that the belief that God supported the field of medicine was present in the medical discourse but not the religious discourse. While historians have noted the role that this belief played in advancing the medical revolution, it is unclear what sectors of society aligned with this belief. The results of this study may indicate different views between religious officials and the wider religious public as officials may have been more committed to lauding the divine over the natural than the rest of the religious population. Plague also caused extraordinary circumstances and religious officials responded more vehemently to it than they did other illnesses.⁶⁰¹ Publications concerning the disease may, therefore, have expressed different views than those published outside of plague epidemics. Finally, this result may have been an anomaly. Regardless, further research is needed to better understand the relationship between religion and the medical revolution in seventeenth-century England.

Likewise, the small sample size restricts the generalizability of these results, and a larger study would be beneficial in remedying this and in clarifying the study's results. Notably, this study showed that religious views, particularly towards political responses to the plague, varied by the different religious denominations of the authors. More research is needed to identify themes present within the texts produced by authors of different religions and the strength of each religion's influence upon society. Another avenue to be explored would be the differences between plague publications in England compared to the publications of similarly affected areas on the Continent. Research into the public's responses to these texts would also be beneficial to better understand their influence on society.

Additionally, this study was an interdisciplinary one and would benefit from further interdisciplinary research. While I drew from the fields of information studies and history, widespread health emergencies are an interdisciplinary problem that will only continue to grow in importance. Further, while the texts examined were hundreds of years old, the results of this study are far from inconsequential. By April of 2022, the coronavirus pandemic had afflicted approximately 30 percent of the United Kingdom's

⁶⁰¹ Wear, *Knowledge and Practice*, 277.

population and had killed approximately 0.2 percent.⁶⁰² While this is slight compared to England's seventeenth-century plague epidemics, the political, religious, and medical spheres of the twenty-first century faced many of the same issues. The political and medical sectors faced pushback from citizens who disagreed with public policy, religious groups similarly disobeyed and placed their beliefs above the law, and medical information varied from region to region.

Furthermore, while publications surrounding the plague were not uncommon during the seventeenth century, information surrounding the coronavirus pandemic has been particularly widely disseminated. The amount of information presented has also increased and the subsequent 'infodemic' has amplified and complicated some of the issues presented throughout this study which hold true today. Further research into historic plague outbreaks as well as comparisons with the coronavirus pandemic may provide insight into recent events and assist with future health emergency planning. After all, Boghurst's observation that "this Disease hath raged and made sad havocke in the world,"⁶⁰³ is as true today as it was in the seventeenth century, merely with a different disease. What better time, then, to learn from the past and prepare for the future?

⁶⁰² "WHO Coronavirus (COVID-19) Dashboard," World Health Organization, April 1, 2022, <https://covid19.who.int>.

⁶⁰³ William Boghurst, *Loimographia: An Account of the Great Plague of London in the Year 1665*, ed. Joseph Frank Payne (London: Shaw & Sons, 1894), 5, <https://iif.wellcomecollection.org/pdf/b24748535>.

Bibliography

PRIMARY SOURCES

“An approved Antidote or Cordiall Medicine, that by Gods favour cureth the Pestilentiaall Feaver, or Plague, with other contagious Agues or Feavers, beginning either hot or cold [...],” 1650. Tract Supplement. EEBO.

Bishop, George. “To the King, and both Houses of Parliament,” September 25, 1664. Early English Books, 1641–1700 (Wing). EEBO.

Boghurst, William. *Loimographia: An Account of the Great Plague of London in the Year 1665*. Edited by Joseph Frank Payne. London: Shaw & Sons, 1894. <https://iiif.wellcomecollection.org/pdf/b24748535>.

Burton, Henry. *A most Godly Sermon: Preached at St. Albons in Woodstreet on Sunday last, being the 10 of October, 1641. Shewing the necessity of Selfe-denyall and Humiliation, by Prayer and Fasting before the Lord, in regard of the present Plague we now lye under. Which God, in his good time, remove from amongst us*. London, 1641.

Charles I. *Orders thought meet by His Maiestie, and his Priiue Councell, to bee executed throughout the counties of this realme, in such townes, villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same [...]*. London, 1629.

Charles I. Proclamation. April 22, 1636. Early English Books, 1475–1640 (STC). EEBO.

Charles I. Proclamation. August 11, 1625. Early English Books, 1475–1640 (STC). EEBO.

Charles I. Proclamation. January 22, 1626. Tract Supplement. EEBO.

Charles I. Proclamation. November 1, 1635. Tract Supplement. EEBO.

Charles I. Proclamation. November 11, 1640. Early English Books, 1475–1640 (STC). EEBO.

Charles I. Proclamation. October 11, 1625. Tract Supplement. EEBO.

Charles I. Proclamation. October 7, 1636. Early English Books, 1475–1640 (STC). EEBO.

Charles I. Proclamation. September 9, 1630. Early English Books, 1475–1640 (STC). EEBO.

Charles II. “Rules and Orders To be observed by all Justices of Peace, Mayors, Bayliffs, and other Officers, for prevention of the spreading of the Infection of the Plague.,” 1666. Tract Supplement. EEBO.

Church of England. *A short forme of Thankesgiuing to God, for staying the contagious sickenes of the Plague: To be used in Common Prayer, on Sundayes, Wednesdayes, and Fridayes.* London, 1604.

Church of England. *A short Forme of Thankesgiuing to God For staying the contagious sicknesse of the Plague: To be vused in Common Prayer, on Sundayes, Wednesdayes, and Frydayes: set forth by Authority.* London, 1625.

City of London. *Orders Formerly Conceived and Agreed to be published by the Lord Major and the Aldermen of the City Of London: And The Justices of Peace of the Counties of Middlesex and Surrey, Concerning The Infection of the Plague. And now Re-printed and published by Order of the Honourable House of Commons.* London, 1646.

Court of Aldermen. *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, 1665.

Court of Aldermen. *Orders Conceived And Published By the Lord Major and Aldermen of the City of London, concerning the Infection of the Plague.* London, 1665.

Court of Aldermen. “Orders to be vused in the time of the infection of the Plague vvithin the Citie and Liberties of London, till further charitable prouision may be had for places of receite for the visited with infection.,” 1625. Early English Books, 1475–1640 (STC). EEBO.

Court of Common Council. “Orders conceiued and thought fit, asvvell by the Lord Maior of the City of London and the Aldermen his Brethren, as by the Iustices of Peace in the Countie of Middlesex, the Borough of Southwarke, and County of Surrey to be obserued vvithin their seuerall limits respectiuelly [...],” 1608. Early English Books, 1475–1640 (STC). EEBO.

