Morbidity in an early-modern small town: Loughborough in the seventeenth century

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Abstract

While the incidence of sickness has been explored for a few, large urban centres in early-modern England from the evidence of ‘static’ (‘snapshot’) surveys of the poor, another perspective can be obtained by scrutinising churchwardens’ accounts for smaller towns. What the latter approach can reveal is something of the life-course of the sick—duration of sickness, life-stage sickness; and to what extent institutions in unincorporated towns (like Loughborough) could ameliorate the position of the sick—when and how, with limited resources, they could intervene. Despite some inherent problems of these accounts (payments to the sick selectively), their dissection can, in conjunction with the material in the surveys, assist in constructing a picture of early-modern morbidity.

Introduction

Much of the recent discussion of the experience of sickness in early-modern populations has concentrated on the larger urban centres, rightly so because of the particular concern of urban authorities with health and welfare in response to the impact of disease there. These places had an institutional authority which, as Margaret Pelling and Paul Slack have illustrated, actively engaged with the collection of information and surveillance, as well as some sort of political and constitutional infrastructure, if not institutional organisation in bricks and mortar.1 As well as their corporate organisation, mayor, aldermen and burgesses in council(s), these larger urban places sometimes contained gilds which sponsored, if they could not regulate, medical practitioners, as Patrick Wallis has so felicitously demonstrated.2 We thus know most about the lives of the poor, sick and elderly in London, Norwich, Warwick and Ipswich, where surveys of the poor were conducted.3 The uncovering of the extent of morbidity in these larger urban places through their better documentation—surveys of the poor in the last decades of the sixteenth and early decades of the seventeenth centuries—has opened a new perspective on the ‘common lot’, below the lifestyles of the urban elite.4

3 Pelling, Common lot.
4 Pelling, Common lot.
Loughborough’s context

Early-modern England was, nonetheless, a world of urban motion in numerous respects. One significant aspect was the development of smaller urban places which lacked that very form of corporate government. Such places were being transformed in the sixteenth and seventeenth centuries, without a unitary political authority to intervene to mitigate the effects of sickness and disease: one aspect of the search for stability in a time of dislocation. Belonging to this lower echelon of smaller towns without that unitary corporate authority, Loughborough has yet a richness of documentation which permits some insight into the issue of morbidity. Although lacking a survey of the sick and poor, Loughborough does have the compensatory survival of some detailed listings of the recipients of doles from the

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5 Pelling, Common lot, 15, reviews the wider applicability of the Norwich material.
churchwardens from which we can address some of the issues of morbidity in this small town. In two senses at least, this material allows a more dynamic examination of the well-being of the urban population than is permitted by the static surveys, since we can perceive the reaction of the churchwardens over a period of time, not just at one moment, and we can also estimate the duration of interventions to assist individuals or families.\(^8\) We also obtain some idea of the level of response to sickness. Importantly, perhaps, we can also reconnect morbidity to mortality.\(^9\)

In the late nineteenth century, the parish of Loughborough contained 5,460 acres—a not inconsiderable size for a parish in the heart of the Midlands (see Figure 1).\(^10\) At its centre was an urban precinct which had evolved during the middle ages, perhaps during the twelfth century. The urban centre remained an unincorporated town until towards the end of the nineteenth century. It is indeed this characteristic—a small town within a large single parish—which makes Loughborough an intriguing place to consider. The topography of the urban centre within its parish is shown in Figure 2. Further than that, however, the parish consisted of polyfocal, dispersed settlement with hamlets in Knighthorpe, Shelthorpe and Woodthorpe, as well as large gentry houses.

