

A Look at
HEALTH AND SICKNESS IN UPPER SWALEDALE AND ARKENGARTHDALE.



Background.

One can only speculate about any pre-historic settlement in the two dales. Although there is evidence of the presence of Mesolithic hunters, with finds of flint arrow heads, scrapers and other flint tools, which still to-day can be found on the hills and moors, it is not till the Bronze Age that we find remains of settlements and enclosures indicating permanent habitation. Nor is it possible to draw any conclusions about the state of health of these early inhabitants. From Denmark there appears to be evidence that the plague existed, although it had not mutated into Bubonic Plague which was so devastating in the Middle Ages.

With the Roman occupation of northern England we begin to get written evidence of how people lived. However there is still nothing to prove that the Romans ever settled in these two dales. It is assumed that they may well have regularly used them as a link between the road now known as the A66, and their forts and settlements in Wensleydale, and connections with Catterick and other well known sites. Work in this area is on-going, and the fact that both in Richmond and in Fremington small hoards of coins and metal work have been found, leads one to believe that the Romans at least visited the area. There is also plenty of evidence that the Romans mined lead in the Pennines, and the report of a pig of lead with Latin inscriptions found in Hurst, though now lost, indicates that there may have been lead mining activities here in that period.

Towards the end of the Roman era the Anglo Saxons settled in the lower reaches of the Swale valley. They did not penetrate far into the Dales and there is a marked difference in place names between those developed by the Anglo Saxons and those areas in the upper dales which still carry names from the Norse settlers who were hill farming, arriving from the West. Danish invaders

encroached from the Eastern Yorkshire coast. They occupied York but hardly ventured into the Dales.

What knowledge the Romans had relating to hygiene and sanitation seems to have disappeared as their empire diminished. Bathhouses, central heating, latrines, drainage, and piped water might never have existed here. It is believed that the Romans knew a good deal about the human skeleton, but did not allow dissection of bodies. They took on some of the medical beliefs of the Greeks, such as illness coming from the imbalance of the 'Humours' and other superstitious causes, but in general the the Romans appear not to have advance in medical matters from what had come from Greece.

Centuries later, when the Normans arrived in 1066 turbulent times must have already greatly effected our Dales population. Raids from Scotland, epidemics of infectious diseases, great poverty brought the population to a sorry state. However the independent people of Yorkshire strongly resisted the arrival in the north of the Normans. By 1068 the Normans had ruthlessly squashed the Yorkshire population, put York to a state of siege, and finally laid the area waste, villages deserted , crops destroyed, and people evicted or slaughtered. After fifteen years Yorkshire remained devastated, abandoned to bandits and wild animals. William confiscated the lands owned by the old Anglo-Scandinavian aristocracy and replaced them with Norman French tenants. Defensive castles were built, including Richmond over-looking the Swale. However by the 13th century houses were built within the castle walls and by 1341 the castle is said it had become worthless, and by the 15th Century it was in a state of ruin.

Meanwhile the town of Richmond slowly became established as a market town . In the 14th Century there were said to be about 600 inhabitants in addition to those within the castle. The Dales gradually recovered from very hard times and brought their wool to market in exchange for corn. Although still spasmodically the Dales farms used some arable land, crops often failed ,and there was always insufficient corn for the needs of the population. John Leland said that as early as in 1530s "little corne groweth in Swaledale".

From the 13th /14th Centuries not only was the dales population diminished by disease, but they were subjected to continual raids from the Scots who stole their live stock and destroyed their villages.

PLAGUE AND FAMINE

As far as sickness in the upper dales is concerned, it is certainly the plague in England of 1349/50 which is best documented . It followed years of famine throughout Europe and Britain. The great plague of 1348-49 was said to be caused by a 'conjunction' of three bright planets in line with Aquarius. 'Saturn and Jupiter bringing death to people and depopulation of kingdoms.' Mars and Jupiter were thought to cause 'great pestilence in the air'.

(Rawcliffe "Medicine and Society)

To quote Amy Davidson in an article in the New Yorker 2016, entitled 'The next great famine':

In the 14th Century "It had rained every day for weeks during three years. Wheat, barley and oats rotted before they could ripen and be harvested, and it was too wet to make hay. Prices soared . Bitter winters followed and the lack of sunshine halted production of sea salt by evaporation in the Balkans, salt which was essential in preserving food for the winter months. Sheep and cows became diseased from the incessant wet"

This continued for three years and the suffering was followed by the Bubonic plague which swept over Europe and Britain. It is said that half the population died. There is evidence that in the two

Dales a third of the inhabitants died, and in Richmond , where housing was more crowded , there was even greater loss.

By the Middle Ages it was said that the prime reason to avoid Britain “ is not violence, bad Humours, the approach to religion and heresy, or the extreme sexism, it is the sickness” (14th century ‘Life is Unhealthy’)

Mining which had already begun several hundred years earlier, hardly existed during this dark time and there is only mention of an up-turn in 1527-29.

MIDDLE AGES

Diseases , some unidentified today, spread throughout the Middle ages: Scofula, a type of TB of the Lymph nodes , known as ‘the King’s evil ‘. ‘Water Elf’ disease, causing sores, blackened nails and watery eyes, was thought to be caused by witches. It may have been a problem with the heart’s valves.

The French Disease spread in 1493 from Naples, it caused boils all over the body and many went insane. Almost certainly the appearance of syphilis.



Dancing Plague in 14th to 17th centuries, mainly in Europe. the cause of which is unknown, however it began in Strasbourg where a Frau Toffea started dancing in the streets, in four days it is said that thirty people had joined her and in a week four hundred were hysterically dancing . Many died of heart attacks, strokes, dehydration and exhaustion. I feel sure the level-headed Dalesmen would not have been involved!

It has recently been claimed that as early as the 15th century 'Sleeping sickness', Encephalitis Lethargica appeared, and may have returned in periods often centuries apart. it is believed that it was suffered by King Henry VI of England. This rare disease appeared in Europe and America as a major epidemic in the 1920s.

It is certainly the plague in England of 1349/50 which is best documented, following, as it did, years of famine throughout Europe and Britain.

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The chronicler in Cumberlan's Lanercost Priory wrote in 1316 "how in that year there was such mortality of men in England and Scotland through famine and pestilence as had not been heard of in our time" †

Epidemics of Plague continued around the country. C.Creighton wrote in 1894, " the last plague outbreak appears to have been in Scotland in 1648 , and in North west England in 1650, and other regions in 1666 , plague has been the grand infective disease for more than three centuries..... in about 1666 the absolute last of it's province prevalence having been at Peterborough in 1667, while two or three deaths continued to occur annually in London till 1679"

In 1959 A.H. Gale wrote in 'Epidemic Diseases' that the the Great plague in1663 "marks the end of 300 years when Plague dominated the scene so much that other epidemics are hardly reported" , there was also the possibility of mis-diagnosis.

C.Creighton believed that the use of coffins was greatly responsible for the decline in some diseases. In 1924 Lisbon W. Glen suggested it was simply the rise in civilisation which achieved the decline in epidemics. However many poorer regions hardly improved their living standards over many centuries, and later epidemics of typhus and syphilis increased in the 18th century, rather than fell.

There were continual epidemics of all kinds during the medieval times, leprosy, smallpox, and countless other diseases, some no longer identifiable, such as 'Scald head', 'Rising lights', and the 'English sweat', in 1485, these illnesses came and went. The latter caused violent sweating, head pains and stomach ache and the patient died within twenty four hours . English Sweat or Sweating sickness is described by John Cairns in 1552, relating to an epidemic the year before. It never reappeared after 1551 and has never been identified. It may have been a type of influenza.

There were five outbreaks of this disease in 1485, 1508, 1528 one 1551 and then it seemed to totally disappear. T.Willis writing in 1659 when describing 'flu', said " Suddenly a Distemper arose...which laid hold on very many together. In some forms in a week a thousand people fell sick together....., a troublesome cough, with great spitting, also catarrh falling down on the pallet, throat and nostrils....feverish, distempers, heat and thirst. Spontaneous weariness and grievous pain of back and limbs. Coughing almost continual. Not a few died suddenly. Nearly a third part of mankind, almost, should be disturbed with this in the space of a month."