Cromwell, Oliver. "An Ordinance For holding the Countie-Court for the Countie of Chester at the Town of Northvich, during the Continuance of the Infection of the Plague in Chester.," May 16, 1654. Thomson Tracts (TT). EEBO.

England and Wales. "An Act for the charitable reliefe and ordering of person infected with the Plague.," 1630. Early English Books, 1475–1640 (STC). EEBO.

Garencières, Theophilus. *A Mite Cast into the Treasury Of the Famous City of London; Being A Brief and Methodical Discourse of the Nature, Causes, Symptomes, Remedies and Preservation from the Plague, in this Calamitous Year, 1665. Digested into Aphorismes, by Theophilvs Garencieres Doctor in Physick.* London, 1665.

Hering, Francis. *Certaine Rvles, Directions, Or Aduertisments For This Time Of Pestilentiall Contagion: With A caueat to those that weare about their neckes impoisoned Amulets as a Preseruatiue from the Plague [...].* London, 1625.

Hering, Francis. *A Modest Defence Of The Caueat Giuen To The Wearers Of impoisoned Amulets, as Preseruatiues from the Plague: Wherein that point is somewhat more lergely reasoned and debated with an ancient Physician, who hath mainteined them by publicke writing [...].* London, 1604.

Hooker, Richard, and Isaac Walton. *The Work of Mr. Richard Hooker, in Eight Books of the Laws of Ecclesiastical Polity: With Several Other Treatises, and a General Index. Also, a Life of the Author.* Vol. 3. London: W. Clarke, 1821.

House of Lords. "Certain Orders thought meet to be put in execution against the Infection of the Plague.," September 9, 1641. Thomason Tracts (TT). EEBO.

House of Lords. "An Order of the Lords, for the better direction of the Overseers appoynted in the severall Parishes of the city of Oxford, against the spreading of the Infection of the Plague.," May 12, 1645. Early English Books, 1641–1700 (Wing). EEBO.

House of Lords. "Whereas upon the Lords meeting after their late recessse [...]," October 21, 1641. Early English Books, 1641–1700 (Wing). EEBO.

James I. *Orders Thought Meet By His Maiestie, And his Priuie Councell, to be executed throughout the Counties of this Realme, in such Townes, Villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same. [...].* London, 1625.

James I. *Orders, thought meete by his Maiestie, and his Priuie Counsell, to be executed throughout the Counties of this Realme, in such Townes, Villages, and other places, as are, or may be hereafter infected with the Plague, for the stay of further increase of the same.* [...]. London, 1603.

James I. Proclamation. July 8, 1604. Tract Supplement. EEBO.

James I. Proclamation. June 23, 1603. Early English Books, 1475–1640 (STC). EEBO.

James I. Proclamation. May 29, 1603. In *A booke of proclamtions, published since the beginning of his Maiesties most happy reigne ouer England, &c. Vntill this present moneth of Febr. 3. Anno Dom. 1609*, 20–21. London, 1610.

James I. Proclamation. October 18, 1603. Tract Supplement. EEBO.

James I. Proclamation. September 16, 1603. Tract Supplement. EEBO.

James I. Proclamation. September 23, 1606. Tract Supplement. EEBO.

L, I. *A Divine Balsam To Cure The bleeding Wounds of these dangerous Times. Or, The true cause of two grand and heauie Judgements of Almighty God now upon this Kingdome.* [...]. London, 1642.

“Lord haue mercy vpon vs. A speciall Remedy for the Plague.,” 1636. Early English Books, 1475–1640 (STC). EEBO.

Louth Park Abbey. *Chronicon Abbatie de Parco Lude = The Chronicle of Louth Park Abbey, with Appendix of Documents.* Edited by Edmund Venables and Sir William Henry St. John Hope. Translated by Arthur Roland Maddison. Vol. 1. Publications of the Lincolnshire Record Society. Horncastle, UK: Lincolnshire Record Society, 1891.

“The Observations of Mr. Lillie, and many Famous and Learned Divines, touching the present Visitation of the Plague of Pestilence; With a Prayer to be used in all Families, for sheathing of the Sword of the Destroying Angel, and to divert Gods heavy Judgments [...],” 1665. Early English Books, 1641–1700 (Wing). EEBO.

Parliament. “By the Lords and others His Majesties Commissioners. An Order for the Observance and Execution of the Statute made for the Reliefe and Ordering of Persons infected with the Plague.,” August 1, 1644. Early English Books, 1641–1700 (Wing). EEBO.

Parliament. “Die Martis, 2. Sept. 1645. Ordered by the Lords and Commons assembled in Parliament, that Friday next come fortnight shall be a day appointed for publique humiliation [...],” September 4, 1645. Early English Books, 1641–1700 (Wing). EEBO.

Parliament. “Die Veneris 16 Iulii 1647 Ordered by the Lords and Commons in Parliament assembled, that the Lord Mayor of of the City of London and Justices of the Peace [...].” John Wright, July 16, 1647. Early English Books, 1641–1700 (Wing). EEBO.

The Plagves Approved Physitian Shewing the naturall causes of the Infection of the Ayre, and of the Plague. With divers observations to bee used, preserving from the Plague, And signes to know the Infected therewith. [...]. London, 1665.

The Prophecie Of one of His Maiesties Chaplains, Concerning the Plague and Black-patches: With Mr. Gadburies happy and joyful Predictions, for the Decrease of the Plague both in the City and Suburbs [...]. London, 1665.

Royal College of Physicians of London. *The Kings Medicines for the Plague, Prescribed for the yeare 1604. by the whole Colledge of Physitians, both Spirituall and Temporall. And now most fitting for this dangerous time of Infection, to be used all England over.* London, 1636.

Salthouse, Thomas. *A Brief Discovery Of The Cause for which this Land Mourns, and is Afflicted. With Several Remedies To Be Applied in Order to the Removal Of the Present Visitation.* [...]. London, 1665.

Society of Chymical Physitians. “An Advertisement From The Society of Chymical Physitians, Touching Medicines by them prepared, in pursuance of his Majesties Command, For the Prevention, and for the Cure of the Plague.” 1665. Early English Books, 1641–1700 (Wing). EEBO.

University of Oxford. “Rules and Orders Made By The Vice-Chancellor of the Vniversity of Oxford, and Iustices of Peace, for the Good and Safety of the Vniversity, City and County of Oxford.” August 25, 1665. Early English Books, 1641–1700 (Wing). EEBO.

“An Unparalel’d Antidote Against the Plague: Or, a special Remedy for a Sick Soul; Whereby a Sinner may recover himself from the Vale of Teares to the Hill of Ioy.” 1665. Early English Books, 1641–1700 (Wing). EEBO.