Meandering around the parish, the River Soar remained a valuable resource for lord and tenants, maintaining the meadows and osier beds and willows. It is not surprising, then, that the articles enquired of the tenants at the turn of the century investigated the attributes of the river: ‘Item wheather is the Ryver or water streame called the Soare wholly to the ladie of this manour, yea or no, and yf it bee, than howe farre Doeth her streame goe, where begynneth yt, and where endeth yt.’ This article, number 19, was followed by two further questions about who should receive the profits of the reed beds and osiers and what leases had been made of these resources.\(^11\)

By 1563, the rank order of Loughborough and Melton Mowbray, the two principal market towns in Leicestershire, had been reversed in terms of population. Melton now contained 80 households, with additionally another 86 if the chapelries of Sysonby, Eye Kettleby, Freeby and Burton Lazars are included. By comparison, Loughborough parish contained 256 households in Loughborough with 6 and 13 in the hamlets of Knighthorpe and Woodthorpe respectively. Ashby de la Zouch was probably inhabited by 164 households and Castle Donington, in some decay, 70. In demographic terms, then, Melton had slipped down the small town hierarchy whilst Loughborough had risen. Loughborough was, moreover, surrounded by parishes with high population densities: Shepshed (103 households), Barrow

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\(^8\) Pelling, Common lot, 149, on the snapshot nature of the census.

\(^9\) Given the attention previously directed to mortality, Pelling was concerned to recover morbidity as a more accurate reflection of the social conditions of the environment of the urban poor: Pelling, Common lot, 13, 64–5, 77, 131.


\(^11\) Huntington Library, San Marino, California, Hastings Manuscripts (HAM) Box 25, folder 3, p. 8.
(64), Quorn (60), Kegworth (68), Wymeswold (79) and Sileby (78).\textsuperscript{12} To place Loughborough in comparative terms, now second in the urban hierarchy in Leicestershire, it had a population 43 per cent of that of the county town of Leicester (just under 600 households).\textsuperscript{13}

By 1603 Loughborough parish contained 1,200 communicants and in 1676 1,123 persons of communicable age (over 16 years). To the south, the composite parish of Barrow with Quorn, Woodhouse, part of Mountsorrel and hamlets hosted 1,109 persons over 16 in 1676.\textsuperscript{14} If we compare the 360 persons over the age of 14 counted in 1377 with the 1,200 communicants over 16 in 1603, we can conclude that the population of Loughborough parish had trebled in 225 years. Investigating further, however, the 256 households in 1563 suggest that the level of

\begin{figure}
\centering
\includegraphics[width=0.5\textwidth]{topography_loughborough_c1550}
\caption{The topography of Loughborough, c.1550}
\end{figure}

\textsuperscript{13} Dyer and Palliser, \textit{Diocesan population returns for 1563 and 1603}, 214.
population might have reached almost 1,300 inhabitants, if a standard household multiplier is applied.\(^\text{15}\) We might convert the taxed population of 360 aged under 14 in 1377 to around 540 people, taking a compromise position on multipliers and evasion. The population expansion between 1377 and 1563 might thus have involved a factor of the order of 2.4. We should assume, then, rapid demographic growth in the decades before 1563 succeeded by less rapid increase in the last half of the century. Between 1603 and 1676, there was some demographic contraction, perhaps of the order of 6 per cent of the global population.\(^\text{16}\)

**Problems of the parish and the poor**

Complications arise from the socio-geographical composition of the parish of Loughborough, which, although containing an urban core, comprised also a large rural element. While industrial, retail and commercial occupations congregated in the urban precinct, the predominantly copyhold tenements (for three lives) in the parochial centre were held by parishioners engaged in agriculture (tenants of lands in the fields as well as labourers) as well as those engaged in urban processes. Briefly, the supervision, regulation and governance of the parish was exercised through three different institutions: lordship (manorial court—court baron—and view of frankpledge); parish (churchwardens and other officers); and trustees (the bridgemasters’ trust which was also responsible for the grammar school).