According to T.Thomson in 1820, the epidemics of 1510 spread over Europe. It sounds like the 'Flu we know today. Epidemics continued for several hundred years . The great pandemic in 1918-19 is still remembered, and fear of a similar occurrence still exists to-day. Whether English sweat was some kind of flu or not, is still uncertain.

What , for instance, was 'River disease'? It was said to be caused by 'crowing inspiration' of infants, and was treated by P.Hood, a surgeon in 1857. It may have been Scarletina which killed hundreds of children in Britain and America at that time. The cure was to make the child vomit and to purge them, they gave them quinine. Dr Hood covered their stomachs with oiled silk cloth, which he preferred to red flannel, applied so tightly "that it hurried the the child into the next world."

Within memory there are those who believe that two farmers in Muker died from Anthrax after skinning a cow. In fact Anthrax must have been a scourge right into the late 19th Century when it seems the government started a scheme to eradicate it.

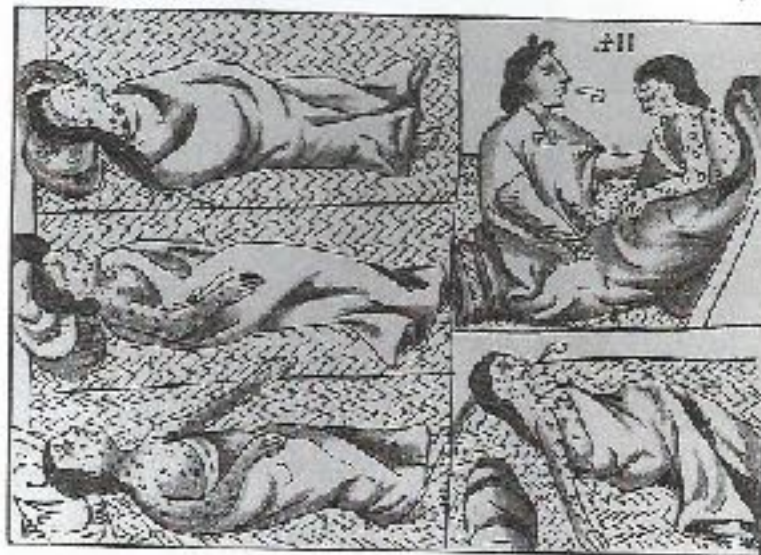
Where the more affluent will have relied on the life threatening treatment of blood-sucking leeches, cupping, forced vomiting and purges and even the use of mercury, the poorer communities will have used dubious brews of herbs and other unthinkable ingredients, administered as medicines or ointments.

There were plenty of published 'cures' to be had , such as those published by the Countess of Kent entitled ' A Choice Manual or rare select secrets in Physick and Chirurgery'. Most of her cures would not have been used in the Dales as they contained exotic and expensive ingredients well beyond affordable locally. All the same they indicate the scale of ignorance , and how much was still to be learnt about the spread and causes of disease

For the plague

Bathing with rose water and vinegar was beneficial.

Lancing the painful swellings under the arms and in the groin and dressing them with a mixture of tree resin, roots of white lilies and human excrement. Veins might be cut to bleed and dressed with ointments made from clay and violets.



Roasted egg shells, chopped up with leaves and petals of marigolds and put in a pot of ale and added treacle. Should be drunk twice each day.

Whatever the cure for plague, the patient usually died within three days.

The Countess of Kent's recipes for other illnesses are interesting.

For a Pin in the eye:

"Take two or three lice out of your head and put them alive into the eye that is grieved and foreclose it up, and most assuredly the lice will suck out the web in the eye and cure it, and come forth without hurt"

For a Cough:"Take Sallade oil, Aqua vita, and sack, and of each equal quantity, beat all together, and before fire rub the soles of you feet with it"

"An excellent Receipt for an Itch, or any foul Scabs. Take fox gloves and boil a handful of them in posset drink, and drink of it a draught at night and in the morning, then boil a good quantity of foxgloves in fair running water, and anoint the places that are sore".

"The Watens. This water dissolved swelling of the lungs, and being Paisted doth comfort them, and suffereth not the blood to putrifie , he shall not need to be let blood that uses water, suffering not the heart burning nor meloncholy or plegm to have dominos, it expelleth urine, and profiteth the stomach, it presenteth a good colour, the visage, memory and youth, it destryeth the palsie Take three spoonfuls of it once or twice a week, or oftener, morning and evening first and last"

A remedy for the stone:

"Take fresh shells of snails, the newest will look reddish colour, and are best. Take out the snails and dry the shells with moderate heat in the oven. Likewise take Bees and dry them so and beat them severely into a powder. Then take twice as much of bees powder as snails and mix them well. together. Keep it in a closed glass and when you use it take as much of this powder as will cover a sixpence and put it into a quarter of a pint of distilled water of beans flowers. Drink it fasting, or on an empty stomach, and eat nor drink nothing for two or three hours after. this is good to cause the party to make urine and bring away the gravel or stone that caught the stopping, and hath done very much good"

In the 18th Century Anthony Clarkson in Swaledale offers two remedies (quoted in Edmund Cooper's book 'Men of Swaledale').

For the Gout: "eat two herrings (from where one wonders!) at bedtime. Taste no other food that night. This will effectively remove the gout, if not entirely cure it. If thirst ensues, chew hay or straw which will give good relief."

For Chin-Cough (Whooping cough):

"Take a live trout and put it's head into the child's mouth, hold it there till the child has breathed about eight or nine times. the trout will imbibe such noxious air as will cause it to swell and die. Be sure to hold the trout fast in your hand with a dry cloth during this time as a sudden spring into the child's mouth might be attended with fatal consequences".

As late as 1857 a 'surgeon, Dr P.Hood, described what he claimed was a cure of scarlet fever. Almost unknown now, it was a scourge which killed hundreds of children. His cure was to purge children and make them vomit, and give them quinine.

John Wesley's cures seem more enlightened. He produced a pamphlet entitled 'Primitive physick' He said "it is my design to set down cheap, sage and easy medicines , easily to be known, easy to be procured , easy to be applied by unlettered men....In the uncommon or complicated diseases or where life is more immediately in danger , apply to a physician that fears God"

Wesley suggests , for Ague (flu) "Eat a lemon, rind and all."

Asthma: "A spoonful of nettle juice, mixed with clarified honey."

Boils: "Apply salt bacon."

Burns and scalds: "Immediately plunge the part into cold water and keep it there for one hour"

Sore legs: "Wash them in brandy and apply elder leaves, changing them twice daily "

In the Dales the berries of Juniper bushes on Fremington Edge were commonly used, they were burnt and the smoke was said to purify the houses where there had been sickness.

In 1860 William Ward from Fremington, advised his father to keep a magnet in his pocket to ease rheumatism.

HEALTH AND SICKNESS

IN UPPER SWALEDALE AND ARKENGARTHDALE>

Gathering information about health in the Upper Dales is not simple. There is a great deal of published material about health and sickness generally in England and in the Middle Ages, especially related to the famous Plague epidemic of 1348/50s, and of the famines of the 14th Century. However it is difficult to put these accounts into the context of these rural dales with semi-industrial developments of the local lead mines .The impact of the lead mines on the sparse population was immense. It brought many diseases and early death, particularly affecting the lungs.

The population was largely illiterate and poor, consequently little is recorded and we are left to surmise what impact disease and epidemics had on these communities until the 18th and 19th Century , when schools were being opened and an eagerness to communicate with the outside world , was developing. But it is not until the 19th Century, when the amendments to the Poor Law were made in 1834 that we have real written details about the state of health in the two dales. The formation of the local Poor Law Unions, who had to appoint doctors and inspectors, all of whom had to report to London, gives us individual accounts on matters of health and disease.

