

Sanitary Reform in Victorian Britain

Sanitary Reform in the Provinces

Edited by
Christopher S. Hamlin



SANITARY REFORM IN VICTORIAN BRITAIN

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SANITARY REFORM IN VICTORIAN BRITAIN

GENERAL EDITOR
Michelle Allen-Emerson

Volume 2
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Christopher S. Hamlin

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INTRODUCTION

The story these documents tell – or, rather, the several intersecting stories – is an alternative and a complement to common representations of nineteenth-century sanitary reform.¹

I take that common view to have four main features. The first is to treat sanitary reform as an exemplary episode in the growth of the British state toward uniformity and accountability. Second is to see it as a discrete episode, beginning in the late 1830s and led by Edwin Chadwick. Third is to centre on London as exemplary site both of sanitary need and sanitary achievement. Fourth is to understand sanitation as cultural change (and class formation); the imposition of new expectations of citizens. The first three of these are, in large part, parts of an interpretation that became prominent more than a half century ago; the latter reflects a more recent turn toward cultural history.

Let me sketch these more fully. Looking backward from 1900, even more so from the 1950s and 60s, observers of institutions of government were struck by how much difference a century could make. Around 1800 national government was concerned with as little as possible – with foreign and military affairs and the raising of revenue. By 1900 government was involved in an extraordinary range of aspects of ordinary life, prominent among them the hygienic status and conditions of life of its citizens. That transformation is most visible on library shelves, which hold the ‘blue books’ which record the published workings of that government: seven volumes suffice for the 1801 session; 106 for that of 1900. Much of this expansion has been seen alternatively as responding to the problems of the industrial revolution or as application of the utilitarian administrative principles of the early nineteenth-century philosopher Jeremy Bentham.² It is also usually suggested that this growth of state occurred first in England – perhaps because there the problems of industrialization and urbanization were most acute; perhaps because England had the lion’s share of power in the newly assembled United Kingdom. English practices and standards were then disseminated to Scotland and Ireland (Wales was linked legislatively to England), and sometimes to the rest of the Empire.

Only around the 1950s did attention settle on the activity of an early Victorian Benthamite bureaucrat, Edwin Chadwick (1810–90), as a central figure in the growth of the state in general and as pioneering architect of its public health policies in particular.³ Chadwick's famous 1842 *Report on the Sanitary Condition of the Labouring Population* (often known simply as *The Sanitary Report*) is seen as a combined exposé/analysis that set into motion the building of administrative machinery that would effectively make the state guarantor of (some) determinants of health and a clearinghouse of expertise with regard to the means to secure that health.⁴ The brusque Chadwick succeeded in orchestrating the passage of a pioneering Public Health Act in 1848 (11&12 Vict. C. 63), but fell from favour in 1854. Nevertheless, his more adroit successors picked up enough of the pieces to keep the endeavour going, and, through a long series of amendments and consolidations, had produced a remarkably effective welfare state by the early twentieth century.

Just as the history of sanitation had been Chadwick-centred it has also been London-centred. There the modern hydraulic city was created. The acceptance of the water closet as the *sine qua non* of minimal domestic decency led to sewer-building. This in turn resulted in pollution of a great tidal river, to the 'great stink' of 1858 which forced Parliament from its palace, and, because much of the water supply was drawn from these polluted reaches,⁵ to the epidemics of cholera in 1848–9 and 1853–4, which would be the proving grounds for John Snow's famous recognition of the dangers of fecally contaminated water. The response to these disasters was neither easy nor immediate, but in retrospect it has seemed uniquely rational, and, in some sense, inevitable. For sanitary matters, the massive metropolis – sometimes depicted as the City of London corporation and fifty villages – was amalgamated into a single sewerage unit in 1858, the Metropolitan Board of Works. Under its engineer, Sir Joseph Bazalgette, it constructed a system of parallel intercepting sewers on the northern and southern banks of the Thames, each leading to a downstream outfall at which the sewage could be treated and the effluent safely discharged (though this remained an unsolved technical problem until the end of the Victorian period). It has also become customary to regard London as the site of the most critical public-sphere conversations, both face-to-face in its vestry halls, voluntary organizations, pubs and coffee houses, and via the magazines and newspapers its many authors produced: more than anyone else Charles Dickens is probably responsible for a frequent tendency to associate issues of sanitation with London. Finally, as centre of power, London was also where the experts were in all the domains that sanitation involved – law, finance, engineering, chemistry, epidemiology. Hence it has thus been easy to make London the model for what went on elsewhere.

More recently, scholars have highlighted sanitary reform as an exemplar of a transformation of the person that is as much cultural as political. If sanita-

tion brought access to hitherto unattainable levels of health and well-being, it also imposed obligations and invented new forms of deviance. The culture of cleanliness that came with sanitation became the basis of embourgeoisment, a mode of registering one's loyalty to society, an announcement that one's aspirations were acceptable. Often these observations, grounded in Freudian and later in Foucauldian perspectives, were ambivalent, sometimes resentful.⁶ A 'sanitary citizenship' was a pale substitute for more profound forms, equally of citizenship and of human well-being.⁷ It seems clear that Chadwick and others were deeply concerned about the 'buy in' of the proletariat to the social order (and even more of the 'dangerous classes' beneath it). That social order was fragile to a degree that is hard now to appreciate. But here too, the sanitarians were hardly the first or only group to be exploring the environmental or biomedical aspects of equity. Chadwick's approach was in fact a repudiation of other approaches for dealing with precisely these problems.

The stories these documents tell complicate, fill out and sometimes help to explain that narrative. I take 'Provinces' loosely, as an opportunity to decentre in ways that are not narrowly geographic. Various, these documents lie prior to that narrative (sanitary regulation and public health response in the eighteenth century and earlier), after it (later nineteenth-century struggles to bring about regional sanitary improvement), at its edges (in smaller towns, and in Scotland and Ireland, sites of different emphases in sanitation/public health), and behind it, in the emergence of alternative (and, sometimes, antagonistic) centres of expertise. Collectively, four main themes stand out in these documents. They are: environment, empowerment, engineering and equity.

- *Environment.* Sanitary reform was promoted as public health, the main means to lower mortality rates. Outside of Britain, and more gradually within, it would come to be seen as only one avenue to public health. But even while its links to objective measures of health might be tenuous, sanitary reform continued to reflect anxiety about the transmission of harm through some alterable features of environmental media. Harmful conditions of environment included both the obvious assaults on sight or smell, and mysterious alterations of air or of water. A quaint diversion in the history of medicine, sanitary reform is mainstream in a history in which environment is proxy for all the ways our doings affect one another.
- *Empowerment.* However much it might be embodied in the growing and expert-based state, sanitary reform was implemented locally and often by laypeople. A focus on such activity is in keeping with the recent interest among British historians in the 'subscriber democracy' of civil society organizations (which, however, often blended with official units of local governance). Almost always, sanitary achievement was slow and frus-

trating. Successes were occasions for communal pride, which reinforced what historians have recognized as a remarkable era of public-spiritedness and municipal accomplishment that we both still enjoy and struggle to emulate.

- *Engineering.* To a degree too little recognized, successful sanitation required getting the details right. To balance an historiography preoccupied with philosophies (utilitarianism), laws (the series of public health acts), or sensibilities (cultures of cleanliness), some of these documents represent the *technical* – matters not only of engineering narrowly construed, but of its intersection with epidemiology, finance and taxation.
- *Equity.* Finally, these are stories about the extension of biomedical rights, which include rights to environmental determinants of health and amenity. Sometimes the securing of these conflicted with rights of property.⁸ A focus on environmental rights did not always carry over to other biomedical issues – food, housing and safe work, however.

An enormous number of obscure documents might have been included in such a volume. No single criterion of selection operates here. Some of the documents appear because they are typical of similar documents that the delver into the archives or explorer of pamphlet collections will regularly find. Some problematize general issues particularly powerfully. Others, now under-appreciated, were important in their day but have largely escaped historians' scrutiny. Finally, I regard a few as undiscovered classics, remarkable in method, depth of insight and so forth. I have organized them thematically, and organized the themes chronologically, as far as possible. Overall, the story they tell is positive and progressive, yet sanitary achievements were hardly easy, uniform, fair or conflict-free. Much of the world still lacks the public health and environmental goods the sanitarians secured. An oversimplified and state-centred narrative will be of little service to those places. And those who are addressing such sanitary issues will know that they are in fact complicated at every level – technically, economically, politically and even philosophically. They will know too that states and their laws, however important, are rarely sufficient.

Section I (pp. 1–27) presents eighteenth- and early nineteenth-century examples of local sanitary and public health activism in the pre-Chadwickian age. It explores the concept and combatting of 'nuisances' and the response to fever. Contrary to a common view, communities had not neglected sanitary issues prior to the sanitary movement.

Section II (pp. 29–119) makes clear how very differently public health matters were conceived in the other of the united kingdoms. In both Scotland and Ireland, urban infrastructural issues were bound up with, and often subordinate to, Malthusian issues – rural hunger and resultant migration to towns. In both

kingdoms, class relations, religious identity, modes of local government and institutions of law and social administration were distinct both from England and from each other. In both kingdoms too, the problem of major urban epidemics had been confronted well before the sanitary revolution. Strains between English and Scottish or Irish approaches would remain; Chadwick would rely extensively on Edinburgh in conceptualizing the sanitary city, but Edinburgh's physicians were uneasy with approach taken in the Public Health Act of 1848.

Section III (pp. 121–210) contains extracts from local reports commissioned by central authorities. The documents on pp. 121–78 were commissioned in 1839–40 to supply information for Edwin Chadwick's great sanitary inquiry. On behalf of the Poor Law Commission, whose secretary he was, Chadwick was investigating the costs in poor relief attributable to disease generated by insanitation ('physical conditions'). The reports he received are remarkable in their variety. 'Sanitary condition' was still inchoate; not only do the reports follow no single model, authors (reporting voluntarily) might have their own pet concerns. A decade later, the concept of sanitary condition had narrowed, but the variable gaze remained: inspectors visiting towns under the auspices of the 1848 Public Health Act (see pp. 179–210) continue to react as well as to record. The documents focus on smaller towns rather than the familiar shock towns of the industrial revolution. The towns too vary; sanitary problems may be universal, but as inspectors recognize, the history, features and persons in each place dictate how easily they can be tackled.