Loughborough was somewhat anomalous in its organisation of support for the poor, which is reflected in the non-existence of any accounts of the overseers of the poor. Four officials were involved in the collections for the poor and the disbursements for their maintenance. The collectors for the poor, of which there were two, were apparently junior officers to the churchwardens. The two men selected as collectors for the poor in one year graduated to become churchwardens in the subsequent year. The appointment of all four officials was recorded together in the churchwardens’ accounts. The provision for the poor in the churchwardens’ accounts thus consists of both pensions for those permanently unable to work and relief for those temporarily incapacitated.

Unfortunately, the years for which the detailed lists of recipients of relief were entered in the churchwardens’ accounts are limited to 1599–1600, 1615–1619, 1622–1626, and 1635. In total, then, we have details for 12 years, many consecutive, but with overall discontinuity. While obviously not ideal, these listings do allow a dynamic investigation of the nature of, and

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15 In the local context, the difference between multipliers suggested does not have too much impact as the numbers are so small: for an argument for 5.05 per household, P. Clark, K. Gaskin and A. Wilson, Population estimates of English small towns (Leicester, 1989), v.

support during, sickness in this small urban place within its rural parish. During these 12 years, approximately 286 people received doles, 168 (59 per cent) of whom were male and 118 (41 per cent) female (see Table 1). Several ambiguities inhere in these data. First, the identification of some individuals is constantly complicated. Second, there are ambivalences too about the recipients: who actually received the money and for what purpose?

It is easier to address the second complication first. For example, Nicholas Bal(l)ance benefited from nine doles from the churchwardens between 1619 and 1625 whilst he and/or his wife succumbed to sickness.\textsuperscript{17} In numerous instances first husband and then wife were allocated the money: husband first for his sickness and then wife for his (her husband’s) sickness. In particular, when a child was sick, the payments might be directed to the husband or ‘for his wife’. When the children of Robert and Mary Bradshaw fell sick, the couple received at least 20 payments, 11 of which were directed to Mary.\textsuperscript{18} The responsibility for the children was assumed to be his wife’s.\textsuperscript{19} In resolving this issue, the solution adopted has been to assign the money to the male where families were involved. The 118 females thus represent singletons, either unmarried or widows.

The issue of ambiguous identification is less easily resolved and so the numbers attributed to particular categories remain approximate, strong indicators rather than absolutely accurate. Some recipients were identified in the listings by a sobriquet associated with their disability: Lame Ann; Lame Emmot; Lame Randell; Blind Tom; the lame saddler; Old Elizabeth; Great Joan; Great Ralph; Northern Bess; or some other colloquial or familiar identification.\textsuperscript{20} In some cases, it is possible to reconcile some of these anomalies. We can assume with some degree of certainty that Lame Emmot was identical with Em or Emmot Marshall. Lame Emmot was allowed 6d. in 1622 and Emmot Marshall received 4d. in the same year as she was lame.\textsuperscript{21} Similarly, Lame Randell should be correlated with Robert Randell who was reported to be sick and lame in 1617.\textsuperscript{22} There remain, nonetheless, some unresolved epithets. The aspect of gender confuses some identifications too, especially in the case of widows. In most instances, the conundrum is not insurmountable. For example, it seems fairly conclusive that Elizabeth Ormston, the recipient of two doles of 6d. in 1616 was identical with Widow Ormston who

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\textsuperscript{17} Record Office for Leicestershire, Leicester and Rutland (ROLLR) DE667/62, fos 25v, 121r, 127r, 128r, 133r, 138v.
\textsuperscript{18} ROLLR DE667/62, fos 103r, 109r, 112r.
\textsuperscript{19} See Pelling, \textit{Common lot}, 111.
\textsuperscript{20} ROLLR DE667/62, fos 25r–v, 103v, 111r, 112v, 120v, 121r–v, 127v, 162v–163r, for example.
\textsuperscript{21} ROLLR DE667/62, fos 110v–111r, 112v, 121v.
\textsuperscript{22} ROLLR DE667/62, fos 109v, 120v.
was allocated amounts of 6d., 6d., and 5d., in 1616–1617.\(^\text{23}\) So for this issue, some confusion persists, although it is marginal.