According to Fieldhouse and Jennings, in their excellent history of Richmond and Swaledale, "In the 15th and 16th centuries the dales people were virtually propertiless, they eked out a poor existence on the bottom rung of the social ladder"

One can safely assume that for centuries access to 'professional' medical help was too expensive for the rural population, and that they were spared the uncertainties of Barber/ Surgeons with their life threatening 'cures' of blood-letting and purging. The Dales had to depend on age old cures provided by local healers, and wise women, or later on, by purchasing medicines from local shops , such as J.Hilary in Langthwaite, Medical Vendor, or William Peacock, spirit merchant and patent medicine vendor in Healaugh. . They may have used the services of local apothecaries who sometimes visited the sick as well as dispensing medication and were known even to attend child births. although it is uncertain if these men existed in the area. Never-the-less, apothecaries were looked upon as technicians by the Barbour/Surgeons. who had received their first charter as early as 1461, this had followed on an Act banning 'Quacks' in 1421, an Act which doesn't seem to have been efficiently enforced.



Diseases which swept through the country were not only the Bubonic Plague, which continued on and off regularly for many years, but also epidemics of Flu, 'Sweating sickness' 'erysipelas', smallpox, TB, 'dancing mania', anthrax, Typhus and the diseases which later were thought of as 'childhood' diseases, such as Measles, Whooping cough and Mumps . Whether the Dales had 'Pest Houses' is uncertain, although common outside villages elsewhere where sick people could be isolated from their communities in remote buildings till cured, or dead.

CHILDBIRTH

Over many centuries the risk of dying in childbirth was very high, both for the mother and infant, a situation which did not improve until the causes of infection were understood.

In Medieval times local midwives were permitted to baptise newborn babies, and for women to confess their sins before giving birth. More than one in three mothers died during or soon after giving birth. One in four babies did not survive their first year of life. Many mothers were only teenagers as young as twelve to fourteen years old. The records of Births, Marriages and Deaths in the Dales reveal great numbers of infant and child deaths, many at the time of birth. Twins rarely seemed to survive. Once medically trained Doctors appeared, it seems they attended confinements and regularly used forceps during deliveries, something the local midwives would not have done. It seems a crude anaesthetic existed as early as 1370. It was a mixture of Henbane, Mandiagora, Hemlock and Opium, and was given to a patient "when he/she shall not feel whatsoever is done". There is no evidence that the local peasantry had access to this so called medical provision.

The mortality rate of women as well as babies must have made the event frightening. Rich and poor were all at risk, and even after 12 or 14 confinements a mother could catch an infection and die.

Fieldhouse and Jennings writing about the Dales, say that from 1556 to 1632, of 5031 babies who were baptised (and another 276 who were buried but not baptised) died before the age of one, and 1,304 died before the age of five. Fathers died before their youngest child reached two years old, and of 638 married women buried between 1556 and 1632 less than a quarter were widows, the others died before their husbands, probably in childbirth as well as the plague. It was very rare



to become a grandparent. The community bore the responsibility of so many orphans that a system of apprenticeships developed where children were often exploited, they became the responsibility of their masters, often in the mill towns, away from the Dales.

During the Middle Ages childbirth was not considered a medical matter,, and neither doctors or fathers were involved. Instead it was left to local midwives whose knowledge and expertise was based on experience. Superstition surrounded the event, and the fact that more women died before their husbands would appear to be the high mortality rate during childbirth. Many women produced 12 or 14 babies during their lives , but death could occur at any of these confinements. Most married women spent a life time of pregnancy and breast feeding.

Midwives would rub the infant with salt at birth, and rub it's gums with honey, to stimulate it's appetite. It was wrapped in swaddling, which would be regularly changed. There is no reason to believe that these practices were not part of life in the Dales. Rich or poor were all in danger of infections and ignorance, and they relied on all manner of superstitious remedies to relieve pain and ease the birth.

In the 14th Century Rivaulx Abbey guarded a girdle of St Ailred which was tied round wealthy women during childbirth . Locally in Muker we know that Rose Raw and Ruth Waggett were paid 2s and 2s6d respectively per birth in 1789-90. As recently as 1951, the obituary of Mary Ann Hird of CB Yard, Arkengarthdale, reports that she, having had eleven children herself, acted as the local midwife and nurse in the community. She was a farmer's wife with no medical training. (from Cathy Lawday's book on the Hird family)

Over the centuries published cures for difficult confinements were available advocating anything from prayers to St Margaret to "rubbing the flanks with rose oil" or giving the mother "vinegar and sugar to drink" or applying poultices or magnets to her body, and if rich, wearing a coral neckless. Holding sard next to the birth exit was helpful as was reciting the following, (although how often used?) one could recite : "Open your roads and door , in that epiphany by which Christ appeared both human and God and opened the gates of Hell. Just so child, may you also come out of this door without dying, and without the death of your mother". How often this recitation was used seems doubtful, especially in these remote districts.

Dr William Buchan (1839, not a local medical man) was a great advocate for breast feeding as a means of protecting an infant from illness. He said that "a mother who abandons the fruit of her womb as soon as it is born to the sole care of a hireling, hardly deserves that name". He was almost certainly speaking of a class of women unknown in the Dales.

As already suggested, the inhabitants of Swaledale and Arkengarthdale can have had few resources when illness and epidemics struck. The ancient traditions, going back to the Greeks, where illness was blamed on the imbalance of the four Humours were still thought to be the cause of illness, and may well have lingered on in the minds of local curers, and there is evidence that these beliefs continued in the medical profession into late in the 19th century. But it seems unlikely that practicing medical men would have been afforded in the rural Dales, or commonly existed in the vicinity.

According to Paracelsus (1493-1541) The Swiss Philosopher, Physician, Astrologer, and founder of Toxicology, the best doctors were those who didn't poison their patients with such things as mercury, nor purged and bled them to possible death. The attempt to balance the Humours by blood letting, purging and vomiting was probably a luxury not available locally in the Dales. Instead they would have been reliant on superstitious cures of all kinds, delivered by self appointed 'curers'. They would have mixed their cures with all manner of dubious substances, and attributed the causes to the alignment of the planets, witchcraft, comets, evil spirits and sin, as well as the disorder of the Humours, and displeasure of God.

Nicholas Culperer, master herbalist in 1649, simplified the use of herbs in his practice in Spitalfields. He was very popular. He connected illness with the planets and also plants with the planets.

The Church may have been to some degree responsible for the lack of advance in medical matters, as illness was believed to be the result of God's punishment for the sins of His people. It was only through prayer that sins could be forgiven and a cure made possible.

Until the closure of the monasteries by Henry V111, they had been a source of help for those who fell ill. The two small Monasteries in the Upper Dales, Ellerton and Marrick, were so small that it seems unlikely that they could have provided much help, but the larger religious houses, nunneries, priories and monasteries further away , often were the sole providers of care for the sick, some even offering wards and nursing. Once closed the population had only itself to rely on for care.

In the 18th and 19th centuries we still find strange cures used even by those who had some medical training.

Dr Barker, of Healaugh, 1744-1772 left a tiny leather-bound book, which gives a cure for rabies. It was basically boiled dogwood bark mixed with water and ale, taken each morning . With what result we do not know.

The Northern Echo in May 1876 reports that in the neighbourhood of Thwaite a pack of thirty three dogs were running wild. Fourteen were destroyed leaving the rest at large. In 1871 the Dogs Act enabled magistrates to penalise people who let their dogs roam freely. Local newspapers from Leeds, Liverpool and Darlington reported deaths from rabies among sheep, a calf, a pig and a goose.

In 1769 William Buchan wrote a small book entitled 'Domestic Medicine or Treatise on prevention and cure of Disease', Although not specifically connected to the dales, he worked in Yorkshire ,and became widely known throughout the country. His cures and influence may well have lingered on .

He was a great believer in the ventilation of homes and elimination of bad air. He said "Air which stagnates in mines, wells, and cellars etc. are extremely noxious. That kind of air is to be avoided as a most deadly poison. It often kills as quickly as lightening".