Section IV (pp. 211–84) represents forms of opposition to sanitary reform, or at least to particular state sanitary policies. The documents begin with an 1848 survey purporting to reveal the incompetence and apathy of local authorities throughout the country. Objectors included entities of local government worried at loss of power or insults to reputation, engineers unsympathetic with Chadwick's approaches; ideologues; industrialists carrying out polluting forms of industry and others. Their power is evident in Chadwick's ouster from public health administration in 1854 and in the adoption thereafter of more flexible modes of central government oversight. In one document, petitioners take issue with the way an inspector has represented their town; in another the objection is to statism; in a third to national effluent standards.

Section V (pp. 285–429) explores the emergence of authority and expertise among lay persons and local officials as they struggled to meet sanitary responsibilities. Willingly or not, towns did take on those responsibilities and often developed impressive capacities for dealing with technical matters. The texts on pp. 285–341 presents the transformative vision of a municipal engineer; the texts on pp. 343–67, present the confusion of elected councillors about what to do with sewage; pp. 369–429, the frustrations of learning how actually to purify sewage.

Finally, section VI (pp. 431–70) highlights the inherently regional character of sanitation, as solutions to domestic or municipal sanitary problems became insanitary conditions for neighbors or other towns. By end of the century the need for regional and, particularly, watershed-based solutions had been widely recognized, but often comprehensiveness came as environmental triage. Some places and activities were sacrificed that others might thrive. Regional sanitary solutions often represented technocracy or raw power rather than democracy, co-operation or epidemiological or ecosystemic analyses.

Notes

1. In keeping with the focus on sanitary reform, I focus less on public health or on sanitary conditions per se. For the latter see F. B. Smith, *The People's Health, 1830–1910* (New York: Holmes and Meier, 1979); Anthony S. Wohl, *Endangered Lives, Public Health in Victorian Britain* (Cambridge, MA: Harvard University Press, 1983).
2. G. Sutherland, *Studies in the Growth of Nineteenth Century Government* (Totowa, NJ: Rowman and Littlefield, 1972); D. Roberts, *Victorian Origins of the British Welfare State* (Hampden, CT: Archon Books, 1969); U. R. Q. Henriques, *Before the Welfare State, Social administration in early industrial Britain* (London: Longman, 1979); R. M. MacLeod, *Government and Expertise: Specialists, Administrators, and Professionals, 1860–1919* (Cambridge: Cambridge University Press, 1988).
3. S. E. Finer, *The Life and Times of Sir Edwin Chadwick* (London: Methuen, 1952); A. MacNalty, *The History of State Medicine in England, being the Fitzpatrick Lectures of the Royal College of Physicians of London for the Years 1946 and 1947* (London: Royal Institute of Public Health and Hygiene, 1948); A. Newsholme, *Fifty Years in Public Health: A Personal Narrative with Comments, vol 1, The Years Preceding 1909* (London: George Allen and Unwin, 1935); W. B. Frazer, *A History of English Public Health* (London, 1950); R. A. Lewis, *Edwin Chadwick and the Public Health Movement, 1832–1854* (London: Longmans, Green, 1952); A. Brundage, *England's 'Prussian Minister': Edwin Chadwick and the Politics of Government Growth, 1832–1854* (University Park, PA: Pennsylvania State University Press, 1988); C. Hamlin, *Public Health and Social Justice in the Age of Chadwick: Britain 1800–1854* (Cambridge: Cambridge University Press, 1998).
4. E. Chadwick, *Report on the Sanitary Condition of the Labouring Population of Great Britain* ed. M. W. Flinn (Edinburgh: Edinburgh University Press, 1965).
5. B. Luckin, *Pollution and Control: A Social History of the Thames in the Nineteenth Century* (Bristol: Hilger, 1986); S. Halliday, *The Great Stink of London: Sir Joseph Bazalgette and the Cleansing of the Victorian Capital* (Stroud: Sutton, 2001).
6. R. Schoenwald, 'Training Urban Man: A Hypothesis About the Sanitary Movement', in H. J. Dyos and Michael Wolff (eds), *The Victorian City*, 2 vols (London: Routledge & Kegan Paul, 1973), vol. 2, pp. 669–92; P. Stallybrass and A. White, *The Politics and Poetics of Transgression* (Ithaca, NY: Cornell University Press, 1986); F. Mort, *Dangerous Sexualities: Medico-Moral Politics in England since 1830* (London: Routledge and Kegan Paul, 1987); M. Dean, *The Constitution of Poverty: Toward a Genealogy of Liberal Governance* (London: Routledge, 1991); M. Poovey, *Making a Social Body: British Cultural Formation, 1830–1864* (Chicago, IL: University of Chicago Press, 1995).

7. C. Briggs and C. Mantini-Briggs, *Stories in the Time of Cholera: Racial Profiling during a Medical Nightmare* (Berkeley, CA: University of California Press, 2003).
8. G. Kearns, 'Private Property and Public Health Reform in England, 1830–1870', *Social Science and Medicine*, 26 (1988), pp.187–99.



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A GENTLEMAN OF THE TEMPLE, *PUBLIC NUSANCE* (1754)

A Gentleman of the Temple, Public Nuisance considered under the Several Heads of Bad Pavements, Butchers infesting the Streets, the Inconveniences to the Publick, occasioned by the Present Method of Billitting the Foot-Guards, and the Insolence of Household Servants, with some Hints towards Remedy and Amendment (London: E. Withers, 1754).

The sanitary reform movement of the 1840s drew not only on ancient sensibilities about filth, it rested on a broad base of cultural and legal concepts about uses of public space. Here a key element was the common law of nuisances. A century earlier, the concept of nuisances had been far broader. The great eighteenth-century jurist William Blackstone explained that public nuisances dealt generally with any activities or behaviours in public spaces which annoyed, or even should annoy, the generality of persons who wished to use those spaces for legitimate purposes.¹

This tract, written by an anonymous jurist and addressed to the makers of laws, municipal and national, reflects that range in its title. It deals with five topics: bad pavements, butchers, quartering soldiers, insolent servants and the ‘vagrant and desperate poor’.

Pavements and butchers would become standard sanitarian issues. Bad pavements (here carriageways and walkways) interfered with drainage and accumulated rotting wastes. Butchering and slaughtering generated large amounts of putrefiable filth in the form of excrement and offal. But they also offended civilized sensibilities in compound ways. Following Chadwick’s lead, sanitary authorities would give great attention to slaughterhouse siting and operation, and to meat quality, which was connected only at the end of the century with tuberculosis.²

By contrast, while quartering soldiers may seem an issue of civil liberty (as in the United States Constitution), it has nothing to do with insanitary ‘nuisances’. Here, the author’s concern is in fact with idle soldiers who require pay-offs from publicans to stay away and out of trouble. The solution is to build barracks. As for the ‘nuisance’ of insolent servants, the author suggests extending precedents from apprenticeship-indenture law. That such a problem might be seen as a ‘public’ nuisance reminds us of how tightly ‘nuisance’ was tied to class and property.

The final topic, on the desperate poor, concerns crime prevention, but reminds us that sanitarianism too would be concerned with control of a potentially dangerous population.

The extract here comprises about two-thirds of the section on butchers (apologies for its abrupt beginning). This wide-ranging piece captures well the relation of the older Blackstonian concept, in which many nuisances were behaviours, and the coming sanitarian view in which nuisances would be conditions of structures. The author's chief concern is with the nuisance of extra-market meat-vending. The primary critique is economic; only where vendors compete will natural price be found and can quality be enforced by inspectors representing the public good. The author recognizes arguments of convenience and claims of customary or natural commercial liberties, but English law allows the regulation for the common good. 'The punishment and removal of Nuisance [*sic*] (p. 19)' is the greater liberty.

The author then turns abruptly to sensibility and safety, but again priorities are not what they will become: A 'shameful' practice involving 'offensive Smells', 'disagreeable Objects', 'Blood and Nastiness' is being permitted, but the key problem is encroachment on public space which impedes safe movement. Particularly striking is the danger of frightened animals running down passers-by. The urban slaughtering industry is a problem, but not yet the offence to refined sensibility that it will become.

Notes

1. W. Blackstone, *Commentaries on the Laws of England* (New York, Strouse, 1892).
2. K. Waddington, *The Bovine Scourge, Meat, Tuberculosis and Public Health, 1850–1914* (London: Boydell Press, 2006).

A Gentleman of the Temple, *Public Nuisance* (1754)

Butchers infesting the Streets.

THE next Abuse is that of Butchers and Poulterers setting up Shops and Stalls, in the best and most publick as well as private Streets, from one End of this great Town to the other. This Practice increases so much every Year, that if not put a Stop to, will, in a little Time, be one of the greatest Nusances among us. /

The holding of Markets must have been a very early Care in all well-governed Cities and Towns, where the People may have constant and necessary Supplies, and those who furnish the Provisions, a certain Place and Time to expose and sell them, and therefore certain Places for Markets, and certain Times for holding them, have been always observed. By this the Providers have the speediest Vent for their Goods, are encouraged in bringing a constant Supply, which produces Plenty; Plenty furnishes the Inhabitants with Choice, and Cheapness follows it; the Value of Provisions is thereby better known, and in some Measure ascertained, and the Buyers secured from the Imposition of the Market-people, who, on various Pretences, know too well how to enhance the Prices of their Goods upon ignorant and unwary Purchasers.

There was always another Reason, and a most essential one, why Markets have had particular Places assigned for keeping them, which was, that they might be held where they would be the least Annoyance to the People; and thus disposed of, their Business was kept from the common Eye of the Publick, and the Butchers and others being together, it was with greater / Ease that these Kind of People were kept under good Regulation among themselves. And lastly, Provisions were there the more easily inspected by the Owners or Overseers of the Markets, that no unwholsome Food should be exposed to Sale.

From the Convenience that was found in keeping the Markets thus in certain Places, and at certain Times, those who provided Shelter, Shops, Stands, and other Conveniences for the Market-people, and were Proprietors of the assigned Place, were allowed, for their Encouragement, to take an Acknowledgment of them for such Conveniences, which brought up the Custom of taking

Market-tolls, and afterwards of making Rules and Laws, for keeping good Order between the Market-owner and Market-people.