We can take one example as illustrating the whole range of intervention by the churchwardens. In 1616–1617, nine payments were delivered to ‘ould’ Abbot for him and his wife; first his wife was ill, then they both succumbed to sickness. For her debility, his wife was allocated two doles each of 4d.; they each then received 6d. They were both then allowed 6d. and four allocations of 4d. while still sick. Subsequently he died. His widow received three payments in 1617, each of 4d., because she was still incapacitated.\(^\text{24}\) From these events we can elicit several aspects of the churchwardens’ role in alleviating temporary disruption to lives caused by sickness. First, that succour was often provided towards the end of life, sometimes in the sickness immediately before death. Second, their response was to make provision specifically to compensate for the inability to work.\(^\text{25}\) Third, their assistance extended to a widow immediately after the loss of her spouse. We follow through some of these suggestions in more detail below.

**Assistance at the end of life**

In perhaps a fifth of cases, the churchwardens’ intervention was associated with disability related to age.\(^\text{26}\) Some 37 recipients (13 per cent) were identified by the description ‘ould’ and surname. Although that description was in use as an affective title, in the accounts it would appear also as a justification for payment. While that is not necessarily conclusive evidence of the association of relief with age, more certain are the payments by the churchwardens towards the burial and winding sheets of 52 inhabitants: that is, 18 per cent of the recipients of distributions. These subventions for burial exceeded the usual amounts allowed for doles, of course. Almost half of the payments ranged between 1s. and 2s., with half a dozen extending to more than 2s.

Indeed, some of these interventions were associated with the period of illness of the recipient immediately prior to death. Perhaps we can postulate that in these cases age incurred indignity rather than the dignity of age and authority. Accordingly, Henry Blackshaw was allowed at least 23 payments in 1622–1623, 15 consisting of 4d., before a final payment of 1s. 4d. towards the costs of his burial and winding sheet.\(^\text{27}\) So too William

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\(^\text{23}\) ROLLR DE667/62, fos 103v, 104v, 110v.
\(^\text{24}\) ROLLR DE667/62, fos 103v, 104v, 105r, 109v, 110v.
\(^\text{25}\) For this imperative to work see Pelling, *Common lot*, 5, 64–5, 75, 82, 137, 141, 149, 150, 153.
\(^\text{26}\) For a caveat, Pelling, *Common lot*, 73–4. For what constituted old age, Pelling, *Common lot*, 84, 137, and, more extensively, S. Ottaway, *The decline of life. Old age in eighteenth-century England* (Cambridge, 2004), which recites previous historical research. The status of being aged is culturally-specific in the sense that the aged are not homogeneous; they comprise all of those who can live in old age with dignity and thus with authority, those who struggle for that dignity, those who live in indignity, and those who continued to work, but in the twilight economy which rendered them to some extent marginalised: A. Blaikie, *Ageing and popular culture* (Cambridge, 1999), 46–56; J. Hockey and A. James, *Growing up and growing old. Ageing and dependency in the life course* (London, 1995), 143–9.
\(^\text{27}\) ROLLR DE667/62, fos 112v, 121v, 127r–v, 128r.
Calladine, who was the beneficiary of numerous payments during his sickness and lameness in 1618 and 1622. He received doles through 1618 when he was both sick and lame, in 1622 he was awarded more for his lameness, followed shortly afterwards by 8d. to his wife towards his burial.\textsuperscript{28}

Perhaps most illustrative of this association of relief for morbidity and defrayal of costs at mortality is the end of the life of William Ferro. This poor man received six payments in 1615 while lying very sick and remaining still sick. He was washed while sick at a cost of 2d. to the wardens. They allowed 1s. 2d. for a further three and a half days of care. Another 1s. was allocated for the period of prayers for him, undoubtedly as he visibly declined towards death. The churchwardens’ final costs for his tending and burial amounted to 2s. 4d.\textsuperscript{29}