Vickery, Thomas. *The Anatomie of the Bodie of Man*. Edited by Fredk Furnivall and Percy Furnivall. London: N. Trubner & Co., 1888.

W., I. *A Briefe Treatise of the Plague Wherein is shewed, The [brace] Naturall cause of the Plague. Preseruations from the infection. Way to cure the infected. Newly corrected with new additions and many approoued Remedies*. London, 1603.

Woodall, John. *The Cvre Of The Plague By An Antidote Called Aurum Vitæ. Being well approved to be an easie safe, and perfect cure thereof; as also of contagious Agues, or Feavers begining either Hot or Cold*. [...]. London, 1640.

Wright, Robert. *A Receyt To Stay The Plague. Delivered in a Sermon by R.W. Minister of Gods Word*. London, 1636.

SECONDARY SOURCES

Allen, Phyllis. "Medical Education in 17th Century England." *Journal of the History of Medicine and Allied Sciences* 1, no. 1 (1946): 115–43.
<https://www.jstor.org/stable/24619539>.

Aylmer, G. E. *A Short History of Seventeenth-Century England*. New York: New American Library of World Literature, 1963.

Barry, Jonathan. "Educating Physicians in Seventeenth-Century England." *Science in Context* 32, no. 2 (2019): 137–54.
<https://doi.org/doi:10.1017/S0269889719000188>.

Bean, J. M. W. "Plague, Population and Economic Decline in England in the Later Middle Ages." *The Economic History Review* 15, no. 3 (1963): 423–37.
<https://www.jstor.org/stable/2592917>.

Beier, Lucinda McCray. *Sufferers & Healers: The Experience of Illness in Seventeenth-Century England*. Social History Series. London: Routledge & Kegan Paul, 1987.

Blommaert, Jan. *Discourse: A Critical Introduction*. Key Topics in Sociolinguistics 3. Cambridge: Cambridge University Press, 2005.

Braun, Virginia, and Victoria Clarke. "Using Thematic Analysis in Psychology." *Qualitative Research in Psychology* 3, no. 2 (January 2006): 77–101.
<https://doi.org/10.1191/1478088706qp063oa>.

- Brownlees, Nicholas. *The Language of Periodical News in Seventeenth-Century England*. Newcastle upon Tyne, UK: Cambridge Scholars Publisher, 2011.
- Coe, Kevin, and Joshua Scacco. "Content Analysis, Quantitative." In *The International Encyclopedia of Communications Research Method*, edited by Jörg Matthes, 1:346–56. Hoboken, NJ: Wiley Blackwell, 2017.
- Cohn, Samuel Kline. *The Black Death Transformed: Disease and Culture in Early Renaissance Europe*. London: Arnold, 2002.
- Cook, Harold J. "Good Advice and Little Medicine: The Professional Authority of Early Modern English Physicians." *Journal of British Studies* 33, no. 1 (1994): 1–31. <https://www.jstor.org/stable/175848>.
- Cook, Harold J. "Policing the Health of London: The College of Physicians and the Early Stuart Monarchy." *Social History of Medicine* 2, no. 1 (1989): 1–33. <https://doi.org/10.1093/shm/2.1.1>.
- Creighton, Charles. *A History of Epidemics in Britain: From A.D. 664 to the Extinction of Plague*. Vol. 1. Cambridge: Cambridge University Press, 1891.
- Cresswell, John W., and Cheryl N. Poth. *Qualitative Inquiry & Research Design: Choosing Among Five Approaches*. 4th ed. Los Angeles: Sage Publications, 2018.
- Cressy, David. "Levels of Illiteracy in England, 1530–1730." *The Historical Journal* 20, no. 1 (1977): 1–23. <https://www.jstor.org/stable/2638587>.
- Cressy, David. "Literacy in Seventeenth-Century England: More Evidence." *The Journal of Interdisciplinary History* 8, no. 1 (1977): 141–50. <https://www.jstor.org/stable/202599>.
- Cummins, Neil, Morgan Kelly, and Cormac Ó Gráda. "Living Standards and Plague in London, 1560–1665." *The Economic History Review* 69, no. 1 (2016): 3–34. <https://doi.org/10.1111/ehr.12098>.
- DeCuir-Gunby, Jessica. "Mixed Methods Research in the Social Sciences." In *Best Practices in Quantitative Methods*, edited by Jason Osborne, 125–36. Thousand Oaks, CA: SAGE Publications, 2008. <https://doi.org/10.4135/9781412995627>.
- Dyer, Alan D. "The Influence of Bubonic Plague in England, 1500–1667." *Medical History* 22, no. 3 (July 1, 1978): 308–26.

- Finlay, Jocelyn E. "Fertility Response to Natural Disasters: The Case of Three High Mortality Earthquakes." World Bank Policy Research Working Paper No. 4883, March 1, 2009. <https://doi.org/10.1596/1813-9450-4883>.
- Foucault, Michel. "The Order of Discourse." In *Untying the Text: A Post-Structuralist Reader*, edited by Robert Young. Boston, MA: Routledge & Kegan Paul, 1981.
- Garrett, Laurie. "The Black Death." *HIV and National Security: Where Are the Links?* Council on Foreign Relations, 2005. <https://www.jstor.org/stable/resrep05754.7>.
- Gilman, Ernest B. *Plague Writing in Early Modern England*. Chicago: University of Chicago Press, 2009.
- Gilpin, Jack. "God's Terrible Voice: Liturgical Response to the Great Fire of London." *Anglican and Episcopal History* 82, no. 3 (September 2013): 318–34.
- Greenberg, Stephen. "Plague, the Printing Press, and Public Health in Seventeenth-Century London." *Huntington Library Quarterly* 67, no. 4 (2004): 508–27. <https://www.jstor.org/stable/10.1525/hlq.2004.67.4.508>.
- Grigsby, Byron Lee. *Pestilence in Medieval and Early Modern English Literature*. New York: Routledge, 2004.
- Hadass, Ofer. *Medicine, Religion, and Magic in Early Stuart England: Richard Napier's Medical Practice*. Magic in History. University Park: The Pennsylvania State University Press, 2018.
- Hamilton, Frederick W. *A Brief History of Printing in England: A Short History of Printing in England from Caxton to the Present Time*. Vol. 53. Typographic Technical Series for Apprentices—Part VIII. Chicago: United Typothetae of America, 1918.
- Hammill, Graham. "Miracles and Plagues: Plague Discourse as Political Thought." *Journal for Early Modern Cultural Studies* 10, no. 2 (2010): 85–104. <https://doi.org/10.1353/jem.2011.0008>.
- Harper-Bill, Christopher. "The English Church and English Religion After the Black Death." In *The Black Death in England*, edited by Mark Ormrod and Phillip Lindley, 79–123. Stamford, UK: Paul Watkins, 1996.