There is a pretty strong Authority, which has been shewed me in the Law-books, by which it appears, that the common Law, rightly observed, does not allow selling of Meat out of the Market. This is a Case reported by several of the old Lawyers, and remains in their Books, as no Doubt many more of the same Nature, and is the Case of the Prior of *Dunstable*,¹ who had a Power of holding a Market / in that Town on certain Days; and upon an Action brought by the Prior against a Butcher for selling Meat in his House out of the Market, the Butcher pleaded he was a Housekeeper, and prescribed, that all Housekeepers had used, Time out of Mind, to sell their Meat in their Houses, and insisted he had a Right so to do; but nevertheless it was adjudged, that he could not prescribe to sell his Meat in his own House, but must sell it in the Stalls in the open Market on the Market-day; that the Lord of the Market had the Correction of the Market, and might order and examine into the Management of it, and of the Goodness of the Provisions, which could not be examined by his Officer but in open Market; and as the Market was held on the Place appointed for that Purpose, the Butcher could not sell in his own House, but in the usual Place on the Market-day, and where the Prior's Officer could only take the Toll of the Market-people, and inspect the Provisions.

Whether this is good Law still, I will not pretend to determine, but I think I may venture to say it ought to be, and that a more summary Way to remedy any of these Market Complaints, should be now had, and at an easier Rate, and with more Certainty, than in the / Courts of Law, where the Expence and Delay, as well as common Mistakes and Errors of Clerks, have tired out the best Intentions of doing the Publick many a signal Service.

In Order, therefore, to come at the Remedy for the present Evil, it will be proper to examine into the Nature of it, and how the Publick is affected by it. When a Butcher, or Poulterer, intends to set up in the Street, it is generally the Consequence of having married some Maid Servant in some good Sort of Neighbourhood, where she is known among the Servants of other Families there, and is all the Fortune the Husband has with her, and, therefore, must be made the most of; with this Prospect of Custom, he takes a House, on Purpose to convert it to one of these Shops, and by this Acquaintance, and the never-failing Considerations to the marketing Cook or Footman, they are to give him what Price, and take what Kind of Provisions he pleases, his Shop is something nearer than the Market, the Servant is saved the great Trouble of going so far; and this Temptation to Idleness succeeds so well, that no Matter what the Master pays or suffers for it, the Butcher, or Poulterer, soon gets established: And under such a Combination, I do not wonder the Imposition / continues without Discovery, or perhaps Complaint, even from those who are most concerned and abused by it.

If a Tradesman, or other Neighbour, of middling Rank, comes to buy at this private Shop, Is he not sure to suffer by it? As to Price, is it not in the Seller's Power to enhance it when he pleases? Is it not notorious that he does so, and that the Street Butcher raises a Half-penny, or Penny in the Pound, upon the Market Price, on all his Meat, and the Poulterer 3 *d.* or 6 *d.* in every Piece of Poultry he sells? Thus the Buyer is deceiving himself, while he is complying, under a Kind of forced Necessity, to take what a single Shop affords, and takes what does not suit him, rather than go to the Market; although he would be sure of Choice, Cheapness, and Plenty, and lay out his Money more to his Fancy, and more to the Advantage of himself and Family, and at the Year's End would find it a sensible Saving in his Accounts. It may be said, Why does he lay out his Money there, at a private Shop, if it is prejudicial to him? I must answer, That the Temptation should be removed, and he would never think on it. /

Again, These Shops are under no Power of Inspection, as the Market is, and ought to be: If the Shopkeeper sells bad Meat, he defies you to punish him for it; you saw what you bought, and he will tell you, he did not warrant it; but, that he may not quite lose you, he will comfort you with a Promise to make you amends another Time. If any Man should call on him, to shew his Meat for Inspection, such a one would no Doubt be treated as a Trespasser, and he would turn him out of his Doors. If you tell him his exercising his Trade in the Street is a Nuisance, he sets you at Defiance again, and the Law too, and talks of his Masters that will stand by him, and he will see if he cannot defend himself against you, or any one else. If you ask him why he does not keep the Market, he will tell you Markets are for those that like them, and he will butcher and sell his Meat where he pleases; although he has heard, and knows too, that no private Member is to do an Act that is a Nuisance to his Neighbourhood.

The Punishment and Removal of Nuisance, is one of the greatest Marks of Liberty among us, and it is so guarded by our Laws, that all / the King's Authority cannot pardon a Nuisance;² it must be removed, and happy would it be for the People, if the Removal could be obtained, without the Delay and Expence that attends it. Juries are no Doubt the Guardians of our Liberties, and ought to be so; yet in such Breaches of the Peace, our Liberties should be easier to come at, and better Order would be found among us.

The Corporation of *London* has, within their Walls too, let this Nuisance of Butchers infesting the Street, go so long unregarded, that it is getting the better of them.

Before Market-places in the City were specially appointed, the Streets were the common Places for bringing to, and selling Provisions; but the great Inconvenience at last induced the City to purchase proper Places, and appoint their Markets to be held in them, and at certain Times, as I have mentioned; and good Rules and Orders have been made, to encourage the Market-People to resort

to them; and I am told, would have been observed at this Day, had not their Farmers of the Markets³ abused their Powers, by exacting too large Rates on the Market-People, and by that Means forcing them out of the Market; but before this, no such Practice of deserting the Market had been attempted. /

These Disputes were, after long and very expensive Proceedings at Law, at last amicably determined, to the Satisfaction of all Parties; and, if the City had then put a Stop to the growing Desertion, and had made some good Law, forbidding such Practice for the future, the Out-liers would have soon come in, and no Freeman⁴ would afterwards have set up his Privilege of carrying on Trade in his House, if that Trade was a common Offence and Nuisance to his Fellow-citizens; nor would the Community have endured it for the Sake of his private Interest; no Freeman would have then thought to take a private House in a private or publick Street,⁵ to make a Shamle and a Butchery of it, in the Face and under the Nose of the Publick, but would have been contented to have carried on his Trade in the Place assigned for it, and where his Fellow-citizens (and himself too) had thought most proper.

However, so it is, that the City now, as much as the other Part of the Town, is infected with this shameful Practice; the offensive Smells, the disagreeable Objects of bleeding Heads, and Entrails of Beasts, offals, raw Hides, and the Kennels flowing with Blood and Nastiness, are but Part of the Nuisance; the very Footway is so obstructed with jutting-out Dressers, Blocks covered / with Meat, and Rails advancing on the Street that the Passenger⁶ is forced into the Highway⁷ to get clear of it.

I must still add one Nuisance more that attends this Liberty,⁸ a great one indeed, if not the greatest of all; and that is, that almost every Butcher has behind his House his Slaughterhouse; the Offence it must be to his next Neighbour, is of more than a common Nature; but with respect to the Publick, it is the Cause of many irreparable Mischiefs; to this we owe the most, if not all the Accidents, which happen to the People, by driving horned Cattle through the Streets, the driving these Cattle, and the Manner in which they are treated afterwards, will prove it. They are drove in Company from the Country (or the Places they rest at in the Outskirts of the Town) to the live Market in *Smithfield*;⁹ when there, they are sold singly, and forced singly from their Herd by these Street Butchers; which is not the Case of the Beasts bought by the Butchers belonging to the publick Markets, they having publick Slaughter-houses in bye Places near their Market, where many are again drove together, and will keep Company without being untoward, and thus very rarely do any Mischief; but in the Case of driving them singly to the private Slaughter-house, it is much is / they do no Mischief by the Way; a single Beast will often require two, if not three Men to drive him, though a Number may be drove by one Boy. When the Beast that is drove singly comes near the Door or Way into this private Slaughter-house (generally next the

Butcher's Shop) the Smell of the Shop from the Blood frequent there, gives him at once Offence, and he starts back, while those who drive him endeavour to force him on; in this Struggle, if he can, he breaks from his Drivers (which is too common) he is then pursued about the Streets till he is heated, or grown mischievous or mad, as they call it; and after terrifying the People for two or three Hours, and perhaps wounding, if not destroying, some unfortunate Passenger or other, who cannot get out of his Way, he is Ham-cut,¹⁰ or otherwise disabled, before he can be led to Slaughter. This is so frequently the Case, that hardly a Week passes but some Accident of this Kind makes a melancholy Paragraph in our News-papers.



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JOSEPH RITSON, *A DIGEST OF THE
PROCEEDINGS OF THE COURT LEET OF THE
MANOR AND LIBERTY OF SAVOY* (1789)

Joseph Ritson, *A Digest of the Proceedings of the Court Leet of the Manor and Liberty of Savoy, Parcel of the Duchy of Lancaster, in the County of Middlesex, from the Year 1682 to the Present Time* (London, 1789).

Central to the sanitarians' representation of present and past was an image of urban absurdity. A rationalized approach to ordering space and delivering services was necessary, they argued, because existing authorities were chaotic accretions of centuries of incoherent law – either they did not possess or did not use powers to regulate the salubrity of the urban landscape. Joseph Ritson's *Digest* complicates the picture. Ritson wrote as high bailiff of the Court-Leet of the Manor and Liberty of the Savoy. A leet court was a medieval manorial institution, equally of local administration and of adjudication. Courts leet were an important institution of local government in many places prior to the reorganization of urban governmental institutions that began with a wave of new ad hoc local administrative units in the late eighteenth century, was continued with Municipal Corporations reform in the 1830s, and then with the boards of health, and later the urban, rural, and district boards.¹ While procedures and scope varied and often evolved, the general pattern was for large juries, appointees of the lord of the manor, to determine whether residents were using public space in appropriate ways. As these extracts from Ritson's *Digest* make clear, issues of environmental amenity/salubrity were central concerns. But it appears that the occasion for Ritson's writing was that the Savoy Leet needed to be reminded of what its actual duties (and procedures) were. For – from the standpoint of any rational scheme of public administration – its very existence was absurd: with a population of 320 in 1801, this 6.6 acre sliver of Westminster – roughly 100 yards of Thames shore near Waterloo Bridge, extending to the Strand – had been from the thirteenth century part of the sovereign Duchy of Lancaster, an entity in many respects distinct from the kingdom of England.²

The examples of sanitary transgressions – persons presented and fined by the leet juries over roughly the previous century – are typical of leet juries elsewhere.

They reflect the multiple problems that arise in a closely-packed urban space. There is the constant problem of dung and ash removal, the tendency of structures to divert water to the advantage of some and the disadvantage of others; the constant temptation of citizens to encroach – for reasons of light as much as room – on public space, as well as barrels left in streets, holes unfilled, carts blocking transit. Problematic too are risks from under-maintained private structures – ‘ruins’, which endanger public safety. Here, as with the previous selection, the idiom is that of annoyance, the legal basis of nuisance law. Annoyance could include danger to health, but public health has no special status here. Interesting too is the defining of public good in terms of condition of environment: the Widow Barrier is fined because her ashes are ‘anying’ the street.