Buchan stated that Plague-like diseases were caused by “foul air, putrified animals and vegetables, effluents etc. often prevalent in jails, hospitals and infirmaries, especially where cleanliness is neglected and the Humours are in a putrid state”.

He may have been fairly unique in his emphasising the need for cleanliness, fresh air and exercise (although he believed that both sometimes had their dangers.) As with Dr Buchan, Edwin Chadwick was in 1840 pressing for better cleanliness and sanitation as a preventative measure for the spread of disease. All the same there was still great ignorance about the real causes of illness, and the medical profession continued to use bleeding, and a belief in readjusting the balance of the four Humours, (Yellow bile, Phlegm, Black bile, and Blood), as well as other bizarre treatments.

In 1839 Dr Buchan offered a cure for Whooping Cough or Chin Cough, a disease which was often fatal in children. “Hyssop or ‘penny Royal’ (mint tea), sweetened with honey, small wine-whey or a little negus (sweetened wine and water), and moving a patient to a different location to the one where he fell ill, is recommended. They ought to be bled to prevent suffocation and vomiting should be encouraged”

“Millipedes, or woodlice are greatly encouraged for the cure of Chin Cough. Infuse 2oz of these, bruised in an English pint of small white wine for one night. Strain through a cloth and give tablespoonful to the patient two or three times a day”

“Garlic is a well known remedy in Northern Britain. Beat a quantity of garlic with hogs lard. With this the soles of the feet may be rubbed two or three times daily. It is good for other coughs too, but should not be used if the patient is hot or feverish as it may increase his symptoms. “

For Croup Dr Buchan says bleeding is important and one should put the feet in hot water, and breathe the steam. “Perspiration is the greatest importance to health If obstructed the whole frame is generally disorders. Wet clothes are the greatest danger, as is night air”

It is strange to think that these primitive cures were still used as late as the mid 19th Century, in fact not long before my grandfather was born,. I imagine that Dr McCollah occasionally was using similar methods in the Dales.

Certainly these simple cures lingered on among those in particular who could not afford medical practitioners, however poorly informed. It was not until well into the 19th century that the causes of some diseases became known, and a few illnesses began to disappear. New epidemics of infections appeared as a result of contacts with other continents. Armies and travellers returned from abroad bringing in new illnesses with them. Waves of Cholera from China, and Syphilis became common, and diseases associated with dirt, lack of sanitation and lack of clean water became common in the ever crowding cities, well into Victorian times.

Buchan states that “every person knows when a fever is attended by violent pain of the side, and a quiet, hard pulse, that bleeding is necessary. “When these symptoms come on the sooner this operation is performed, the better and the quantity at first should be large.....a large quantity of blood let is much better than the effect of several repeated small bleedings, if the bleed shows a strong buffy coat, a third or even fourth bleeding may be required”. He also suggests “blistering, and fomentation made from boiling elder flower, camomile and common mallow or other soft vegetable.”

Small pox was so general, according to Buchan, that few escaped it. “Children who have over heated themselves by running are most liable to this disease. And those whose food is unwholesome.... and who abound with gross Humours, run the greater hazard from it. Laying several children who have the small pox in the same bed has many ill consequences. They ought never, if possible, be in the same chamber, as the perspiration, the heat and the smell etc. all tend to augment the fever and heighten the disease. An infant should be given syrup of poppy (opium?) every 5 or 6 hours. An adult requires a tablespoonful.



VAGRANTS.

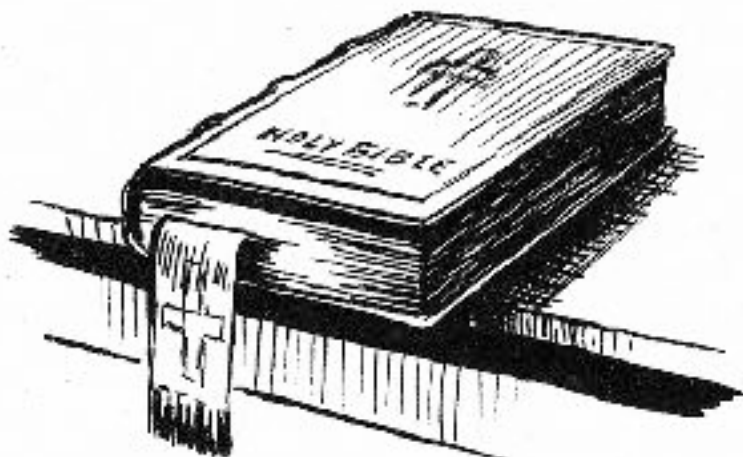
Typically, scapegoats had to be found for the spread of illness and disease, and perhaps this was right. The movement of people, vagabonds, searching employment away from their own towns and villages was thought to be the reason for the frequent waves of epidemics in the Dales. For many years the lead mines must have brought many hopeful unemployed to these valleys. The famous epidemiologist and GP, Will Pickles, from Aysgarth came to the same conclusion as late as the 1920s. He thought it likely that visitors arriving to the remote Dales and school outings to cities in the north, were introducing sickness to which the population had not previously been exposed, and who had not built up any immunity.

For many years outsiders had to be fully self supporting to gain permanent residency in the district without the help from the Poor Rates. If they were considered scroungers and vagabonds too lazy to work, they would be packed off back to their place of birth. In 1530 if they were stubborn they could be whipped and even branded, or sent to a house of Correction in Richmond. By 1547 a law was passed which allowed vagabonds to be treated as slaves for two years. If they tried to run away they could be branded and made a slave for life. In 1697 paupers had to wear a red 'P' on their clothes. Whether this occurred in this district is uncertain.

Although information about epidemics is mainly from the towns and cities, the movement of people looking for work may well have brought sickness to the dales, especially from towns within Yorkshire. Records tell us that in the 1720s there were major outbreaks in York and Ripon of measles, and smallpox, which followed on whooping cough, scarlatina and diphtheria.

In 1800 Typhus became general, and was reported in 1818 as common in the north.
In 1831 we have the first record of cholera.

In 1889 there appears to have been a flu pandemic, thought to be the same mutation as the outbreak in 1918, when fifty million people worldwide are said to have died. Did these reach the Dales?



CHURCH REGISTERS

Although the recording of Births, Marriages and Deaths was not compulsory until 1837, some records were kept by the parish churches from the 16th century.

Disappointingly those from Muker and Grinton Churches rarely mention the cause of death from illness, and some of the records are very subjective, depending on who the recorder was. For example, between 1787 and 1793 the word 'pauper' was added after the name of each death where relevant, so we know that out of 300 burials in Muker during that period 128 were paupers. There is no other mention of status or employment of all the other deaths. When a new recorder followed on, he made no reference to paupers. I think we can safely assume that there were still plenty of impoverished people dying and that Muker parish had not suddenly had a surge of wealth.

Another recorder seems very interested in mentioning, after every woman's death, whether she was a widow. In 1778 and 1840 the age of each victim is mentioned as well as their occupation. In 1785 there seem to have been an unusual number of deaths in the little Poor Houses scattered throughout the Dales. Were there particular epidemics causing this? Or was it that there were a large number of impoverished old people there? Low Row Poor House lost eight paupers in 1788 and two more the following year. Normally only one death per year was recorded in the Poor Houses.

The Burial records of dissident groups, such as the Quakers and later the Methodists and Wesleyans, remained with their own churches and chapels, but those that I have seen give no fuller picture of the causes of death through illness. Roman Catholics had to record funerals with the established church. One vicar, Reverend Thomas Witicker, was so dismissive of the lead miners that he called them "the scum of the church yard".

If illnesses were not mentioned as the cause of death there does seem to be a constant interest in those who died in accidents. Throughout the Grinton records cases of drowning are mentioned, with details as to where the incident occurred. Many such cases must have been the result of individuals taking the risk of crossing the Swale when it was in spate, rather than riding or walking the large distances between bridges.

In 1649 George Baker was drowned at Satron Mill.

1651 "Edward Clarkson drowned near Marrick Abbey." Was he trying to cross on the stepping stones?