- Hellinga, Lotte. *William Caxton and Early Printing in England*. London: British Library, 2010.
- Hirst, L. Fabian. *The Conquest of Plague: A Study of the Evolution of Epidemiology*. Oxford: Oxford University Press, 1953.
- Hosington, Brenda M. "The 'Renaissance Cultural Crossroads' Catalogue: A Witness to the Importance of Translation in Early Modern Britain." In *The Book Triumphant: Print in Transition in the Sixteenth and Seventeenth Centuries*, edited by Malcolm Walsby and Graeme Kemp, Vol. 15. Library of the Written Word. Boston, MA: Brill, 2011.
- Hunter, Lynette. "Books for Daily Life: Household, Husbandry, Behaviour." In *The Cambridge History of the Book in Britain: Volume 4: 1557–1695*, edited by John Barnard and D. F. McKenzie, 514–32. Cambridge: Cambridge University Press, 2002. <https://doi.org/10.1017/CHOL9780521661829>.
- Jenner, Mark S. R. "Plague on a Page: *Lord Have Mercy Upon Us* in Early Modern London." *Seventeenth Century* 27, no. 3 (September 2012): 255–86. <https://doi.org/10.7227/TSC.27.3.2>.
- Kassell, Lauren. "Casebooks in Early Modern England: Medicine, Astrology, and Written Records." *Bulletin of the History of Medicine* 88, no. 4 (2014): 595–625. <https://www.jstor.org/stable/26308958>.
- Kenyon, J. P. *Stuart England*. London: Allen Lane, 1978.
- King, Lester S. "Empiricism and Rationalism in the Works of Thomas Sydenham." *Bulletin of the History of Medicine* 44, no. 1 (January 1, 1970): 1–11.
- Kyle, Chris R. "Monarch and Marketplace: Proclamations as News in Early Modern England." *Huntington Library Quarterly* 78, no. 4 (2015): 771–87. <https://www.jstor.org/stable/10.1525/hlq.2015.78.4.771>.
- Lake, Peter, and Steve Pincus. "Rethinking the Public Sphere in Early Modern England." *Journal of British Studies* 45, no. 2 (2006): 270–92. <https://www.jstor.org/stable/10.1086/499788>.
- Leedy, Paul D., and Jeanne Ellis Ormrod. *Practical Research: Planning and Design*. 11th ed. Boston: Pearson, 2016.

- Lord, Evelyn. *The Great Plague: A People's History*. New Haven, CT: Yale University Press, 2014.
- MacDonald, Michael. "The Career of Astrological Medicine in England." In *Religio Medici: Medicine and Religion in Seventeenth-Century England*, edited by Andrew Cunningham and Ole Peter Grell, 62–90. Aldershot, UK: Scolar Press, 1996.
- McEvedy, Colin. "The Bubonic Plague." *Scientific American* 258, no. 2 (1988): 118–23. <https://www.jstor.org/stable/24988987>.
- Megson, Barbara E. "Mortality Among London Citizens in the Black Death." *Medieval Prosopography* 19 (1998): 125–33. <https://www.jstor.org/stable/44946286>.
- Miller, Kathleen. *The Literary Culture of Plague in Early Modern England*. Early Modern Literature in History. London: Palgrave Macmillan, 2017.
- Moote, A. Lloyd, and Dorothy C. Moote. *The Great Plague: The Story of London's Most Deadly Year*. Baltimore, MD: Johns Hopkins University Press, 2006.
- Mortimer, Ian. *The Dying and the Doctors: The Medical Revolution in Seventeenth-Century England*. Studies in History: New Series. Woodbridge, UK: Royal Historical Society, 2009.
- Muñoz, Celina. "The Plague, the Poor, and the Problem of Medicine." *Western Libraries Undergraduate Research Award*, no. 2 (2014). https://cedar.wvu.edu/library_researchaward/2.
- Newman, Kira L. S. "Shutt Up: Bubonic Plague and Quarantine in Early Modern England." *Journal of Social History* 45, no. 3 (2012): 809–34. <https://www.jstor.org/stable/41678910>.
- Nobles, Jenna, Elizabeth Frankenberg, and Duncan Thomas. "The Effects of Mortality on Fertility: Population Dynamics After a Natural Disaster." *Demography* 52, no. 1 (January 14, 2015): 15–38. <https://doi.org/10.1007/s13524-014-0362-1>.
- Oldridge, Darren. "Demons of the Mind: Satanic Thoughts in Seventeenth-Century England." *The Seventeenth Century* 35, no. 3 (May 3, 2020): 277–92. <https://doi.org/10.1080/0268117X.2019.1603119>.

- Patton, Michael Quinn. *Qualitative Evaluation and Research Methods*. 2nd ed. Newbury Park, CA: Sage Publications, 1990.
- Peacey, Jason. *Print and Public Politics in the English Revolution*. Cambridge Studies in Early Modern British History. New York: Cambridge University Press, 2013.
<https://doi.org/10.1017/CBO9781107360297>.
- Pettegree, Andrew. "Broadsheets: Single-Sheet Publishing in the First Age of Print. Typology and Typography." In *Broadsheets: Single-Sheet Publishing in the First Age of Print*, edited by Andrew Pettegree, 3–32. Leiden, NL: Brill, 2017.
- Prall, Stuart E. *Church and State in Tudor and Stuart England*. Edited by Arthur S. Link. The European History Series. Arlington Heights, IL: Harlan Davidson, 1993.
- ProQuest. "Early English Books Online." Accessed November 27, 2021.
<https://about.proquest.com/globalassets/proquest/files/pdf-files/brochures/brochure-eebo.pdf>.
- Roberts, Julian. "The Latin Trade." In *The Cambridge History of the Book in Britain: Volume 4: 1557–1695*, edited by John Barnard and D. F. McKenzie, 141–73. Cambridge: Cambridge University Press, 2002.
<https://doi.org/10.1017/CHOL9780521661829>.
- Rollins, Sarah E., Sean M. Rollins, and Edward T. Ryan. "Yersinia Pestis and the Plague." *Pathology Patterns Reviews* 119 (June 1, 2003): S78–S85.
<https://doi.org/10.1309/DQM9-3R8Q-NQWB-FYU8>.
- Rourke, Liam, and Terry Anderson. "Validity in Quantitative Content Analysis." *Educational Technology Research and Development* 52, no. 1 (2004): 5–18.
<https://www.jstor.org/stable/30220371>.
- Salmon, Vivian. *The Study of Language in 17th-Century England*. 2nd ed. Vol. 17. Amsterdam Studies in the Theory and History of Linguistic Science 3. Amsterdam: John Benjamins, 1988.
- Scharp, Kristina M., and Lindsey J. Thomas. "Discourse Analysis." In *The International Encyclopedia of Communications Research Method*, edited by Jörg Matthes, 1:473–81. Hoboken, NJ: Wiley Blackwell, 2017.