Considering the steep fines leet juries imposed, and their tendency to assume private remedies for public problems, one may wonder how effective and equitable they were in enforcing significant salubrity. In a tiny polity like The Savoy, neighbours are fining each other; not surprisingly, a common transgression for which fines were levied was failing to perform jury duty.³ Later in the work Ritson suggests this was a recurrent problem; it was elsewhere too. The Webbs suggest also that local government activism was often spasmodic, bursts of intervention alternating with long quiescence.⁴ And yet, the thrust of Ritson’s pamphlet is that such responsibilities can, should be and have been taken seriously: he includes the oath taken by the foreman and jurors, which explicitly commands public good: ‘you shall present nothing out of hatred or malice, nor conceal any thing out of fear or affection, or for any reward, or for the hope or expectation of any reward.’⁵ If, in retrospect, Ritson’s Savoy is administrative absurdity, it was nevertheless for centuries the horizon of sanitary possibility.

The extract, about a fifth of the whole, concerns nuisances. It is the longest section. Shorter sections deal with weights and measures; scavenging, water and sewers; service on the night watch or as a juror; whoring, gaming and butchering; obstructions; the letting of rooms to outsiders; the upkeep of stairs to the river.

Notes

1. V. D. Lipman, *Local Government Areas, 1834–1945* (Oxford: Blackwell, 1949).
2. Victoria County History [hereafter VCH], *A History of the County of Middlesex. Volume XIII. City of Westminster part 1*, ed. P. E. C. Croot, with A. Thacker and E. Williamson, (London: Institute for Historical Research, 2009), pp. 39–41.
3. VCH, *A History of the County of Middlesex*, vol. 2, ed. W. Page (London: Constable, 1911), p. 113.
4. S. Webb and B. Webb, *English Local Government: the Story of the King’s Highway* (London: Longmans, 1913); cf. *The Court Leet Records of the Manor of Manchester from the Year 1552 to the Year 1686, and from the Year 1731 to the Year 1846*, ed. J. P. Earwaker, 12 vols (Manchester: Blacklock, 1888).
5. J. Ritson, *A Digest of the Proceedings of the Court Leet of the Manor and Liberty of Savoy, Parcel of the Duchy of Lancaster, in the County of Middlesex, from the Year 1682 to the Present Time* (London, 1789), Appendix, p. 41.

Ritson, *A Digest of the Proceedings of the Court Leet of the Manor and Liberty of Savoy* (1789)

NUISANCES.

Ashes.

E. C.¹ 1685. Widow Barrier, 'for anoying the street with ashes,' amerced 2s.
Samuel Heath, for the same, 2s.

M. C. 1690. Rebecca Pritchard, 'for sifting ashes in the street,' amerced 3s. 4d.

*Bulks.*²

E. C. 1716. Christopher Scrape, 'for building a new bulk nere Exeter Change, and blocking up a door way into the said change, to the great detriment of Mr. Brown,' amerced 2l.

M. C. 1746. Three persons, 'for erecting 'bulks' or 'outsets' . . . in the street opposite 'to their houses,' amerced 6s. 8d. each.

Carts in the Street.

E. C. 1683. Leonard Hancock, 'for setting his graine carte in the kings highway, in Milford Lane, for the space of one month,' amerced 5s. /

Mr. Smyth, for setting his carte loaden with timber in the street,' amerced 6s. 8d.

E. C. 1689. Mr. Leonard Hancock, 'for stopping vpp the street with carts,' amerced 2l. 10s.

E. C. 1696. Thomas Prentice, 'for stoping up the kings high way . . . with carts . . . the same being an anzance³ to all his majestes subjects passing and repassing the said high way,'⁴ amerced 1l.

Casks in the Street.

E. C. 1683. Mrs. Smyth, 'for setting caske in the street for one month,' amerced 3s. 4d.

M. C. 1695. Richard Thaws, 'for hooping or causing to be hoopt his caske in a pasage betweene Beuford Buildings and Fountaine Court . . . whiche 'stopped' the passage of his majesties subjects,' amerced 10s.

E. C. 1709. Simon Harbin, 'for suffering severall brewers casks to stand and be emptied of the wash before his door, to the great annoyance of his neighbours,' amerced 3s. 4d.

M. C. 1732. Emmerton, 'for placing tubbs before his house,' amerced 3s.

Cellar Doors and Windows.

E. C. 1686. Mr. Baswright, 'for letting his celler dore lye open very far in to the street, to the great anoya[n]ce of the kings subjects,' amerced 10s.

M. C. 1692. Lord Germaine, 'for not covering and amending his celler window, the same being open and very dangerous for their majesties subjects passing and repassing thereby,' amerced 6l.

E. C. 1721. William Roberts, 'for not keeping his cellar or vault door . . . in good repair, to the annoyance and damage of his neighbours and others of his majesties subjects passing and repassing that way,' amerced 10s.

Common Shore.

E. C. 1683. Joseph Whiston, 'for occationing the common shore to be stopt by Exeter Chainge,' amerced 10s. /

Dunghills.

E. C. 1685. Thomas Row, esq. 'for making a dunghill from his stable in the common street,' amerced 5s.

The Lady Brown, 'for throwing horse dung in the street,' amerced 5s.

M. C. 1690. Sir Charles Porter, 'for making a laystall in Millford Lane,' amerced 3s. 4d.

Three others amerced for the like offence.

E. C. 1707. James Long and Francis Roods, 'for making a dung wharffe at Beauford Building . . . and for continuing a large quantity of dung there for severall dayes, and for bringing the said dung out of severall parishes, and there laying and continuing the same upon the said wharffe, to the very great dammage and nusanse of all the inhabitants liveing there, and the like offence haveing been presented at former courts and not reformed,' amerced 99l.

E. C. 1725. Francis Rhodes, 'for making a dung wharfe or lay stall at the lower end of Fountain Court . . . being a great nusanse to the inhabitants thereabouts and others, and for continuing the same after severall notices given to him to abate the same,' amerced 20l.

Filth and Nastiness.

E. C. 1731. John Roads, 'for a nucence by keeping of a great quantity of filth and nastiness in a vault under Fountain Court, to the great annoyance of the inhabitants,' amerced 10l.

Hanging out Clothes, &c.

E. C. 1685. Richard Barber, 'for hanging out cloaths in the street uppon a poll, amerced 5s.

E. C. 1697. Peter Williams, 'for an incroachment and anuzance in the kings high way . . . by hanging out silks soe low in the street that his majestes subjects cannot passe and repasse as they used and ought to doe,' amerced 1*l.* /

*House of Office.*⁵

M. C. 1684. Widow Day, 'for a house of office emptying itselfe upon the kings high way,' amerced 2*l.*

M. C. 1725. Solomon Humbleby, 'for refusing the party vault or house of office to be emptied thro' his house, contrary to antient custome and usage,⁶ whereby the emptying thereof other ways became a great nusance to his neighbours,' amerced 13*s.* 4*d.*

Obstructing the Passage.

M. C. 1721. John Simmock, 'for obstructing the passage,' amerced 13*s.* 4*d.*

C. 1718, held August 28th, to view a stop made in the Strand by Mr. Francis Saul and Mr. Richard Willett, by digging vaults before their doores, and thereby occasioning a stop for severall days,' adjourned ('disputes arising') till August 30th;⁷ said Saul and Willett amerced 5*l.* each, affeered (September 3d) at 50*s.* each.⁸

E. C. 1747. Joseph Hallett, 'for encouraging vagrant and disorderly persons to stand at the door of his house . . . the same being a nusanse and an obstruction to persons passing and repassing on the kings highway,' amerced 1*l.*

E. C. 1757. Tate, 'for obstructing the footway with bird-cages,' amerced 13*s.* 4*d.*

Open Places.

M. C. 1693. Upon the oaths of the constables, 'Mr. Aldersey and Mr. William Bushel, the undertakers and managers of the city pipes,⁹ for breaking up and leaucing open the ground in the kings high way in the Strand, neare Exeter Change, being very dangerous for there majesties subjects pasing and repasing the said way,' amerced 5'

E. C. 1712. 'The Duke of Beuford, for a defolt, letting a pease of ground ly open in Foutting Cort, wich seuerall peple fell done one story depe, for wich whe a mesing,' 10*l.*

M. C. 1773. Hans Wintrop Mortimer, esq. 'for opening and leaving open a drain in Strand Lane, and for leving in Strand Lane and Surry Street . . . a considerable / quantity of rubbish and materials for building,' amerced 10*l.*

E. C. 1774. John Tinckler, carpenter, 'for leaving open and uncovered three areas in Exeter Street . . . being very dangerous to passengers, especially in the night time,' amerced 3*l.* 3*s.*

Rubbish in the Street.

M. C. 1684. Mr. Robert Cordell, 'for laying rubbish at the west end of the . . . Exchange,' amerced 3s. 4d. (upon the oaths and information of the scavengers.)

Symon Fox, esq. 'for permitting a heap of rubbish to lye at the syde of Mr. Weeks his house, and upon his owne ground in Surry Streete, for 3 months,' amerced 1*l*.

Five others for the like offence. 10s. &c.

M. C. 1693. The undertakers and managers of the city pipes, 'for leauing there pipes and a quantety of rubbish in the street, it being a great nuzance to their majesties subjects,' amerced 5*l*.

M. C. 1730. Thomas Pyke, church-warden of St. Clements, 'for suffering great heaps of lime and mortar to lye in the church yard severall weeks,' amerced 6s. 8d.

M. C. 1746. Three persons, 'for laying rubbish in the publick street,' amerced, 'unless removed in six days,' 2*l*. 1*l*. and 1*l*.

Ruins.

M. C. 1683. Simon Fox, esq. 'for a house in the Strand much decayed and in danger of falling downe speedely,' amerced 5*l*.

M. C. 1765. Mr. Knot, 'for not clearing away the rubbish in Water Street, and for not taking down the stack of chimnies and front wall in Arundell Street, where a fire lately was, it being very dangerous to passengers,' amerced 2*l*. 10s.

E. C. 1767. The same, 'for not putting up a proper fence before his house in Arundell Street, where the late fire was, it being a great nuisance to the neighbourhood there,' amerced 2*l*. 2s. /

M. C. 1773.., 'for continuing a stack of chimneys, being the remains of his late house burnt done in Water Lane . . . whereby the lives of pessengers are endangered,' amerced 5*l*.

Shed.