The episode of the final days of Clement Farra(y) provides further illustration. In 1624, while sick, he was allotted six payments, and his wife then received 1s. towards her husband’s burial.\textsuperscript{30} The wardens annotated their payments to Livy Jesson in July, August and September that he was sick; they also provided 1s. towards his burial.\textsuperscript{31} Before furnishing 1s. towards the burial of Richard Nicholls in 1625, the churchwardens had sustained him with at least 14 payments between 1617 and his decease.\textsuperscript{32} They supported Robert Noble through his sickness in 1625–1626 with at least 15 payments, concluding with a modest 6d. towards his burial in 1626.\textsuperscript{33}

In many instances, then, the churchwardens recorded their assistance for the burial of the recipient. It becomes obvious however—by comparing the wardens’ accounts with the registration of burials—that many more people received doles leading up to their burial. This comparison of the two sources (churchwardens’ accounts and parish register) is not without its difficulties. An illustrative example is Widow Sutton who received relief in 1635, but two Widow Suttoms were interred, one in March 1637 and another in July 1639. The figures cited below, therefore, relate only to conclusive identifications. The result is that some 68 people received relief in the months leading up to their burial. Others, of course, lived for some years after their last receipt of relief: one received relief within a year of burial; eight within two years; nine within three years; four within four years; and the lives of eight extended for five years after the last payment. Fifteen lived a further ten years and a few (fewer than half a dozen) longer. We must, of course, take into account the hiatus in the lists of distributions, so that these figures of people living for a few years after their relief are maxima which might conceal a closer relationship between relief, morbidity and mortality.

\textsuperscript{28} ROLLR DE667/62, fos 24v–25v, 112r, 120v, 122r. His burial is seemingly not in the register, although it is recorded in the churchwardens’ accounts at fo. 122r.
\textsuperscript{29} ROLLR DE667/62, 96r–97r.
\textsuperscript{30} ROLLR DE667/62, fos 133r–v.
\textsuperscript{31} ROLLR DE667/62, fo. 25r.
\textsuperscript{32} ROLLR DE667/62, fos 24v–25v, 137r.
\textsuperscript{33} ROLLR DE667/62, fos 138v–143r.
Assistance to widows

Age, but also gender, were factors in the case of widows. Just over 70 of the female recipients of doles were widows: a little more than 60 per cent of all the women. Widows received doles in their sickness, occasionally in child-bed, and for the sickness of their children. In child-bed in 1616, Widow Galloway was allowed 6d. and was afforded further payments in 1617 during her subsequent sickness. A widow delivering her husband’s posthumous child had no other means of support. Some, however, also received benefactions immediately after the death of a husband, an event which no doubt plunged them into considerable distress. In other circumstances, the husband died during the illness of both spouses. During 1616–1617, when he and his wife were sick, Ananias Wilkinson received at least 11 payments from the churchwardens. After his death in April 1618, his widow needed additional support.

Bereft of their spouses, widows sometimes still had to sustain a family and household. Illustrative of the needs of widows in this situation was the Widow Gamble who received 6s. in her own sickness in 1617, 6d. for her sick child in 1618, 1s. when one of her children became lame in 1619, another 6d. for a sick child in that year, three allocations of 6d. for her lame son in 1622 and another 1s. in that year when her child was interred. In 1624 she received another 4d. for her sick son, being allowed 6d. more on his burial shortly thereafter.