- Shine, Cormac. “Our World Is Changing. It’s Time for Historians to Explain Why.” *The Guardian*, January 18, 2018, sec. Education. <http://www.theguardian.com/higher-education-network/2018/jan/18/our-world-is-changing-its-time-for-historians-to-explain-why>.
- Şimandan, Matei. “Interpretative Methodology and Social Constructivism.” *Journal of Humanistic and Social Studies* 5, no. 1 (2014): 145–58.
- Singer, Dorothea Waley. “Some Plague Tractates (Fourteenth and Fifteenth Centuries).” *Proceedings of the Royal Society of Medicine* 9 (March 1916): 159–212. <https://doi.org/10.1177/003591571600901618>.
- Slack, Paul. *The Impact of Plague in Tudor and Stuart England*. Oxford: Clarendon Press, 1990.
- Slack, Paul. “Responses to Plague in Early Modern Europe: The Implications of Public Health.” *Social Research* 55, no. 3 (1988): 433–53. <https://www.jstor.org/stable/40970513>.
- Stobart, Anne. *Household Medicine in Seventeenth-Century England*. London: Bloomsbury, 2016.
- Strausfeld, D. “Tormented by Sinful Thoughts in Seventeenth-Century England.” *Mental Health, Religion & Culture* 24, no. 7 (2021): 1–15. <https://doi.org/10.1080/13674676.2021.1915264>.
- Thorpe, Lara. “‘At the Mercy of a Strange Woman’: Plague Nurses, Marginality, and Fear during the Great Plague of 1665.” In *Women on the Edge in Early Modern Europe*, edited by Lisa Hopkins and Aidan Norrie, 29–44. Amsterdam University Press, 2019. <https://doi.org/10.2307/j.ctvcwp0b0.6>.
- Trevelyan, G. M. *England Under the Stuarts*. London: Methuen, 1965.
- van Dijk, Teun A. “Introduction: Discourse Analysis as a New Cross-Discipline.” In *Handbook of Discourse Analysis: Disciplines of Discourse*, edited by Teun A. van Dijk, 1:10. London: Academic Press, 1985.
- Verhoest, Pascal. “Seventeenth-Century Pamphlets as Constituents of a Public Communications Space: A Historical Critique of Public Sphere Theory.” *Theory, Culture & Society* 36, no. 1 (January 1, 2019): 47–62. <https://doi.org/10.1177/0263276418779185>.

- Wallis, Patrick. "Plagues, Morality and the Place of Medicine in Early Modern England." *The English Historical Review* 121, no. 490 (2006): 1–24. <https://www.jstor.org/stable/3806239>.
- Wear, Andrew. *Knowledge and Practice in English Medicine, 1550–1680*. New York: Cambridge University Press, 2000.
- White, Marilyn Domas, and Emily E. Marsh. "Content Analysis: A Flexible Methodology." *Library Trends* 55, no. 1 (Summer 2006): 22–45. <https://doi.org/10.1353/lib.2006.0053>.
- Wilkinson, Alexander. "The Printed Book on the Iberian Peninsula, 1500–1540." In *The Book Triumphant: Print in Transition in the Sixteenth and Seventeenth Centuries*, edited by Malcolm Walsby and Graeme Kemp, Vol. 15. Library of the Written Word. Boston, MA: Brill, 2011.
- Woolrych, Austin. "The Cromwellian Protectorate: A Military Dictatorship?" *History* 75, no. 244 (1990): 207–31. <https://doi.org/10.1111/j.1468-229X.1990.tb01515.x>.
- World Health Organization. "Infodemic." Accessed March 25, 2022. <https://www.who.int/westernpacific/health-topics/infodemic>.
- World Health Organization. "WHO Coronavirus (COVID-19) Dashboard." Accessed April 1, 2022. <https://covid19.who.int>.
- Yamamoto-Wilson, John R. *Pain, Pleasure and Perversity: Discourses of Suffering in Seventeenth-Century England*. London: Routledge, 2016.
- Ziegler, Philip. *The Black Death*. New York: Harper Collins Publishers, 1969.

Appendix A: List of Primary Sources

POLITICAL SOURCES

Broadsheets

Charles I. Proclamation. April 22, 1636. Early English Books, 1475–1640 (STC). EEBO.

Charles I. Proclamation. August 11, 1625. Early English Books, 1475–1640 (STC).
EEBO.

Charles I. Proclamation. January 22, 1626. Tract Supplement. EEBO.

Charles I. Proclamation. November 1, 1635. Tract Supplement. EEBO.

Charles I. Proclamation. November 11, 1640. Early English Books, 1475–1640 (STC).
EEBO.

Charles I. Proclamation. October 11, 1625. Tract Supplement. EEBO.

Charles I. Proclamation. October 7, 1636. Early English Books, 1475–1640 (STC).
EEBO.

Charles I. Proclamation. September 9, 1630. Early English Books, 1475–1640 (STC).
EEBO.

Charles II. “Rules and Orders To be observed by all Justices of Peace, Mayors, Bayliffs,
and other Officers, for prevention of the spreading of the Infection of the Plague.”
1666. Tract Supplement. EEBO.

Court of Aldermen. “Orders to be vsed in the time of the infection of the Plague vvithin
the Citie and Liberties of London, till further charitable prouision may be had for
places of receite for the visited with infection.” 1625. Early English Books, 1475–
1640 (STC). EEBO.

Court of Common Council. “Orders conceiued and thought fit, asvvell by the Lord Maior
of the City of London and the Aldermen his Brethren, as by the Iustices of Peace in
the Countie of Middlesex, the Borough of Southwarke, and County of Surrey to be
observed within their seuerall limits respectiuely [...],” 1608. Early English Books,
1475–1640 (STC). EEBO.

Cromwell, Oliver. "An Ordinance For holding the Countie-Court for the Countie of Chester at the Town of Northvich, during the Continuance of the Infection of the Plague in Chester.," May 16, 1654. Thomson Tracts (TT). EEBO.

England and Wales. "An Act for the charitable reliefe and ordering of person infected with the Plague.," 1630. Early English Books, 1475–1640 (STC). EEBO.