1658 "Henry Cowper of Heallay drowned"

1708 to 1711 "An Garth of Smarter", "Richardson of Healay", and "George Butterfield of Low Row" all drowned in the Swale."

1716 The Swale took Thomas Suthers of Arkendale.

1757 William, son of Richard Waller was "drown by a fall of Reeth and found near Richmond"

The same year Bartholmew, son of Routh Ellerton of Fremington Mill was "drowned in Ye Mill dam and carried into the Swale"



1663 Mary Lodge of Fremington found drowned near Isles.

1806 Margaret Close of Reeth "drowned in pool of water"

1834 John Harker drowned in Swale while bathing.

A particularly dramatic drowning took place in 1835 , when, at Isles or Rowleth Bottom, Nancy Will and two horses and carts, belonging to William Harker, were carried away by the river and drowned.

Almost as interesting to the register recorders were the accidents in the lead mines, although there do seem to have been occasions when these were hushed up.

1755 “Monk Kendal of Grinton killed in Ye Mines”

1760 “William son of William Hawkin of Grinton killed by misfortune at Grinton How”.

1762 Thomas Metcalfe of Fremington killed at Groove Beck, and “Simon, son of Simon Alderson of Feetham killed in Cob Scarr”

1767, and 1769 Anthony Craddock of Harkerside, Nathan , son of William Pratt of Kearton, and Edmund Wilson of Grinton were all killed in lead mines.

1778 brothers James and Ralph Spensley of ~Blades were killed at Old Gang.

1807 Somon Coates of Kearton killed in lead mines.

And so it goes on.

Other tragic deaths are also recorded.

1641 “Robert Grumeketp of Stainmore, being slam at a coal shaft on Tanhill by falling down to the bottom and dyed”

1641 “Scaife, Esabel from Westmoreland, who was travelling over the moors by tempestuous weather was perished and dyed”

1763 Ralph, son of widow Garth of Feathom was killed by lightening near Freeat Fauld.

1756 Mary Galloway of Healaugh Bank was killed by a bull.

1783 William Todd of Reeth killed in the slate quarry near Healaugh.

1831 Richard Calvert was killed in the coal pit called ‘Low Pitt’

1828 William Neecham “killed in Quarry by upper part falling on him”

Finally, many decades earlier , we find a report of the tragic death of “Isabell Charder, widow of George Charder of Reeth, “did accidentally slay herself with a knife being known to all neighbours of her obdure accident on Tuesday 26th May and died and was buried on Wednesday 27th May,. “From such accidents Lord in Thy Mercy deliver us”

A body was found on Whitaside in peat in 1797. It was examined by Barker, Thomson and Metcalfe, surgeons, who were unable to tell the sex owing to decomposition.

As late as WW2 there seems to have been a great interest in accidental and sudden death. A letter to Evi Spence from her mother in Reeth in November 1943 related the sad story of ‘Rita’, a Land Army girl of twenty one. She had been digging during the day, returned for a meal, then washed her hair and collapsed and died before the Doctor could be called.

Accidents must have been as large an element as illnesses and epidemics, bringing anxiety to the Dale’s population. The mines were dangerous places, the river, tempting people unwisely to take short cuts during flooding, also an uncertain element. Even animals caused problems, horses in particular.

Between 1798 and 1813 Coroners reports continue the tradition of cataloguing accidents. When called for decisions on other unexpected deaths, they, like others, don’t mention what disease took the victim, rather the conclusion was almost always caused by a “visitation by God” . George Brown of Reeth in 1810, Robert Brass of Marske, Mary Bradbury, and Margaret Close , and Deborah Longstaff , all of Reeth, and many more, were taken by their Maker. It seems illnesses were a taboo subject.

Falls seem a common cause of death during the same period. In 1799 John Lancaster died in a fall. George Sunter, and Thomas Metcalfe of Winterings died from falls down mine shafts. Charles Metcalfe fell down a precipice in 1813. John Taylor fell down stairs in 1800 in Reeth,, John Waller fell from his horse in Brompton, in 1798, and John Birkbeck of Whitaside died from a kick from his mare in 1800. Both Robert Thompson and Thomas Deakon of Reeth were found dead on the roads on separate occasions.

In Arkengarthdale the records of deaths were slightly more illuminating, although accidents were still more fully recorded.

13 children died in 1806, and in 1835 36 died and in 1807 another 16 children succumbed, to what must have been a serious epidemic. The Arkengarthdale school and Swaledale school log books record the closure of the schools for several weeks at a time during epidemics of whooping cough, flu and measles'

1815 Elizabeth Whitfield was burnt to death, and Thomas Dent was killed in Danby Level. In 1803 Hugh Stones was killed by fighting.

Joseph Peacock died from a fall down stairs leaving a widow with seven children. 1821 in June, John Hird "died by the visitation of God". The same year in October Thomas Harker also died by the "visitation of God".

1821 William Lee and twin Margaret. "Infant deaths CB Office"

Deaths reported between 1874 and 1896 indicate how common death still was in childbirth. Mary Robson, aged 20, of Dale Head died suddenly in childbirth, as did Alice Stones, aged 30,. the coroner declared both deaths as from "natural causes".

In 1875 Thomas Corner died of typhoid. Mary Emma Whitehead died on her fourteenth confinement.

In 1887 Dinah Garbutt of Booze died suddenly. Elizabeth Wilson, aged 40, died suddenly from "natural causes". Was this when giving birth?

Elizabeth Ann Stones, aged 13 of Faggergill. The Coroner's verdict at the inquest reports "she died of Peritonitis from an unknown infant".

Elizabeth Kilburn aged 53 of Stang Pot "having been found dead in bed, was buried after the Coroners inquest.

Ellen Waller of Old Yard, aged 24, "daughter of John and Mary Hutchinson. She fell suddenly down and died without a word on Friday night last March."

Matthew Stoddart Aged 68 died of Natural Causes, as did reports of nearly all those aged over 60 .

1871 Jonathan Stubbs, aged 15, "Was preparing for his Confirmation but met with instantaneous death by falling of rock upon him in the Faggergill mine". Verdict 'Natural Causes'

Robert Harker, aged 55, His first wife was buried in 1845. His second wife Sarah was buried in 1877. "Her father, John Carlin perished in terrible snow storm in attempting to cross the 'Stang' to attend a funeral. Owing to the long continuance of snow the remains were not found till Palm Sunday 1875"

1891 James Harker, of Arkletown, known as "James 'Captain'. He was found dead on the Stang road near Shaw Farm, having fallen in a fit, the rigours of the frosty air being terrible".

Albert Harker, aged 29, from Booze, was "killed by fall of stone at chert quarry"

Robert Daykin from Arkletown "met with a violent death, having been pierced under his eye with a fork by his nephew, while forking hay into the hay-mew or byre on 3rd August 1

Jeremy Taylor Hird, Aged 70, From the Rigg. Son of Thomas Hird ,Yoeman, and Mary his wife of Park Head' "he died suddenly on Saturday 3rd Nov. 1868. While sitting before his fire reading the newspaper. RIP.

.Stephen Hillary of Scar Top "died by being knocked down by a horse which caused a broken leg. next day he became unconscious and died four days later. He was a Wesleyan."

In the 19th Century in CB Yard alone Cathy Lawday reports that a great number of babies died at birth. In one Church Burial registry is written " Baptised in extremis by the midwife".

Records continue into the 20th Century:

1913 John Liddle Kipling of Low Faggergill died of 'Synope' (apparently fainting ,passing out ,swooning) Added are the words 'Depth 6ft'.

1919 Thomas Henry Longstaff of Raw Farm, died of cancer in Warrington Hospital. He had joined the Army in 1914 "His horse reared and fell on him when on duty in France ".

Mary Annie Keenan Aged 24, at Seal Houses. She was an Irish maid servant living with Mrs Peacock of Seal House, died taking Laudanum, " from no clearly assignable cause save sullen anger from her mistress and her mistress' son's rebuke". The verdict at the inquest was "died from taking Laudanum, but there was no evidence to show the cause. The Burial Office was read with some adaptations and omissions . May the Lord have mercy on her".