Some widows, moreover, were susceptible to sickness, no doubt age-related. Between 1623 and 1626, Widow Blackshew required intermittent help in her sicknesses to the extent of at least 18 payments: three of 2d., one of 3d., eight of 4d., and six of 6d. Widow Brian was allowed eight payments of 6d. and three of 4d. in 1635 when she was sick, sick and lame, and still sick. Widow Clemenson had constant recourse to the churchwardens when she was sick and lame, sick, still sick and lame, very sick and lame, and still sick, extending to at least 23 doles of 2d. to 6d. merely in 1635. Widow Paper belonged to those widows who were unable to sustain themselves without constant support from the wardens, receiving at least a dozen payments of 2d., 4d., or 6d., in 1615–1617.

In some cases, of course, the continuous assistance to a widow extended up to death. Between 1623 and 1626 Widow Clay was constantly in need of help from the churchwardens, receiving at least 25 allocations, culminating in 1s. 6d. for her winding sheet and 3d. towards her burial. The two Widows Kitchley succumbed in the same way, both experiencing long

34 For working opportunities for older women, Pelling, Common lot, 142, 155–75.
35 ROLLR DE667/62, 103r.
36 ROLLR DE667/62, fos 102v–103r, 110r–11v. The date of his burial is from the register: DE667/1.
37 ROLLR DE667/62, fos 25v, 109r, 112r–v, 121r, 128r, 133r–v, 163v.
38 ROLLR DE667/62, fos 128r, 133r–v, 137v, 143r–v.
39 ROLLR DE667/62, fos 162v–163r.
40 ROLLR DE667/62, fos 162v–163v.
41 ROLLR DE667/62, fos 97v–105r.
42 ROLLR DE667/62, fos 126v–128r, 133v, 137r–v, 138v, 142v: 3x2d.; 6x3d.; 9x4d.; 5x6d.; and the two at her death.
illness during which the churchwardens made awards to support them, but both consequently dying and requiring the wardens to make additional allocations of 1s. 6d. and 2s. for winding sheets. Widower Thorpe suffered sickness on a fairly regular basis between 1616 and 1626, relief being constantly supplied by the wardens, including six payments of 4d. and ten of 6d. Their final allocation of 10d. was occasioned by the burial of ‘ould Thorpe wife’.44

By contrast, of course, some widows were able to continue to maintain themselves right up to death, although their poverty might induce the churchwardens to assist their burial. Thus Old Widow Longly’s burial was helped by the wardens with 10d. for her interment and 1s. 10d. for her winding sheet. Widow Seele may only have made demands on the wardens at her burial, when they provided 2s. 2d. for her winding sheet and for the woman that laid her forth in 1635. Individual circumstances were contingent: the ability to work varied.

Categories of the sick

The predominant categories for assistance in the churchwardens’ accounts replicate those vague terms encountered in the surveys: sick, still sick, very sick (175 subjects); lame (ten); sick and lame (nine); but also in (great) need or distress (six). The numbers here exceed the list of recipients above since they include husbands, wives and children rather than just the (male) receiver of the allowance for the family. As has been demonstrated by Pelling, the criterion for relief was less disability than the inability to work at a particular time. The churchwardens’ payments were emergency relief rather than continuous payments for disability, the contributions compensating for loss of income. Parishioners were otherwise expected to work. This expectation is reflected in different sorts of payment: the intermittent relief for those with physical disability who were normally expected to provide for themselves; and the relief furnished to males whose wives or children were sick, inhibiting the males from working to earn their livelihood for a short duration.

We can illustrate the first category easily enough. Blind Arnold was allowed three payments in 1635; Blind Oliver three in the same year, once because his wife was sick; Blind Hardy two allocations in that year; Blind Tom, who was married, like Blind Oliver, two payments in 1622–1623; and Blind Jane Evatt three allocations when she was sick. Fewer than ten blind inhabitants received occasional relief and then only for a short period. Only once did Lame Ann apparently benefit from the allowances when she was allocated 4d. in 1622. The enigmatic lame saddler seemingly acquired only two payments, each of 4d., in 1635, although
problems of identification might mislead us here. These people with physical disabilities feature in the lists of doles only intermittently, usually only a few times when they were temporarily prevented from working.