House of Lords. "Certain Orders thought meet to be put in execution against the Infection of the Plague.," September 9, 1641. Thomason Tracts (TT). EEBO.

House of Lords. "An Order of the Lords, for the better direction of the Overseers appoynted in the severall Parishes of the city of Oxford, against the spreading of the Infection of the Plague.," May 12, 1645. Early English Books, 1641–1700 (Wing). EEBO.

House of Lords. "Whereas upon the Lords meeting after their late recess [....]," October 21, 1641. Early English Books, 1641–1700 (Wing). EEBO.

James I. Proclamation. July 8, 1604. Tract Supplement. EEBO.

James I. Proclamation. June 23, 1603. Early English Books, 1475–1640 (STC). EEBO.

James I. Proclamation. May 29, 1603. In *A booke of proclamtions, published since the beginning of his Maiesties most happy reigne ouer England, &c. Vntill this present moneth of Febr. 3. Anno Dom. 1609*, 20–21. London, 1610.

James I. Proclamation. October 18, 1603. Tract Supplement. EEBO.

James I. Proclamation. September 16, 1603. Tract Supplement. EEBO.

James I. Proclamation. September 23, 1606. Tract Supplement. EEBO.

Parliament. "By the Lords and others His Majesties Commissioners. An Order for the Observance and Execution of the Statute made for the Reliefe and Ordering of Persons infected with the Plague.," August 1, 1644. Early English Books, 1641–1700 (Wing). EEBO.

Parliament. "Die Martis, 2. Sept. 1645. Ordered by the Lords and Commons assembled in Parliament, that Friday next come fortnight shall be a day appointed for publique

humiliation [...],” September 4, 1645. Early English Books, 1641–1700 (Wing). EEBO.

Parliament. “Die Veneris 16 Iulii 1647 Ordered by the Lords and Commons in Parliament assembled, that the Lord Mayor of of the City of London and Justices of the Peace [...]” John Wright, July 16, 1647. Early English Books, 1641–1700 (Wing). EEBO.

University of Oxford. “Rules and Orders Made By The Vice-Chancellor of the Vniversity of Oxford, and Iustices of Peace, for the Good and Safety of the Vniversity, City and County of Oxford.,” August 25, 1665. Early English Books, 1641–1700 (Wing). EEBO.

Pamphlets & Books

Charles I. *Orders thought meet by His Maiestie, and his Priuie Councill, to bee executed throughout the counties of this realme, in such townes, villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same [...].* London, 1629.

City of London. *Orders Formerly Conceived and Agreed to be published by the Lord Major and the Aldermen of the City Of London: And The Justices of Peace of the Counties of Middlesex and Surrey, Concerning The Infection of the Plague. And now Re-printed and published by Order of the Honourable House of Commons.* London, 1646.

Court of Aldermen. *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, 1665.

Court of Aldermen. *Orders Conceived And Published By the Lord Major and Aldermen of the City of London, concerning the Infection of the Plague.* London, 1665.

James I. *Orders Thought Meet By His Maiestie, And his Priuie Councill, to be executed throughout the Counties of this Realme, in such Townes, Villages, and other places, as are, or may be hereafter infected with the plague, for the stay of further increase of the same. [...].* London, 1625.

James I. *Orders, thought meete by his Maiestie, and his Priuie Counsell, to be executed throughout the Counties of this Realme, in such Townes, Villages, and other places, as are, or may be hereafter infected with the Plague, for the stay of further increase of the same. [...].* London, 1603.

RELIGIOUS SOURCES

Broadsheets

Bishop, George. "To the King, and both Houses of Parliament," September 25, 1664. Early English Books, 1641–1700 (Wing). EEBO.

"The Observations of Mr. Lillie, and many Famous and Learned Divines, touching the present Visitation of the Plague of Pestilence; With a Prayer to be used in all Families, for sheathing of the Sword of the Destroying Angel, and to divert Gods heavy Judgments [...]," 1665. Early English Books, 1641–1700 (Wing). EEBO.

"An Unparalel'd Antidote Against the Plague: Or, a special Remedy for a Sick Soul; Whereby a Sinner may recover himself from the Vale of Teares to the Hill of Ioy.," 1665. Early English Books, 1641–1700 (Wing). EEBO.

Pamphlets & Books

Burton, Henry. *A most Godly Sermon: Preached at St. Albons in Woodstreet on Sunday last, being the 10 of October, 1641. Shewing the necessity of Selfe-denyall and Humiliation, by Prayer and Fasting before the Lord, in regard of the present Plague we now lye under. Which God, in his good time, remove from amongst us.* London, 1641.

Church of England. *A short forme of Thankesgiuing to God, for staying the contagious sickenes of the Plague: To be used in Common Prayer, on Sundayes, Wednesdayes, and Fridayes.* London, 1604.

Church of England. *A short Forme of Thankesgiuing to God For staying the contagious sickennesse of the Plague: To be vsed in Common Prayer, on Sundayes, Wednesdayes, and Frydayes: set forth by Authority.* London, 1625.

L, I. *A Divine Balsam To Cure The bleeding Wounds of these dangerous Times. Or, The true cause of two grand and heavie Judgements of Almighty God now upon this Kingdome.* [...]. London, 1642.

The Prophecie Of one of His Maiesties Chaplains, Concerning the Plague and Black-patches: With Mr. Gadburies happy and joyful Predictions, for the Decrease of the Plague both in the City and Suburbs [...]. London, 1665.

Salthouse, Thomas. *A Brief Discovery Of The Cause for which this Land Mourns, and is Afflicted. With Several Remedies To Be Applied in Order to the Removal Of the Present Visitation.* [...]. London, 1665.

Wright, Robert. *A Receyt To Stay The Plague. Delivered in a Sermon by R.W. Minister of Gods Word.* London, 1636.

MEDICAL SOURCES

Broadsheets

“An approved Antidote or Cordiall Medicine, that by Gods favour cureth the Pestilentiall Feaver, or Plague, with other contagious Agues or Feavers, beginning either hot or cold [...],” 1650. Tract Supplement. EEBO.

“Lord haue mercy vpon vs. A speciall Remedy for the Plague.,” 1636. Early English Books, 1475–1640 (STC). EEBO.

Society of Chymical Physitians. “An Advertisement From The Society of Chymical Physitians, Touching Medicines by them prepared, in pursuance of his Majesties Command, For the Prevention, and for the Cure of the Plague.,” 1665. Early English Books, 1641–1700 (Wing). EEBO.