M. C. 1689. Mr. Wood, 'for building a shed in Worcester Street, to the great annoyance of the neighbourhood and incroachment of the kings highway,' amerced 1*l*.

Sink.

M. C. 1726. Mary Armshaw, 'for turning the sink of her house into 'Angell' Court, to the great annoyance of her neighbours,' amerced 1*l*.

Soil.

E. C. 1718. Josiah Keen, 'for bringing his soil and scattering of it in the streets . . . to the great annoyance of the inhabitants,' amerced 20*l*.

M. C. 1722. William Jarvis, 'for annoying his next door neighbour by throwing out filth and soile, and darking his next door neighbour by hanging out

cloaths, and also for an insult offered to the jury¹⁰ in the execution of their office,' amerced 6s. 8d.

Stills.

E. C. 1707. Mary Bavage, 'for not removeing a still in her house, whereby her neighbours houses have been and are in danger of fire, and likewise for keeping a disorderly house,' amerced 2*l*.

M. C. 1721. Peter Duamell, distiller, 'for negligently fixing and putting up a still very dangerous to the inhabitants his neighbours . . . and others his majesties subjects,' amerced 2*l*.

Watercourse.

M. C. 1740. Mrs. Brown, 'that she suffers her watercourse to break in upon her neighbour's vault to their great injury,' amerced 1*l*. /



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MISS HORNER, *EXTRACT FROM AND
ACCOUNT OF A CONTAGIOUS FEVER AT
KINGSTON UPON HULL* (1805)

Miss Horner, *Extract from and Account of a Contagious Fever at Kingston upon Hull. Report of the Society for Bettering the Condition and Increasing the Comforts of the Poor* (1805), pp. 96–110.

Dated at the end of December 1803, this brief report not only summarizes the response of the port city of Kingston upon Hull to a contagious fever which had hit the town two years earlier, but reviews the literature on fever. Concerned also with the unity of society in the face of epidemic disease during an era of potential revolution, it anticipates early sanitarianism. The extract is significant in representing the intersection of the most fully developed arm of pre-Chadwickian public health-oriented medicine, the fever hospital movement,¹ which was strongest from about 1790 to 1820, with the practical wing of the evangelical movement, whose most conspicuous leader was Sir Thomas Bernard, a lawyer-philanthropist, and primary founder of the Society for Bettering the Condition and Increasing the Comforts of the Poor.² Bernard was editor of the journal in which Horner's report appears; he likely wrote the footnotes and the 'Observations' section, concerned with anti-fever efforts in London and elsewhere.³

The Society fostered a range of approaches and does not fit easily into the character-conditions debate that would sharpen in later decades. It was concerned equally with remoralizing the spirit and with frugal and healthful living. Articles in the same volume deal with fuel-saving cooking stoves, school organization, vaccination, cottage gardens, water purity, the insuring of cows, bee-keeping and workhouse management. There are also several others on the treatment of fevers. The bottom line was best practices: whatever worked. The orientation may suggest Benthamism; for Bernard, however, the more immediate inspiration was Count Rumford, innovator of the stoves and the soups to cook on them.⁴

A Miss Horner, presumably this author, was active in Hull charities in the first decade of the nineteenth century, one year contributing a guinea to Lancastrian schools, on another occasion to the British and Foreign Bible Society (confirming the evangelical connection), later administering a charity to bring

fresh fruit to workhouse children.⁵ Hull, represented in Parliament by William Wilberforce, was an evangelical centre.⁶ In terms similar to the later sanitarians she describes the circumstances of the so-called typhus: crowdedness, dirt, poor air and water quality, pauperizing effects of disease. The public response too anticipates the sanitarians': paving, draining, disinfecting, washing, ventilation. As would Chadwick, she presses for rapid disposal of the dead and boasts of the economies of public action. For less than 200 pounds, 115 people had been cured; inaction would have left a large number of orphaned children to be supported at public expense (the fever was deadliest among young adults). Gratitude of the poor was an added bonus. Unlike Chadwick, Horner sees no essential tension between curing and preventing: sanitation is but one component of medical response. Her context is charitable provision, the gift of food, warmth and medicine, rather than political economy, as his would later be.

Hull was typical, as the article's footnotes suggest. But these anticipations had been largely forgotten by the late 1830s. Chadwick, who surely knew of the heritage, was uneasy with it: it placed enormous responsibility for social provision in the hands of doctors, who were often ambivalent at best to considerations of political economy.

The extract includes all of Miss Horner's text and about half of Bernard's 'Observations'. It omits detailed notes on arrangements for dealing with fever in Leeds, London, Manchester, and Waterford.

Notes

1. Margaret Pelling notes that fever, not cholera, was the key disease in the years leading up to the sanitary reform movement, *Cholera, Fever, and English Medicine, 1825–1865* (Oxford: Oxford University Press, 1978).
2. J. R. Poynter, *Society and Pauperism: English Ideas on Poor Relief, 1795–1834* (London: Routledge and Kegan Paul, 1969); J. Baker, *The Life of Sir Thomas Bernard, bart* (London: John Murray, 1819).
3. T. Bernard, 'An Extract from a Further Account of the London Fever Institution', *Report of Society for Bettering the Condition and Increasing the Comforts of the Poor*, 5 (1808), pp. 138–50; T. Bernard, 'Extract from an Account of the further progress of the Fever Institution', *Report of the Society for Bettering the Condition and Increasing the Comforts of the Poor*, 6 (1815), pp. 1–9.
4. On Rumford and his impact in England see M. Berman, *Social Change and Scientific Organization: The Royal Institution 1799–1844* (Ithaca, NY: Cornell University Press, 1978); J. S. Martin, 'Count Rumford's Munich Workhouse: Poverty and Enlightened Social Theory in 18th-Century Bavaria', *Studies on Voltaire and the Eighteenth Century*, 263 (1989), pp. 206–8.
5. *Hull Packet*, 17 January 1809; 4 April 1810, 22 January 1847, 8 October 1858. She is often associated with Simon Horner, Jr, esq., probably her brother, who was active in missionary societies.
6. *VCH. Yorkshire. East Riding*, ed. K. J. Allison (London: Oxford University Press/Institute for Historical Research, 1969), pp. 212–3; J. Bigland, *The Beauties of England and Wales, or Original Delineations, Historical, Topographical, Descriptive of each county V. 16 Yorkshire* (London 1812), pp. 525–7.

Miss Horner, *Extract from and Account of a Contagious Fever at Kingston upon Hull* (1805)

IN the winter of 1801, the *typhus* fever prevailed in Duke-street at Hull,* and spread by contagion to other parts of the town. Many persons died from the malignity of the disease, and many others were reduced by it to a state of extreme weakness. Five orphans of one family deprived of their parents by the fever, a pregnant widow left with six small children by the same fatal cause, and two other paupers / ill of the fever, all living in Duke-street, applied to the new workhouse in Hull for relief. The governor and guardians requested Dr. Crosley¹ of that town, and Mr. Swann, the surgeon of the workhouse, to examine the houses in the above street, and to report to them the state of the inhabitants. They visited the street on the 5th of December 1801, and found that the fever had gone through six families, and that it had been communicated to 26 others. This report was laid before the magistrates, who appointed the same gentlemen to give immediate assistance to the sick, and to employ every means to destroy the contagion.

Tho Duke-street is not in a confined situation, and the houses are newly built, and only seven in number; yet each house contains eight rooms, and, with only three exceptions, every room a family. The rooms in which the fever prevailed, were close and crowded; the ceilings, walls, closets, and floors, were uncommonly dirty; / and the beds, bedding, and furniture, in the same state. The air in them was suffocating and offensive; the crevices of the doors and windows were filled up with old linen or paper, and the landings were crowded with vessels of foul water. In these seven houses, there are 51 families,† and 200 inhabitants. Many of the heads of these families are mechanics, as shoemakers, tailors, &c. and follow sedentary occupations at home. The children were likewise confined at home by

* This winter (December 1803) the typhus fever again prevails among all ranks of people in this town and its neighbourhood. A Board of Health² has been established and feverwards have been appropriated in the attic story of the infirmary, for the reception of the poor who are ill of the fever; and who are admitted every day of the week at 12 o'clock at noon.

† Two rooms were deserted in consequence of two persons in one, and three in the other, having died in the fever; two other families took possession of the rooms, and both caught the fever; they therefore removed to another part of the town.

the cold weather. The fever raged in 32 of these families; in six of them, before the medical gentlemen began their attendance; seventeen persons having had the fever, nine of whom died. Four of these were fathers of large families, five were mothers, and the remaining eight were children. Of one family the father and mother both died, and left five orphans, who were taken into the / work-house. In another, the father died, leaving his widow pregnant, who, with six small children, must now chiefly depend on parochial relief. In the 26 families that Dr. Crosley attended, 70 persons had the fever; nine were fathers, 21 were mothers, and the remainder children. Many of them were in very great danger, but they have *all* recovered.

The fever in itself was very infectious; but the spreading of the contagion was much increased by idle, ignorant, and officious neighbours crowding the rooms of the sick; some sitting two hours and more at a time. By this practice they not only disturbed the patients, and rendered the air of the apartments less salubrious, but often carried the infection home to their own families. Many of them could name the time when, and place where, they caught the infection; and it was traced from one room to another in several families: to these acts of imprudence they added others equally dangerous. When any one / died, the body was kept in a putrescent state three days, exposed to the sight of every prying neighbour; and the funeral, particularly if on a Sunday, was attended by a great part of the inhabitants of the street.

The following plan was adopted to destroy the contagion, and to relieve the sick. The street was paved anew, the drains,* which were defective, repaired, and a proper descent given to carry off the foul water. The ceilings, walls, and closets of the rooms were washed with quick-lime fresh from the kiln, and the furniture and floors with soap and cold water. The bed-sides were washed every morning, and the floors sprinkled with vinegar twice a day. The doors and windows were set / open† every day three or four times, between ten o'clock in the morning and

* Too much attention cannot be paid in large populous towns to prevent the air from being contaminated by noxious effluvia exhaling from corrupt and putrid substances, arising from the neglect of cleansing the streets, lanes, and sewers sufficiently and frequently, and of suffering soil carts to stand in the streets at improper hours, and heaps of manure to remain in a town.