**Sickness within the family**

Inability of males to work was understood within the context of the family. The disruption that sometimes accompanied childbirth constituted a genuine reason for relief. Several men were treated to compassionate relief whilst their wives were in child-bed. The consequences could be more painful. In 1625, John Sharpe reported the sickness of his wife. In 1626, his great need was evident; he received 1s. 4d. for the winding sheet to bury his wife. In his great distress, he was allocated six further payments of 6d.; his children were looked after by Whyniar. The register of burials reveals that his wife, Joan, died in childbirth in October 1626, delivering stillborn twins. The incapacity of wives might mean the distraction of husbands from working in order to care for wives and family. So Thomas Green was in receipt of nine payments, mostly for his wife's sickness. Numerous such payments were made to other husbands. For example, William Ball benefited from three doles of 4d. while his wife was sick in 1623. When his wife was sick and he had to look after the four children, Thomas Mathewe was allocated some funds.

Wives were, indeed, important contributors to household income, so payments were offered to assist their recovery from impediments to work. Thus Lecester was proffered 1s. for his wife's sore hand. In 1600, Thomas Dore was allocated a large sum towards healing his wife's hand. In some of these cases, the relief counterbalanced the inability of the male to work while he was occupied in caring for his family, but in others it compensated for the loss of contributions to household income by wife and children.

These more specific references to the exact nature of the sickness are infrequent. Excluding the wives above, we have complaints of sore legs twice and a sore hand. In 1615, Thomas Heggleston was given 6d. when he was hurt by a fall and subsequently another 1s. 6d. while he was ill and for his burial; he was interred in November 1615. The exception to this reticence of the record is the episode surrounding the lameness of John Tompson. When he became lame in 1625, he was allocated several doles of money which escalated to a higher

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50 ROLLR DE667/62, fos. 162v–163r.
51 ROLLR DE667/62, fos 44v, 112r, 133r–v.
52 ROLLR DE667/62, fos 137r, 142v.
53 ROLLR DE667/62, fos 97v, 121v, 133r–v, 138v–139r.
54 ROLLR DE667/62, fo. 127v.
55 ROLLR DE667/62, fo. 163v.
56 ROLLR DE667/62, fo. 44r.
57 ROLLR DE667/62, fo. 44v.
59 ROLLR DE667/62, fos 44v–v.
60 ROLLR DE667/62, fo. 97r; the date of burial is from the register.
level, to the extent that he received payments of 1s. twice, 2s. on 13 occasions, and 1s. 8d. once. Mr Johnsonne was summoned from Hinckley to examine his leg. The doctor was also remunerated to the tune of 5s. to inspect it. Another 1s. was expended on the bone-setter, Valentine Alline, to re-set the leg. The result must have been a successful return to work, for no payments were made after 1625.61

Changes in responsiveness to sickness

The policy of the churchwardens was not continuous, but was altered, perhaps in response to the immense impact of the infectious disease of 1609–1610.62 During its incidence the churchwardens were probably unable to make any effective intervention apart from the construction of the pest-house. The futility in this situation may have induced them to revise their policy towards the sick. Before then, at least in 1599–1600, the churchwardens had distributed larger one-off payments to the sick. Of the 31 allocations to the sick in those two years, 18 consisted of a payment of 1s., one of 1s. 8d., two of 2s., and one even of 5s.63 By 1615, the next year with extant details of distributions, the churchwardens had adopted a much more cautious approach to allocations to the sick. Incremental payments were now the order of the day. This circumspection can perhaps be illustrated by the relief offered to Northern Bess between 1618 and 1622.64 When she first succumbed to sickness in June 1618, the churchwardens allowed her the minimal amount of 2d. Immediately thereafter, however, she received four doles each of 6d., and between October and January following six amounts of 6d. and two of 4d.