Pamphlets & Books

Garencières, Theophilus. *A Mite Cast into the Treasury Of the Famous City of London; Being A Brief and Methodical Discourse of the Nature, Causes, Symptomes, Remedies and Preservation from the Plague, in this Calamitous Year, 1665. Digested into Aphorismes, by Theophilvs Garencieres Doctor in Physick.* London, 1665.

Hering, Francis. *Certaine Rvles, Directions, Or Aduertisments For This Time Of Pestilentiall Contagion: With A caueat to those that weare about their neckes impoisoned Amulets as a Preseruatiue from the Plague [...].* London, 1625.

Hering, Francis. *A Modest Defence Of The Caueat Giuen To The Wearers Of impoisoned Amulets, as Preseruatiues from the Plague: Wherein that point is somewhat more lergely reasoned and debated with an ancient Physician, who hath mainteined them by publicke writing [...].* London, 1604.

The Plagves Approved Physitian Shewing the naturall causes of the Infection of the Ayre, and of the Plague. With divers observations to bee used, preserving from the Plague, And signes to know the Infected therewith. [...]. London, 1665.

Royal College of Physicians of London. *The Kings Medicines for the Plague, Prescribed for the yeare 1604. by the whole Colledge of Physitians, both Spirituall and Temporall. And now most fitting for this dangerous time of Infection, to be used all England over.* London, 1636.

W., I. *A Briefe Treatise of the Plague Wherein is shewed, The [brace] Naturall cause of the Plague. Preseruations from the infection. Way to cure the infected. Newly corrected with new additions and many approoued Remedies.* London, 1603.

Woodall, John. *The Cvre Of The Plague By An Antidote Called Aurum Vitæ. Being well approved to be an easie safe, and perfect cure thereof; as also of contagious Agues, or Feavers begining either Hot or Cold. [...].* London, 1640.

Appendix B: Political Discourse Graph

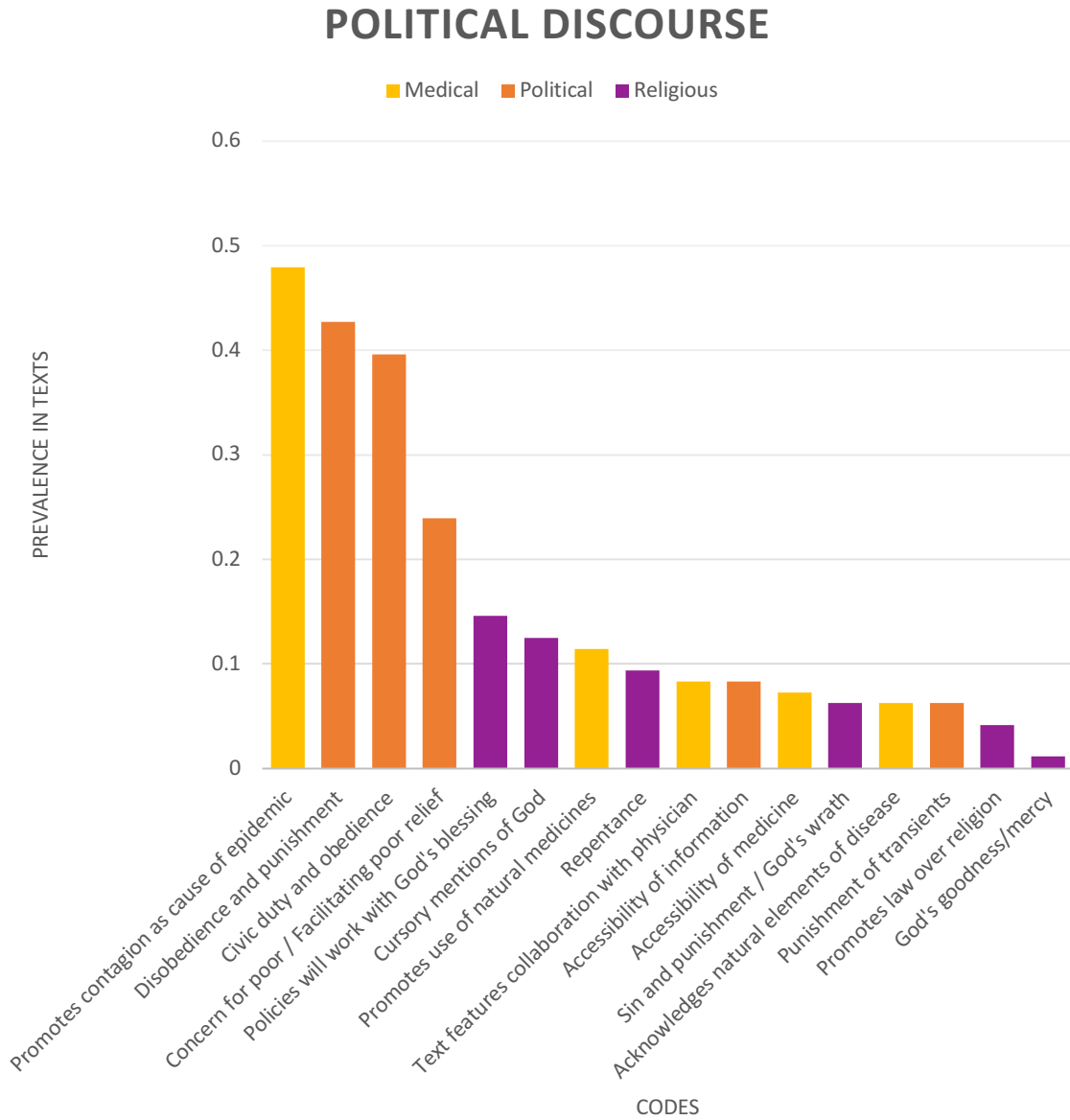


Figure 1. Prevalence of codes in political discourse.