† Dr. Lind of Windsor³ has given some curious facts of the beneficial effects of FRESH AIR, in the cure and prevention of the plague, as well as the infectious fever. He remarks that 'Europe is never entirely free from pestilential contagion; it being more or less kept up in our jails, hospitals, and dirty habitations, situated in lanes and narrow streets of cities, and crowded manufacturing towns; and from thence communicated to our fleets and armies, and again by them, particularly the soldiers, disseminated over every part of the kingdom, so as to become seriously worthy of public notice. – The only possible means (he continues) of diminishing the growing contagion seems to be the establishing Houses of Recovery⁴ in every town.' – He concludes with observing that 'the impropriety of admitting typhus patients into hospitals and infirmaries, where there are convalescents from other disorders, from the *certainty with which the typhus contagion seizes them*, is

four in the afternoon. Steady and attentive nurses* were engaged to wait on the sick; and they were charged neither to suffer strangers / to come into the rooms, nor to go into the apartments of other families.

Sheets, blankets, and rugs were provided, that the sick might lie warm and comfortable; and body linen† to keep them clean in their persons. The dirty linen, taken off the beds and bodies of the patients, was immediately put into cold water; afterwards washed, and dried without doors; and every thing was speedily removed, that had a tendency to accumulate the contagious miasm.⁷ The hands of the patients were washed night and morning, and their mouths cleansed frequently with vinegar and water. Coals were provided for those, who had not the means to buy them. The sick and their families were supplied with arrow root, sago, or boiled milk for their breakfast; and good mutton broth‡ / was boiled every day for dinner; each family, according to the number it contained, receiving two, three, or more quarts daily, at 12 o'clock at noon. Good wheaten rolls, one day old, were distributed at the same time among the families, and in the same proportion; rice pudding, a little boiled mutton, or beef-steak, with half a pint of brisk small beer or ale, were allowed the convalescents. Milk sago, ale caudle, or arrow root,§ was prepared and given in the evening. In the worst stages of the / fever, wine was sometimes the only thing that could be taken; and with this the patients were supplied in small quantities every half hour, hour, or two hours, as the case required. In some very weak persons, wine soured in the stomach, and brought on sickness and vomiting: in these cases brandy and water was substituted.

too well known to every medical practitioner, to need being mentioned here.⁵ – Dr. Lind's Letter to Mr. Pennant on Typhus Fevers; printed in 1803 by Knight of Windsor.⁶

* Four nurses and two superintendants who were engaged to attend the sick, and to take charge of the linen and other articles, caught the fever, but recovered. The workhouse surgeon, who only visited the sick a few times, took the infection and died.

† The necessity of the above requisites for the recovery of the sick poor being made known to Mr. Thompson, Deputy Governor of the workhouse, he immediately ordered them, at the expense of the workhouse.

‡ The following is the receipt:– 15 lbs. of mutton, 3 1/2lbs. of barley, 2 cow heels, 2 sheeps-heads, 2 dozen of turnips, 1/4 peck of onions, half a handful of thyme, 1/2 lb. of salt. These ingredients were boiled at the soup house, and made 52 quarts of very nourishing broth.

§ We can add to this account (from good authority) that the poor of Hull have been under the greatest obligations to the writer of this extract, and her two brothers, for the charitable aid they have been constantly giving to the distressed and needy.⁸ But during the late calamity, the sick families in Duke-street were infinitely indebted to them for the uncommon pains they took to promote the comfort and recovery of the sick, and the support of their families. They sought out careful, steady, and attentive nurses, gave them instructions and paid them wages; they kept the account of the wine and other expenses; they directed and superintended the making of the mutton broth, sago, and other articles of diet, and they frequently sent provisions to the sick from their own tables. B. 17th Dec. 1803.

When the fever had been present only three or four days, and the state of the patient with respect to weakness, pregnancy, or any other cause, did not forbid, an antimonial emetic was given, which generally also operated as a gentle laxative. Afterwards, three table spoonfuls of a strong decoction of yellow bark⁹ were taken by an adult, every two hours. This medicine, assisted by sago, strong broth, and a little wine, was persisted in for three or four days, and frequently had the good effect to put a stop to the progress of the fever.

When the fever had continued more than four days, it then went through its regular / stages, and seldom terminated until the fourteenth, sometimes not before the twentieth or twenty first day. – The patients were supported by wine, sago and arrow root, given in small quantities, and at short and stated intervals; and the decoction of bark was ordered to be taken as I have before described. When the head-ach was severe, and the patient was delirious, a blister was applied to the nape of the neck, and an anodyne draught was given the last thing at night. When sickness accompanied the head-ach, compound tincture of lavender was added to the decoction of the bark. Costiveness was removed by lenitive electuary, or by a suitable quantity of powdered rhubarb mixed with a few grains of powdered ginger, or by an injection. The violence of the lax¹⁰ was restrained, by giving ten drops of tincture of opium, in every dose of the decoction; and the profuse perspiration was checked by half a grain of opium, taken every six hours. The severity of the cough was mitigated by a tea-spoonful of the tincture of Tolu,¹¹ taken / every four hours. Three persons, who relapsed, began early again with the bark and wine, and recovered in a very few days.

The contagion was entirely destroyed, and the fever perfectly subdued, in little more than two months.** The whole expense of supporting during this time, twenty-six / families, containing one hundred and fifteen persons, of whom seventy had the fever, did not much exceed £200. The fever was particularly dangerous in the cases of adults; and, if one may argue from what took place in the six families that underwent the fever before Dr. Crosley attended, it is probable that many more fathers and mothers would have fallen a sacrifice, but for the great attention that was paid; and in such event their children must have gone to the workhouse. It is easy to calculate the difference between a family of children, removed as orphans into the workhouse, or supported at home by the labour of parents again enabled to maintain them; and, as in this instance, almost all of them warmly expressing their gratitude for the attention and care which had been shewn to them.

* * *

*

OBSERVATIONS.

It must be extremely satisfactory to the friends of humanity, to peruse so favourable an account of the successful attention and kindness, shewn in this instance to the poor of Hull, by those to whom their guardianship and protection has been confided by the legislature. It is indeed extraordinary, that of seventeen persons who first caught the fever, nine should have sunk under the virulence of the infection; and that of the number of seventy, who were afterwards afflicted with the fever, in consequence of the thoughtless inattention which at first prevailed, not one should have died, but all have been restored to health and to their families. Nor is it less deserving of observation that, from the hour that medical care was placed between the sound and the infected, the infection was stayed.

It is of the greatest importance, that the / poor should in this, and in every other instance, *know their own true interests*; and that they should be aware, how much it is for their benefit, to make an early application,* upon the appearance of *typhus* fever. It is also very desirable, that parishes should be aware how much may be done for the diminution of parochial expenses, for the preservation of the useful labourer, and for the expulsion of misery pestilence and death / from the habitations of the poor, by a seasonable and well directed attention to the cure and prevention of infectious fever; and particularly, by their having recourse to, and encouraging, fever institutions in their neighbourhood.

* The consequences of delay in application for medical aid, and of inattention in cleansing the rooms of fever patients, are exemplified in the case of *Thomas James*, who was admitted into the London House of Recovery on the 15th of November 1803, and died there of typhus fever on the 20th. – His wife had in October, been attacked with the fever, occasioned partly by a cold, and partly by the closeness and dirtiness of her apartment. The application to the fever institution was delayed, until she was in such a state, that the physician of the house thought it dangerous to move her. She was supplied at home with what was necessary, and directions given for purifying her apartment. These directions were neglected, and she was taken with some difficulty to a neighbouring workhouse, when she died. – *Thomas James* was soon after attacked by the same disorder. Six days elapsed before application was made to the House of Recovery; to which he was then moved in an hopeless state, and in five days sunk under the disease. 17th Dec. 1803.



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T. C. SPEER, *MEDICAL REPORT CONTAINING
AN INQUIRY INTO THE CAUSE AND
CHARACTER OF THE DISEASES OF THE
LOWER ORDERS IN DUBLIN* (1822)

T. C. Speer, *Medical Report containing an Inquiry into the Cause and Character of the Diseases of the Lower Orders in Dublin*, *Dublin Hospital Reports* (1822), 3, pp. 161–200.

A reader of the standard literature, secondary and primary, of the early public health movement, will find few references to Ireland or Scotland. In both, there was substantial recognition of how a city's fabric affected its health, but the social and economic causes of disease seemed more pressing than the infrastructural. In Ireland, socio-medical analyses of health had arisen following adoption of direct Westminster rule in 1801. As Ireland's economy struggled, the underlying issue was often the social contract between an impoverished populace and its rulers. Key theorists were Dublin's hospital doctors, who regularly address social causes of disease in their annual reports.¹ While this discourse persists into the famine years, 1845–51, it was episodic: it was fully developed during fevers and famine in the teens and early twenties, and then re-emerged in the mid- and late 1830s, in connection with the combined issues of instituting an Irish poor law and restructuring the Irish medical profession.

T.C. Speer's² 1822 paper is remarkable in two respects: first, it *centres* on social (and environmental) determinants of disease, rather than treating these as complications in clinical practice. Second, Speer writes as a dispensary- not a hospital-doctor; he had served the Dublin General Dispensary³ since 1818. Dispensary medicine typically involved home visits too. He writes (p. 31): 'The practice of a general Dispensary is perhaps the most complete introduction to the diseases and indeed to the distresses, habits, and character of the lower orders of a city. Sorrows and sufferings are here unveiled, which shame will hide from the public eye; here we shall see how the chain of poverty has its various links, and the cup of bitterness its various dregs; here we become associated with disease in all its varied and complicated shapes'. Speer's analysis of the dangers to health of urban living differ from those of Eng-

lish sanitarians a generation later in emphasis and underlying pathology: he is concerned with 'the common elements of life and health, as air, food, and water', but more with input (food) than output (wastes).

Speer, like the Hull doctors and Bernard's correspondents, uses '*contagion*' as 'the grand connecting and assimilating principle of *city disease*'. That is, he uses it in much the way 'miasma' will be used by later writers; it is what unites a community pathologically, making the existence of any pathogenic conditions a general and public problem. Speer can do this because he writes at a time when contagia are understood to be spontaneously generated and more or less generic: a common contagion may produce clinically different diseases in different persons. The metaphor of contagion leads Speer to think of all forms of 'connection principle' which impact health: these will include 'peculiarities of habit, occupation, and character, which a city life affords; the effects produced by the pursuits of arts, manufactures, and commerce'.