Although Loughborough lacked unitary, corporate authority, the inhabitants made concerted efforts to make provision for their neighbours. Two collective enterprises surfaced in the churchwardens’ accounts. Collections for the diligent poor were organised around communions. In 1618, for example, the following amounts were received for the poor at communions: April 7s. 6d.; 1 July 10s. 2d.; 21 October 12s. 1½d.; February 9s. 6d.; Palm Sunday 1s. 10d.; and Easter Day 11s. 1d.65 Collections at communions varied considerably, with larger amounts donated at the more significant times of the year. The annual number of communions at which the churchwardens received money fluctuated between four and seven. At its maximum, the income at communions did not exceed £5, and fluctuated year on year.

From the mid 1630s to the mid 1640s, fasts were also inaugurated for collecting for the poor. Such fasts were usually arranged weekly during the part of the year associated with the life-

61 ROLLR DE667/62, fos 137v–138r.
63 ROLLR DE667/62, fos 41r–44r.
64 ROLLR DE667/62, fos 25r–v, 112v, 120v–121v.
65 ROLLR DE667/62, fo. 24v. This account has been bound in out of sequence. The collections for the poor were usually made at the communions at All Hallows, Low Sunday, Care Sunday, Palm Sunday, Easter Day, Michaelmas and Christmas.

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course of Christ: as in 1636–1637, 30 November, 7 December, 14 December, 21 December, 28 December, 4 January, 11 January, 18 January, 8 February, 22 February, 15 March. This observation of the ‘temporale’ as one ritual part of the year was thus not confined to Catholicism, but featured as much in the Protestant reformed calendar for the purpose of charity. The disruption of the mid 1640s inevitably caused dislocation; fasts for raising money for the poor were discontinued from 1645. This evangelical episode proved important, for larger amounts were collected at the church door at fasts than were contributed at the communions. In 1641, for example, £4 3s. 7d. accrued at a thanksgiving with further sums of 17s. 4d., 18s., and 17s. at fasts. The voluntary contributions at fasts also equalled the amounts collected by lays (levies or rates).

Even with lays, the amount of money available to alleviate distress was severely limited. In the 25 years between 1600 and 1624 (allowing for a few missing years), the disbursements for the poor did not exceed £3 in 22 years. From 1625, the distributions for the poor increased (in line with the augmentation of the income of the churchwardens). Between that year and 1658, nevertheless, in half the years less than £6 was expended on the poor, whilst in another 50 per cent of the years the sum fell between £6 and £10. The ability of the churchwardens to intervene to mitigate distress was thus limited.

Conclusion

It is difficult to compare the extent of morbidity in the small, unincorporated town of Loughborough with the occurrence of sickness in larger urban centres. The topography of Loughborough was probably more salubrious than the built density of larger urban places. Payments to the poor during sickness were discretionary, not an entitlement but contingent on the resources of the churchwardens and the reputation and credit of the invalid. The response of the churchwardens of this small town seems to have consisted of intervention as a last resort. What their late involvement resulted in, then, was a close association between the morbidity and mortality of their clients.

The material from Loughborough thus complements the surveys from larger, incorporated boroughs. Such surveys were static, a snapshot of sickness in their urban environments, but probably more comprehensive in their recording of the sick poor. All the sick were encompassed without selectivity or discrimination. What is missing, nonetheless, is some

66 ROLLR DE667/82, fo. 169v.
67 Most of these issues are now encapsulated in I. Ben-Amos, The culture of giving. Informal support and gift exchange in early-modern England (Cambridge, 2008), esp. 84–95, 244–55.
68 ROLLR DE667/82, fo. 190v.
69 ROLLR DE667/82, fo. 182v.
diachronic perception of the fortunes of the sick poor, in particular how their sickness and their support related to their life-course. Even if they addressed the sick in a discriminatory fashion, excluding those who were deemed to be undeserving, the Loughborough churchwardens’ accounts furnish information about the effects of sickness in the life-course (and death).

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