Sadly suicide is reported among young women several times. They must have been living desperate lives. In September 1896 Leeds Mercury reports that "an inquiry into the death of a young woman named Robson, aged 21 ...living at Park Head Farm, Arkengarthdale"... she was delivered of a child, she wrapped it in a parcel and sent a young servant to place it in the pest house. Dr Hodgson was called from Reeth, but on his arrival at Park Head the young woman was found dead. A verdict was returned in record with the evidence. This is the first mention I have found of a "pest House".

The York Herald reported in 1897 that an inquest was held in Reeth on the death of Mary Jane Bell, aged 16 years, a domestic servant residing with Mrs Kendal at Fremington Howe. She was pregnant and took some strychnine which was kept in a bottle for farm purposes, which caused her death. The Jury found she had poisoned herself, but had no evidence of the state of her mind at the time.

The collapse of the lead mining industry with the huge rise in poverty during the 19th Century exacerbated the conditions for ill health and disease. In 1879 a correspondent in the Ripon Gazette wrote that in "Arkengarthdale miners are starving on half wages. Lost looking men, in ragged clothes, are roaming about for employment"

Josef Smith ,aged 42 from Langthwaite, was "killed by a fall from the Old Arkengarthdale Glebe House at Healaugh, which he was taking down".

In the 20th Century accidents continued

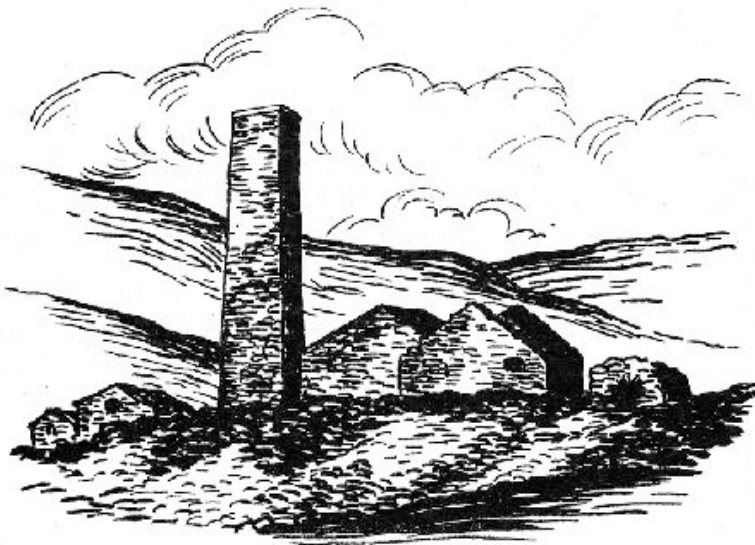
In 1918 the Lord of the manor G.T.Gilpin-Brown, died from a broken neck when falling over a sunken fence in the dark.

1919 Thomas Parkin Harker, aged 19, from Rigg Yard “was returning to Training College for Teachers, after his father’s burial, on his newly acquired motor bicycle. Along the Great North road at the Dishforth corner Lady Compton Vyner’s car sounded horn to pass him. Thomas Parkin Harker thought the car was coming from a side road and swerved to the wrong side and was run down. “Back broken in two places and leg in three. Unconscious for some time. Ear pieces on helmet blamed. Wesleyan.”

In still more recent times the tragic accident occurred in WW2 ,which took the lives of three young children, while they were playing with a bomb or shell which they had found. The loss of a local boy and two evacuees is still remembered with sorrow today.

The early death of parents left children homeless and alone.

LEAD MINING



Although mining for lead had gone on for several centuries, it was not until the 18th Century that more was invested in the industry and mining developed as the major employer in the two dales. There is a mass of literature available on all aspects of the local lead mines, however it is on the impact on the health in the area which is the interest here.

As the mines developed the population grew from year to year, only checked by the devastating impact of frequent epidemics. The population fell by a third as the bubonic plague swept through the Dales, and epidemics continued for many years. No one realised until the 19th Century that diseases were spread by germs, and rats with fleas

were the culprits related to the Black death..

As work fluctuated families were often throw into poverty. Illness thrived, and must have caused constant anxiety. In the mid 19h Century Captain Harland of the Reeth Poor Law Union was asked for a report on the state of health in the area. His report in 1841 addressed to Sir John T Waltham Bt. said that bronchial diseases and rheumatism were common. He put it down to the living conditions and climate. The cold and rain after the warmth of the lead mines as much as outside conditions were major factors.

.Nine year old boys working in the mines frequently had asthma. Girls and women were also prone to chest infections. Harland reported in 1843 that about a third of the women in Marrick parish worked outside. They picked turnips for 8d a day, weeds for 8-10d and worked in the hay fields and reaping for 10-13d. Many women worked at washing lead ore at the mines, outside in all

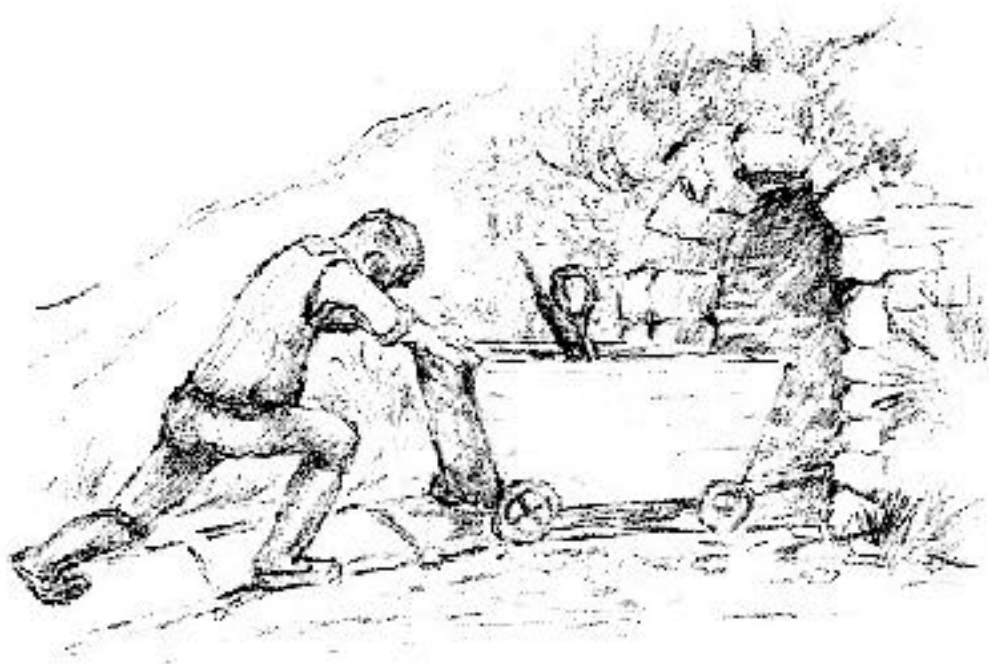
weathers. Housing conditions were crowded, where families lived in two rooms with ten or twelve children.

In 1864 the Government ordered the Kinnaird Commission to report on mines, other than coal mines. The mines themselves were often several miles from the villages. The miners would arrive wet and remain so till at night they returned in darkness. Women and children were also employed in the mines, but generally above ground, although the 1851 census reports a great increase in children working underground.

'Bad air' or 'carbonic acid'(carbon dioxide) "can appear deep in the mines without warning and can be deadly. It frequently flows out of the caverns and small openings in the veins in a manner similar to water. The difference is that water can be heard and seen trickling down the sides whereas gas is noiseless and invisible"

Arthur Raistrick in 'Leadmining in the Yorkshire Dales' says that often the miners would arrive at the mines after walking several miles in rain and wet ground, and remaining wet had to climb hundreds of feet down ladders, arriving exhausted before work began. At the end of the 18th Century some mines (such as the Quaker London Lead Company) provided 'Shops' outside the mines, where the workers could change their sodden clothing and leave them to dry a bit near a fire. They also had very basic dormitories where those living too far for daily work could sleep, sometimes more than one to a bed, and probably insect infested.