As London's or Liverpool's will come to be, Dublin's health problems are rooted in its poverty: 'Amongst the lower orders ... seem to exist the true cradle and depôt of general disease'. Like Chadwick, who would quote him,⁴ Speer recognizes a cycle of poverty and disease. 'The sources of disease, whether natural or acquired, seem so numerous, so mixed and confounded with each other, and so united in a circle, that it often becomes impossible to trace the separate relation of cause and effect ...' (p. 31). Speer doubts that better diagnosis will clarify matters; he recognizes also that poverty is not a problem that doctors can cure (p. 30). Rather they are put in a 'moral' dilemma. Unlike Chadwick, he is concerned with underlying demographic causes of poverty, which he treats in Malthusian terms: the 'march of populaton and poverty seem uniform ... , and in direct ratio with each other' (p. 30).

From such general principles Speer turns, as would most contemporary medical geographers to climate (omitted from the extract), and then to an ethnography of Dublin's poor: there he charts the infamous dependence on the potato and the notorious reliance on spirits, but also a heavy intake of salt, likely a significant factor in the prominent dropsical and congestive conditions he encounters. For there is a characteristic suite of diseases of urban poverty: skin ailments, bowel problems, dyspepsia, debility, respiratory ailments, and 'low nervous fevers'.⁵ Behind all this is recognition (and, sometimes, appreciation of) unique culture. Malthusian checks do not work in Ireland: beggars *need* babies 'as affording pretexts for their trade, and claims for charity' (p. 39). And, in many ways, commitment to community looms larger than the expected individualism of the classical political economists.

The extract is the bulk of Speer's paper; it leaves out a long section on climate.

Notes

1. C. Hamlin, 'Environment and Disease in Ireland', in M. Gorsky and V. Berridge (eds), *Environment, Health, and History* (London: Palgrave Macmillan, 2011).
2. Dr T. C. Speer of Dublin is distinguished with difficulty from a Dr Thomas Charleton Speer who was practising in Bath at the same time. I believe the Dublin practitioner to be the T. C. Speer who received his M.D. from Edinburgh in 1812 (thesis on the nature of water). A Dr Speer was among subscribers to a collection for relief of the poor in Kingstown, south of Dublin in 1835 (*Freeman's Journal*, 20 February 1835).
3. The Dublin General Dispensary had been founded in 1785 at Temple Bar near the Liffey, and treated about 4,000 patients annually in 1818. It was one of five Dublin dispensaries at the time. See J. Warburton, J. Whitelaw and R. Walsh (eds), *History of the City of Dublin, from the Earliest Accounts to the Present Time; containing its Annals, Antiquities, Ecclesiastical History, and Charters; its Present Extent, Public Buildings, Schools, Institutions, &c. To which are added, Biographical Notices of Eminent Men, and Copious Appendices of its Population, Revenue, Commerce, and Literature*, 2 vols (London: Cadell and Davies, 1818), vol. 2, pp. 736–7.
4. Chadwick, *Sanitary Report*, pp. 165–6.
5. 'Low' refers to a debilitated state of delirium; some of these fevers will have been our typhus or typhoid.



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T. C. Speer, *Medical Report containing an Inquiry into the Cause and Character of the Diseases of the Lower Orders in Dublin* (1822)

THE diseases of all large cities must have a certain correspondence with each other, notwithstanding the varieties of circumstance under which they may be placed as to climate, soil, and situation. Where the common elements of life and health, as air, food, and water, undergo such rapid and irregular consumption and vitiation, it is evident that the changes they sustain in quantity and quality must produce corresponding changes of disease to a certain extent. / Where so many living beings are congregated in a given space; where there are so many mouths to feed, and so many lungs to fill, those elements, thus depraved and diminished, must necessarily produce correspondent changes, not only on the organs with which they are more immediately concerned, but on the system in general.

Hence we find that *contagion* taken in the wide and general sense of the term, constitutes the grand connecting and assimilating principle of *city disease*, and that to avert epidemics, or mitigate their effects, is the chief means sought for in the preservation of the public health. We know that, although the atmosphere is its great medium of operation, the social fabric is its great organizer, as the term *epidemic* implies. On this subject, however, it is not my intention to offer any thing here; the doctrine and theories of fever have been so often and ably discussed, that I believe, but little more remains to be said.

But it must appear, on inquiring into the history and causes of *city disease*, that contagion, using the term as above, is not the only peculiarity, or connecting principle in its formation. We find other and important links in the chain, which, though of very inferior consequence, should, however, be carefully taken into account. Among these the chief, perhaps, arise from the peculiarities of habit, occupation, and character, which a city life affords; the effects produced by the pursuits of arts, manufactures, / and commerce, must, as opposed to those of agriculture and rural affairs, present distinct and decided effects on our physical frame, and in the production of disease must have powerful and peculiar influences.

This law however, like most similar laws of generalization, is so loose and wide in its definitions and distinctions, so subject to exceptions and irregularities, that unless perhaps in its application to the lower orders of society, we cannot be much governed by it; here, however, it seems to hold strong ground. Amongst the lower orders the deviations from health, arising out of the above circumstances, must be more numerous, and these deviations must more resemble each other; amongst them also seem to exist the true cradle and depôt of general disease, the causes above mentioned, and others infinitely more powerful being superadded. In this class the march of population and poverty seem uniform, and in direct ratio with each other; and as the lines and forms of distress appear more decided and varied, so do the lines and forms of disease appear more distinct. Amidst those wretched scenes, the philanthropist will have his best studies, and the physician his best practice.

But, notwithstanding this apparent uniformity of disease in cities in general, and their lower orders in particular, yet the distinctive and peculiar features belonging to each must always demand our close observation; and comparative views, with our neighbours, / are perhaps the best means whereby we can appreciate them.

These features must, in the first instance, relate to the influence of climate and situation on the physical and moral constitution; and here I cannot help diverging a little from my immediate subject. Although in the formation of national character, even in the lower orders, this influence has been often denied, at least taken into very little account; and although government, laws, religion, and education, must be considered as constituting the great and immediate mould in which this character is cast, yet I cannot help thinking that climate has great influence, and that this island furnishes a strong proof of it. Irish character, like Irish climate, is full of peculiarities, and without being fanciful, I think we may trace a congeniality between them; like the climate, it abounds in vicissitudes, varieties, and extremes; between the bright and dark, little medium is observed. It is to the lower orders, of course, that this observation chiefly applies; with them civilization seems chiefly made up of two of the materials above mentioned, viz. education and amenability to the laws. Now these are the points in which our lower orders, as compared with those of our neighbours, seem particularly backward; two, therefore, out of the four moral causes being more or less withdrawn, the influence of natural causes, such as climate, must, with us, be infinitely greater. /

All this, however, though it may afford abundant and curious matter of speculation to the philosopher, does not enter into our present views, although it is by no means unconnected with them; nor can we deny that the operation of such circumstances as these, must, in a metropolis, be materially interfered with and lessened.

The general peculiarities of Dublin as to climate, have been often described. Although in their connection with and production of disease, they afford some remarkable features, as shall hereafter be mentioned, yet I believe we possess as many advantages in this way as our neighbours; and indeed, of the salubrity of Ireland in general, its old and best historians have given the most ample testimony.* In situation, soil and water, Dublin, also possesses considerable advantages, and in short it does not seem to present more facilities in the formation of disease than the great towns or cities in Great Britain.

All these natural advantages, however, though considerable, are marked with certain peculiarities as before mentioned, which from their influence require particular notice. But we must look to other / and more copious sources, in inquiring into the general state of health of the poor of Dublin; we must look to other causes to explain that vast and complicated mass of disease which they present, and which, perhaps, exists there more abundantly than in any city in Europe of equal size and population.

An inquiry of this kind must, under all circumstances be attended with the utmost difficulty and labour. The sources of disease, whether natural or acquired, seem so numerous, so mixed and confounded with each other, and so united in a circle, that it often becomes impossible to trace the separate relation of cause and effect; perhaps the only way to approximate to any thing like a general outline, is by classing them under certain genera and species; and even this we cannot attempt but in a most imperfect manner.

The practice of a general Dispensary is perhaps the most complete introduction to the diseases and indeed to the distresses, habits, and character of the lower orders of a city. Sorrows and sufferings are here unveiled, which shame will hide from the public eye; here we shall see how the chain of poverty has its various links, and the cup of bitterness its various dregs; here we become associated with disease in all its varied and complicated shapes, and here we are most promptly and powerfully called on to combat it with the rules of our art. /

Dispensary practice has its advantages and disadvantages pretty equally mixed; it creates promptitude; it affords a wide range of insight into local peculiarities; it opens an immense and diversified page, not only in the book of medicine, but of mankind; it breaks away the fancies of the closet, and the bondage of the schools, and gives confidence and courage at the bed-side of a patient. On the other hand it has its disadvantages; it creates a coarseness of practice; we know we are dealing with raw and uncertain materials, and we find the most common plans of treatment often answer the best; by these habits our think-

* Giraldus Cambrensis and Boate. The former says 'aeris tanta clementia est: ut nec nebula inficiens, nec spiritus, hic pestilens, nec aura corrumpens:— Medicorum operum parum indiget insula: morbidos enim homines praeter moribundos paucos invenias inter; sanitatem continuam mortemque supremam nihil fere medium.' Cap. 9.

ing and theorizing powers are weakened and hurt; we cannot gain very much as to the effects of our medicines, because we know these effects may be and are counteracted by improper diet and regimen. We cannot, as in Hospital practice, restrict our patients to certain rules and laws, nor confide them to nurses or even friends who can be relied upon. We reason, therefore, much less on the *modus operandi* of our medicines, and thus an unfair spirit of distrust and empiricism may be generated.

In a moral point of view there cannot be presented perhaps a more distressing picture than by such practice. When there is such a combination of sufferings we have the most difficult part to play, and our feelings are appealed to in every attitude. We find poverty and disease mutual cause and effect; we can only offer medicine, and what is this to relieve such wretchedness? These poor creatures, friendless / and forlorn, though they procure medicine, cannot perhaps procure food; though they get our advice, cannot perhaps follow it.

Although aware of all these sufferings and inconveniencies, yet from an anxious wish to become acquainted with the local peculiarities and diseases of the lower orders of this, my native city, from which I had, for many years been estranged, I sought for and obtained, on my arrival here in 1818, the practice of the Dublin General Dispensary – an institution to which if I could, in the slightest degree call the public attention, I should feel much gratified. The benefits that have resulted from it for nearly 40 years, the period of its establishment, are well known, and can scarcely be calculated. I believe there is not an institution in this charitable city that more merits a rescue from its declining condition; the objects to whom it extends its relief are of all others the most deserving of public pity – poor room-keepers; obscure, unknown and unobtrusive; with too much pride to stalk abroad in barefaced mendicancy, and too much poverty to conceal the amount of their wretchedness; its operation is not confined to parishes or districts, but takes in the whole city, and thus affords the widest and most extensive relief.