Appendix C: Religious Discourse Graph

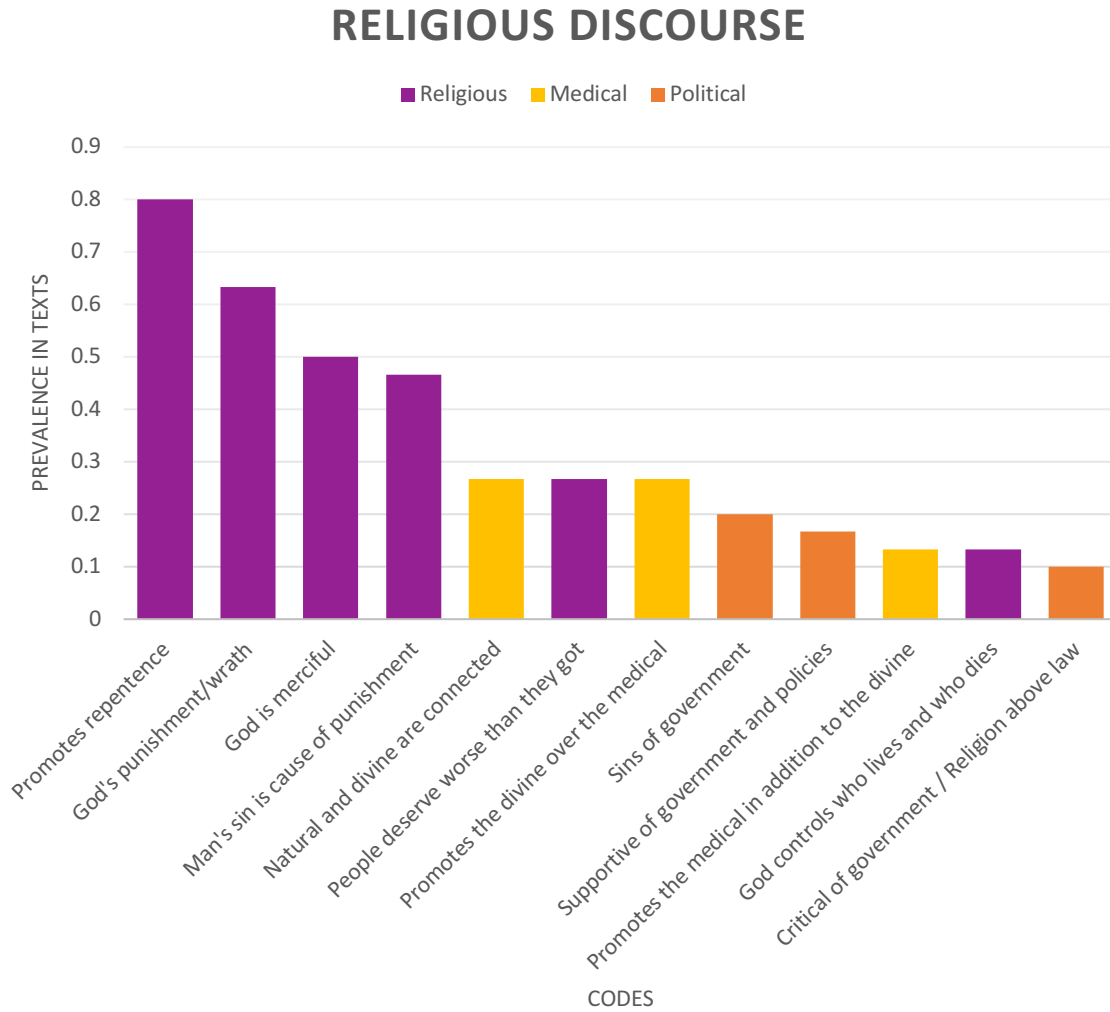


Figure 2. Prevalence of codes in religious discourse.

Appendix D: Medical Discourse Graph

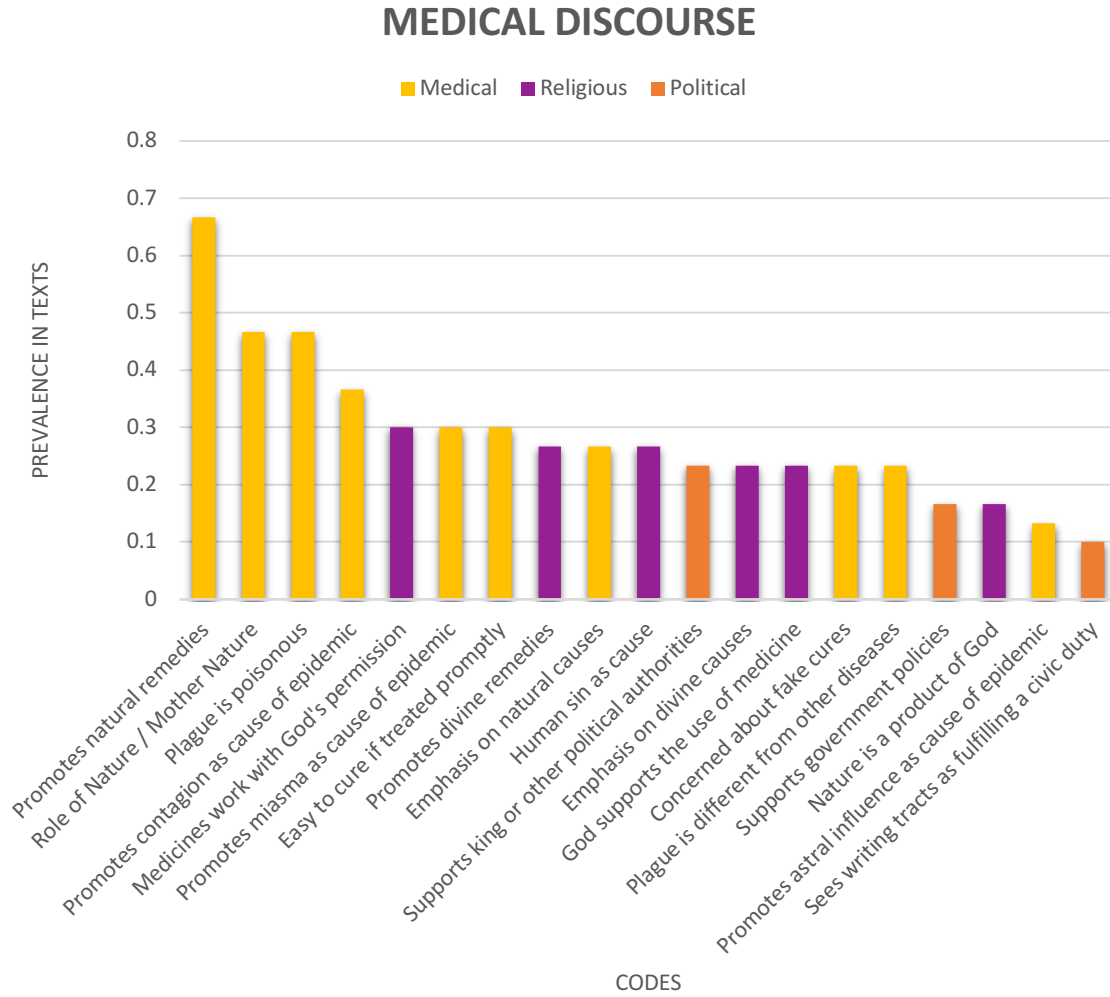


Figure 3. Prevalence of codes in medical discourse.