Young boys of under 10 years frequently worked under ground with their fathers, usually dragging material to the bottom of the shafts. Asthma and TB were rife among miners and their families.



Twice as many miners died between the ages of 45 and 55 than in any other occupation.

According to Arthur Raistrick "Wages were based upon payment accounting of ore raised, and could involve periods of absolute poverty, when miners only survived on loans and debts made against the possibility of a good strike. Life of uncertainty, with frequent and recurrent periods of debt and near starvation was all too common among a large proportion of the miners"

The 'Dressing floors' above ground were generally worked by women and children, and provided no shelter from the elements. Wages were based on the amount of ore raised and could vary tremendously as the veins fluctuated between rich and poor quantities of lead. This led to uncertain incomes where families could be thrown into extreme poverty without notice. The fact that often the mines only paid their workers once yearly or quarterly, made families fall into debt. Many relied on poaching, a crime severely punished when caught.

Most miners died of respiratory diseases. Silicosis, (sandstone dust is said to be worse than limestone) TB, 'miner's coughs'. But the threat of death from infectious illnesses was ever present. Dr Buchan believed that with "heavy burdens, labourers etc are obliged to draw in air with much great force and also to keep their lungs distended with more violence than is necessary for common respiration. By this means the tender vessels of the lungs are over stretched and often burst, in so much that a spitting of blood or fever ensues" he added that "singers are often fatally harmed by violent exertions of the lungs" James Ray Eddy, in the mid 19th Century claimed that if miners used face masks they might minimise the cause of silicosis and other lung disease, such as tuberculosis, caused by the dust from drilling through rocks. He felt that if they grew a moustache it would act as a filter!

Thomas Hayes Jackson MD, of Darlington in 1879 wrote in 'Illnesses in Arkengarthdale and Swaledale',

Miners had a hard life, they were "industrious, sober, intelligent class of people" the poor didn't live long because of lung disease from lead mining, though those in the mines often lived for ten years longer than those involved in smelting. Families frequently ended up in the workhouse. Lead washings from the mines meant that "fish cannot exist in the rills or rivulets near them. Although there are plenty of fish elsewhere in the district".

Work conditions in the mines were thoroughly unhealthy and dangerous. Lack of ventilation, dust, damp, continual darkness, bad air, all contributed to the ideal spread of illnesses of the chest. Added to that the poor lived in overcrowded and ill ventilated homes which were a contributing factor for the spread of bronchitis, TB and 'miner's coughs.'. They reported shortness of breath and "black spit", loss of appetite, severe coughing and blue lips. 'Bad air' made them dizzy, gave them headaches, sleepiness and sometimes caused fainting fits. They sometimes vomited., and suffered chest pains.(see "Lead miners in Northern Pennines" by C.J.Hunt)

Dr Buchan thought that poverty not only aggravates many diseases in labourers. "Few of them have much foresight, if they had it is seldom in their power to do anything when any disease overtakes them, they are miserable indeed." He sings the praises of those who provide charity to the poor "surely the most exalted act of religions and humanity".

Consumption was frequent in this area, as far as one can tell TB was rife for centuries. Buchan states that inflammation of the lungs is "Attended by great danger. Persons who abound with thick blood, whose fibres are tense and rigid...are most liable to the disease. It is generally fatal to those who have a flat breast, or narrow breast....It proceeds from the same causes as pleurisy, viz. obstruction of perspiration from cold, wet clothes etc. and from increased circulation of blood by violent exercise" The causes of consumption seem legion. Sudden transmissions from cold to hot climate. Sleeping with diseased people and work involved in leaning forward, as with tailors, shoe makers etc. Wet feet, damp beds and clothes and night air are all responsible and the disease is virtually incurable. Bleeding can help and infusions of "Peruvian bark", apparently a helpful drug.



Already mentioned those in the lead mining industry died young, they had shorter lives than in any other workers in England. The average age was 45 years and smelters died even younger. It was rare for a father to see his youngest child become more than two years old.

Between 1820 and 1840 over 12% of 730 burials of miners recorded in the Mucker registers, were men who died between the age of 21 and 30

Dr Buchan recognised that particular diseases were linked to certain occupations, he said “to remedy this evil is a matter of some difficulty. Miners are not only hurt by unwholesome air, but likewise by the particles of metal which adhere to their skin and clothes. These are absorbed and taken up into the body and occasion palsies, vertigoes and other nervous disorders, which often prove fatal. Lead, and several other metals, are very pernicious to health. Miners should never go to work fasting, nor continue to work too long. Their food should be nourishing and their liquor generous. Nothing more certainly hurts than living too low. They should by all means avoid costiveness (constipation), this may either be done by chewing a little rhubarb or taking a sufficient

quantity of Sallad oil. Oil not only opens the body, but defends the intestines from the effect of metals". He said that miners should change their clothes as soon as they "give over working. Nothing tends more to preserve the health of such people than strict, almost religious regard to cleanliness."

Harland commented on the housing in different parishes. Homes in Marrick were mostly small with ling or heather roofs and near to the occupants mines. They were tolerably clean but crowded with no ventilation. Contagious diseases in Marrick was more common than in Grinton , Reeth and Melbecks where the dwellings were superior . In 1800 most of the houses there had been thatched, however by 1841 stone slates predominated and people here were well clothed and comfortably housed, clean and orderly in their habits. Between 1835 and 1841 the average age of death for a miner in Grinton was 54 years , in Marrick 47 years , while in Arkengarthdale and Muker they were only 45 years. Harland didn't think much of these two parishes. He described Arkengarthdale houses as having imperfect drains and the habits of the people were "intemperate and filthy. .Skin diseases very common as well as typhus and other malignant diseases" In Muker the long distance to the mines may have contributed to the ill health and early death of the miners.

The diet of the women in Marrick who worked eight hours a day were tea for breakfast, bread and milk, and occasionally a little bacon with potatoes for dinner and supper again just bread and milk. Not much sign of fruit and vegetables. He observed that there was no reason to suppose that working outside injured the manners and morals of the girls , though invariably it was found that girls "removed to the parish from manufacturing districts are unfit for domestic employment, their manners being rude and vulgar and of vicious habits".

In spite of the initial boon in the industry in the 18th century the report by the Kinnaird Commission in 1862-63 describes great depression in lead mining with closures. People were "at starvation point and leaving fast" The Children's Employment Commissioner had earlier stated that "by leaving only twenty miles down into the coal fields a younger man might nearly double his income and have prospect of adding many years of health and strength to his life"



Not only did the mining households suffer from a poor diet, as looked at from today many dales people were severely undernourished. It was not only caused by poverty of some households but the fact that what was eaten was often inadequate for good health. The climate was not helpful for growing vegetables and fruit. Right until the 1930s and 40s the little enclosures growing food for the family were woefully inadequate. Potatoes, a few gooseberry or currant bushes, perhaps the occasional root vegetable, were all that could be cultivated. The average diet was reliant on the housewife's weekly baking day, when she cooked the week's bread (as white as possible) cakes and biscuits. The evening 'tea' would sometimes have some bacon, from the salted pig hanging from the kitchen rafters, a pig which the housewife had preserved to last throughout the year. Rarely would the family eat meat from the sheep it reared as this was a major part of the family income. Although some cheese and butter would be eaten, it was also a major source of income in the markets. Fruit and vegetables were not commonly eaten.

In Dr Jackson's book in 1879 ("Life in the lead mines of Swaledale and Arkengarthdale"), he wrote that the miners were "an industrious, sober, intelligent class of people" but they were poor and didn't live long owing to lung diseases from mining. "So unhealthy are the mines that fish cannot exist in the rills and rivulets near the mines, though they are abundant elsewhere in the district".