The opportunities resulting from the practice of this Dispensary have afforded me some particular views of the diseases (with their causes and character) / of this class of people; and I have thought the subject worthy of communication, more especially when viewed with reference to similar classes in the neighbouring countries, where, from a long residence I have been enabled to estimate, more clearly the peculiarities of our own. In a paper however of this kind we cannot enter upon minutiae. The subject is most extensive; it requires more time and space than we can at present allot to it, and more experience than has been as yet afforded me. Broad and distinctive features are all we shall aim at, and even this I shall attempt with diffidence.

The causes which tend to the formation of disease in our lower orders, or those which influence or are connected with it, may be, I think, divided into certain genera and species, as before observed, although indeed they often seem mixed

up with each other, and difficult to separate. Under the former we may mention *Climate – Poverty – Population* and *National Character*. – The species emanating from them to be noted under their several heads; by this arrangement, although imperfect, we may perhaps trace some of the chief features of disease. /

* * *

POVERTY.

We come now to a most extensive and important page in the book of disease. Under this head indeed might be classed the greater proportion of its contents – the varieties of form and degree under which it is exhibited, and its general severity of pressure may much assist in explaining that complicated mass of disease so manifest in the lower orders of our city.

To enter into the various causes of this vast and overgrown state of pauperism is not our business here. We have to look into its modes of operation and the effects it produces; among these *Diet* claims our first attention, and points out some of the most fertile sources of disease.

The quantity and quality of this are alike poor; the principal articles seem to be potatoes, salt fish, and tea. Potatoes are the grand nutrient principle and support of existence, and without this invaluable vegetable, hundreds must daily drop into the grave. Always a favourite, and always easily obtained, it forms the great barrier to the ravages of hunger, and indeed constitutes almost the only one. Next to the potatoe, salt food seems the favourite article, particularly salt fish. Flesh meat can seldom be procured, and of this the salt kind is preferred, and particularly bacon. Of fish, herrings are the favourite species. This attachment to salt food probably arises / from two causes: first, its greater cheapness, and secondly, its stimulating and sapid quality. It is impossible not to notice the preference which the lower orders here, compared with those of England, have to *stimulating* or flavourous, rather than *nourishing* food, and indeed their carelessness about the latter except potatoes. This may be partly explained from their national character, as will hereafter be mentioned. In the diet of the lower orders in England, nourishment is the grand object, and the rules of their diet are conducted with a system and an arrangement completely unknown here. With us what excites is the chief consideration, and as to regularity in meals the poor are very indifferent about it. With the former the *stomach* is the presiding organ; it seems to hold dominion over all the others, and to be a complete tyrant. With us the *nerves* appear to hold this place, and to these a great deal is sacrificed. It is impossible not to notice, with the lower orders in England, when ill, that their great and first complaint is ‘they can’t eat;’ here the general complaint

is, that 'they have a fluttering or oppression about the heart.* Although in the large towns and cities there, as in Scotland, this distinction may not be so strong, and although the proportion of stimulating to nutritious food and drink is much greater from various causes, yet the latter is always a paramount object of attention / with them; they conceive that eating alone produces strength and health, and they find the same degree of pleasure in it that the lower orders here do in drinking. With us nutrition is slighted, except in potatoes. Bread, cheese and oatmeal give way to this vegetable, in like manner as porter and ale give way to whiskey. With the lower orders in France, bread constitutes the grand nutrient principle, and of this immense quantities are consumed. With those in Scotland, oatmeal and potatoes are the chief articles of food, and in both countries great regard is always paid to nourishment. Notwithstanding, however, this carelessness among our lower orders, they are capable of labours and fatigues equal, if not superior to the others, and nature appears to have eminently gifted them with the hardest and most vigorous constitutions. We know that in London the hardest species of labour are often confined to the lower orders of the Irish, and in our own streets we every day see surprising loads and burdens carried by women.

Under the head of diet, *Tea* seems to hold the highest rank with our poor; unlike its more dangerous rival, whiskey, its draughts, though impoverishing, are not delirious; if it drowns sorrow, it does not drown sense; if it gilds the gloom of poverty, is not the delusion a blessing? It seems, indeed, the general panacea, always affording comfort, calmness and consolation; constituting not only the leading article of breakfast and supper, but often of / dinner, and over its placid inspirations their happiest hours seem to be passed.

Although the effects of *Whiskey* might rather be considered under the head of climate and national character, yet they are so closely connected with the present part of our subject, that we must touch upon them now. The great estimation in which spirituous and fermented liquors are held by all northern nations, is a sure proof of their necessity and value. Among these a perpetual struggle between the laws of life *within*, and the laws of nature *without* exists; and whatever will gain a preponderance to the former, will, of course, be eagerly sought after. The farther we approach to the north, the greater devotedness we find to these liquors. Here life and nature are at a very low ebb; artificial excitement becomes indispensable, and the means of obtaining this will be among the chief objects of the people. The Tartar has his Koumiss, the Russian his Schnapps, the Canadian his Brandy, and we have our Whiskey – all are eagerly sought after – all are valuable. That the *use* of this fluid with us is attended with great advantages is unquestionable, but that its *abuse* has completely thrown these advantages into discredit, is equally

* In illustration of this we may remark, that wine, with the lower orders here, seems the sovereign cordial in most of their diseases – they conceive it almost a charm.

so. Indeed in the entire mass of misery of our poor, whiskey is thought to form the principal remedy; they conceive it a cure for all complaints, and all weathers; in warm weather it allays their thirst; when cold, it heats them; when wet, it dries them; in sorrow they fly to it as a charm and a blessing, and in its intoxicating draughts their misery / is forgotten. The bad effects, however, resulting from this fluid with us are not, I think, to be ascribed to the quantity consumed. I believe the lower orders in Manchester, Edinburgh, Glasgow, and some of the large manufacturing towns in Great Britain, consume a greater quantity; but there is a striking difference in the mode of consumption between the two – they do not take it on empty stomachs like our people; they eat much more solid nourishing food; thus the effects of the whiskey are less directed to the coats and nerves of the stomach, or to the brain, and therefore intoxication does not exhibit itself so frequently. However, the great proportion of public houses in Dublin compared with others, is a clear proof of the immense consumption of whiskey, and until such is reduced, disease and distress must stalk abroad through our streets.

The effects of poverty, beside those under the head of Diet, and above mentioned, are so numerous, and so mixed up, that it is almost impossible to distinguish and separate them from each other; in their dwellings, furniture, garments, and every thing about them, these effects are obvious. In like manner, the effects of disease resulting therefrom appear equally abundant and complicated, but certainly *Diet* presents the chief genus. With regard to *quantity*, the whole order of cachexiæ¹ seems chiefly concerned; of this I have observed dropsical affections to constitute a most predominant class, particularly with females, and ascites / seems to prevail most; the cases I have met with of it exceed in number those almost of any disease under this head. The general indulgence in weak, watery, enervating liquids; the habits of indolence of our lower orders; their love of salt food and whiskey; and their carelessness and want of nourishing solids easily explain the tendency to this disease, as also to the frequency of visceral obstructions, wasting, emaciations, depraved habits, and that long and melancholy list of nervous derangements connected with worn out constitutions.

Under the head of *quality*, the diet of these poor people appears no less to predispose to disease. Potatoes are the only healthy and nutritious article employed; fresh meat, garden vegetables, milk, oatmeal, or the combinations of these, may be termed luxuries with them. The articles of diet connected with their diseases may be divided under three heads: *salt food* in general, *tea* and *whiskey*; although the last cannot be called an article of diet, yet it enters so abundantly into the others, that we cannot well separate its effects.

Their attachment to *salt* and *salt food* is constant; their dinner is often salt and potatoes, more frequently perhaps salt fish, (particularly herrings), and

their drink water. The effects and consequences of all this must be obvious;* the blood, deprived / of its red globules and fibrin, and superabounding in serous particles, becomes dissolved and unfit for the purposes of nutrition, and its vessels, weakened and collapsed for want of their healthy distension, become unfit for their offices. The salivary glands, and the mucous membrane of the entire alimentary canal, are perpetually stimulated to pour out their fluids; thus proper moisture and lubrication are prevented, the general mass of fluid is diminished and vitiated, and the whole system becomes dried up, and emaciated. The intestinal canal in particular suffers general torpor, and inability to propel its contents; indeed I have found no symptom so immediately obvious as constipation, and no remedy so directly useful as purgatives; in cases the most apparently unconnected and remote, I have invariably witnessed their invaluable effects, and I believe Dr. Hamilton² has not in the least exaggerated their powers. The various and manifold injuries resulting from a depraved state of the intestinal canal, I have clearly found to correspond with what this writer affirms. Connected with derangements of the alimentary canal, a constant appetite for fluids must be expected, and this, together with some of the causes already mentioned, will easily explain the hydropic tendency so prevalent, / and the debility resulting therefrom. Next to this the skin is the principal sufferer from the effects of salt food. The cases of obstruction of this organ have been very numerous, as might naturally be expected, although in general they seem rarer than in Scotland. Cutaneous affections I have found the most abundant; indeed a stranger, on his arrival in Dublin, must notice their prevalence with the lower orders in general. Cases of the most severe kind sometimes occur, and must be expected; the diet of the poor is in every way suited to the production of such complaints.

Under the head of *tea*, the effects principally relate to the nervous system, and when added to those already mentioned, produce a most copious class: low nervous fevers, great debility, tremors, palpitations, vertigo, dyspepsia, hypochondriasis, asthma. These are the principal affections I have met with, and females have been chiefly concerned.† That the adulterations of tea have materially added to this melancholy catalogue I have no doubt whatever.

Under the head of *whiskey*, along with several of the affections above mentioned, the liver and stomach would seem to be the chief sufferers; derangements of the former organ appear to be much more frequent with us than our neighbours, and I / think to whiskey it must be chiefly attributed. The dissections at the various hospitals here exhibit, I believe, greater derangement of this organ than almost any other. I have seen it assume various forms of disordered structure,

* The digestive organs become impaired in their tone; the stomach and liver suffer both in fabric and function; their proper secretion is diminished and vitiated; the lacteals carry an unhealthy chyle, &c.

† Cases of fluor albus also have been remarkably abundant, and perhaps we may also rank this under the effects of tea.