Not everyone saw the miners as such a gentle breed as Dr Jackson. Anthony Clarkson in 1820 describes them as hard drinking and prone to fighting. He wrote this verse:

'Wild as the dale in which they dwell
None can the graver lads excel
In wrestling, leaping, fighting and running,
Deep drinking, swearing, craft and cunning,
Miraculous tricks and roguish jokes,
Untoward in their ways and looks.

Knife crime does not seem to be new. In 1852 Leeds Mercury reports that Robert Longstaff and Johnathon Stoddart were charged with assaulting John Harker in Arkengarthdale, with a sharp instrument. And in 1853 several Arkengarthdale men were charged with assaulting Thomas Alcock. They received two months imprisonment.

In March 1858 James Harker (27) was charged with having cut and wounded John Fawcett in Reeth. Mr Slack from Arkengarthdale was also involved.

In 1803 Hugh Stones was killed by fighting.

There is no doubt that during disputes between mine owners, the workers took sides with their employers and became involved with enthusiasm in some serious fights. Perhaps after working in the difficult, unhealthy conditions of the mines they understandably called in at a local pub if they had spare money, and sometimes became a bit drunk. There were plenty of inns to visit if one had the money. There were four inns in Muker, about seven in Reeth and nine in Arkengarthdale. The inns brewed their own beer and their kitchens were what today would be the bar. This was still the case at Tanhill in the 1930s when one-eyed Susan Peacock reluctantly let her customers into the inn.

Over generations until today, the locals were from the same families and local surnames persist. Those who mined followed their fathers. They must have had an optimistic outlook to continue in such an uncertain industry, an attitude, perhaps, that "things can only get better"

. There was a period when gin drinking became a national problem, especially in the towns. The Government imposed a tax on the drink to control its consumption. It is said that even in Reeth no deal was agreed on Market Day without the consumption of a bottle of gin! Various non-conformist

churches became involved in the Temperance movement at the end of the 19th Century , and villages like Reeth still have signs advertising a Temperance Hotel , such as that on a house on the Green. Gertrude Budden (aged eighty two in 1962) daughter of John Fothergill, told of a lady from Hurst visiting her home. Fothergill, a strict teetotaler, had been given a bottle of whiskey by a Scotsman, but had never opened it. The lady visitor was extremely cold and his wife suggested he gave her a drop of the drink to warm her up before she walked home. In his ignorance as to the properties of the spirit, he poured her a tumbler full of drink, which she enjoyed, however when she tried to rise to leave for home she was incapable of moving ,and had to revived with strong coffee . Later she could be seen slowly wandering down the road towards Hurst.

”

By the mid 19th Century the mines, after a short upturn in their fortunes, began to fail. By the 1880s many had closed , leaving a large population without employment. Although a hundred years previously there had already been an exodus to the coalfields of Durham, by the end of the century half the people had moved away , either to the coalfields, or the Textile mills in Lancashire, and even taking the perilous journey across the Atlantic. There they settled in the lead mining districts of the Mississippi where they also found plenty of good, cheap farming land, work connected with the lead mines and business opportunities. Many thrived, and tried to persuade their fellow Dalesmen to emigrate too.

EMIGRATION

In 1876 James Lonsdale Broderick, aged 35, from Swaledale, made a journey to America to meet old friends who had emigrated and found work in the lead mines , business and farming in Ohio. He hoped to give advice to those Dalesmen who could not sustain life in the Dales when the lead mines collapsed. He visited a Scotsman who told him “he sends \$20 to his sister every year... he came here with nothing, losing his brother to cholera in Canada soon after arriving. I should think that he is now worth \$50,000, invested in three stores in Dubuque.”

He visited dozens of Dales families who were making successful new lives in America. Unfortunately, in spite of hugely improved living standards, with decent housing and plenty of food, he still mentions some of the illnesses familiar in the Dales.

“We had tea with James Alderson and his wife. They came from Muker about 12 years ago. He was ill, suffering from asthma or bronchitis” Later he adds that “ James Alderson of Centre Grove “is dead.He died yesterday evening of inflammation of the lungs, they say. His widow and children will be badly off, I’m afraid.”

He reports the death, after only a few months in America, of Mrs James Spemsley of Mineral Point.” she died about a week after her confinement she was the only daughter of Mr and Mrs Thomas Spensley of Reeth, who came over here to live at Mineral Point last summer. She had two children. It is predicted that the old people will return again to England.”

Never the less his account gives a picture of great rewards for those brave enough to face the hazards of crossing the Atlantic to start a new life.

FARMING

As soon as man settled in these dales they engaged in clearing land for farming. There is evidence of ancient enclosures and apparent areas where animals were kept near to settlements.

There is plenty of archaeological evidence that during the Middle Ages it was possible to engage in arable farming. Linchets and field systems can clearly be seen near Reeth, and particularly in the valleys near Maske and Downholme. It must have entailed tremendous skill and effort to construct these impressive terraces and field systems without the aid of mechanical machines. There is less to see in the upper dales beyond Muker.

By the Middle ages farming was clearly an important activity. Growing corn and root vegetables must have been profitable to have made the earthworks visible today worthwhile.



An inventory in 1530 John Leland says "little corn groweth in Swaledale" although in 1540_1599 probate inventories mention corn, and in the Downholme area, we find mention of draught ploughs and oxen. In 1549 William Milner grew seven acres of rye at Calverts Houses and he also had a plough and four draught oxen.

However, changes in weather patterns, invasions, and illness gradually made arable farming too uncertain, and farmers started to move to cattle and sheep farming

which could use the higher ground where the hardy stock could survive in most weathers.

A series of terrible summers when the harvests were ruined, with a fall in the population owing to disease, caused arable farming to diminish overall. But sheep and cattle rearing was becoming well established by then, they grazed dales heath pastures and moorland till today. Disastrous summers finally made the growing of corn too discouraging, and it was left to the farmers beyond Richmond to continue growing these crops. Although even as late as the end of the 1700s Francis Garth at Crackpot saw a revival of homegrown crops when prices rose for corn and meat, and temporarily farming did well. (Edmund Cooper 'Men Of Swaledale').

A very few farmers continued to cultivate a few fields right into the 19th century, moving from wheat crops to oats, which were ground in the water mills along the rivers Swale and Arkle. It seems that in 1852, although arable farming had ceased, the population had a good season for picking Nuts (was this on the track to Arngill known as Nut Walk?) It was a good hay making summer although there was a bad potato disease and the wasps were bad. There was lots of Fog.

Bees were kept for honey instead of sugar. In 1801 Crackpot records that one hive produced 8 stone of honey (is that possible?) In 1817 Richard Garth, son of Francis, ploughed a new field called Barbell and grew wheat and oats. It harvested "in two weeks, never being put off by rain. However by 1862 growing crops had definitely become too difficult, with wet summers and floods

in the corn fields and finally the Garths "levelled out the furrows in the fields" and dropped growing crops apart from hay. (E.Cooper).

Individuals owned little land and were tenants of large landowners. Although they could pass on their tenancy to their families, if they owned their farms they were also party to a system of Partible Inheritance, whereby their property was left equally to all their sons (or daughters), which diminished the amount of land each could farm. For the majority of Dalesmen it was mining which was their main employer, but this work could fluctuate for a great number of reasons, and families could sometimes be left destitute, and dependent on their small holdings, and very importantly the knitting trade.

Poorly nourished and housed, the population were exposed to epidemics and sickness with devastating effect. Their diet was poor, dependent on what the housewife baked each week. She produced, over centuries, basic oat cakes, bread with flour as white as she could obtain, home produced dairy produce, bacon from the salted pig hanging from the kitchen rafters, and possibly a gooseberry or black currant tart, ingredients from the little potato patch near the house. Meat was rarely eaten as stock was taken to market to augment the family income. The inclusion of fresh vegetables or fruit was very rare.

In earlier times wool from the sheep and knitting was sold at the market in Richmond, and wheat to grind in the Dales mills was bought. Knitting became an important part of the family's income when mining was short.



The sheep were hardy and could remain on the hills most of the year, whereas the cattle were brought down and fed on hay during the winter months. These tough 'Swaledale' sheep were only registered as a pure breed in the 20th century.

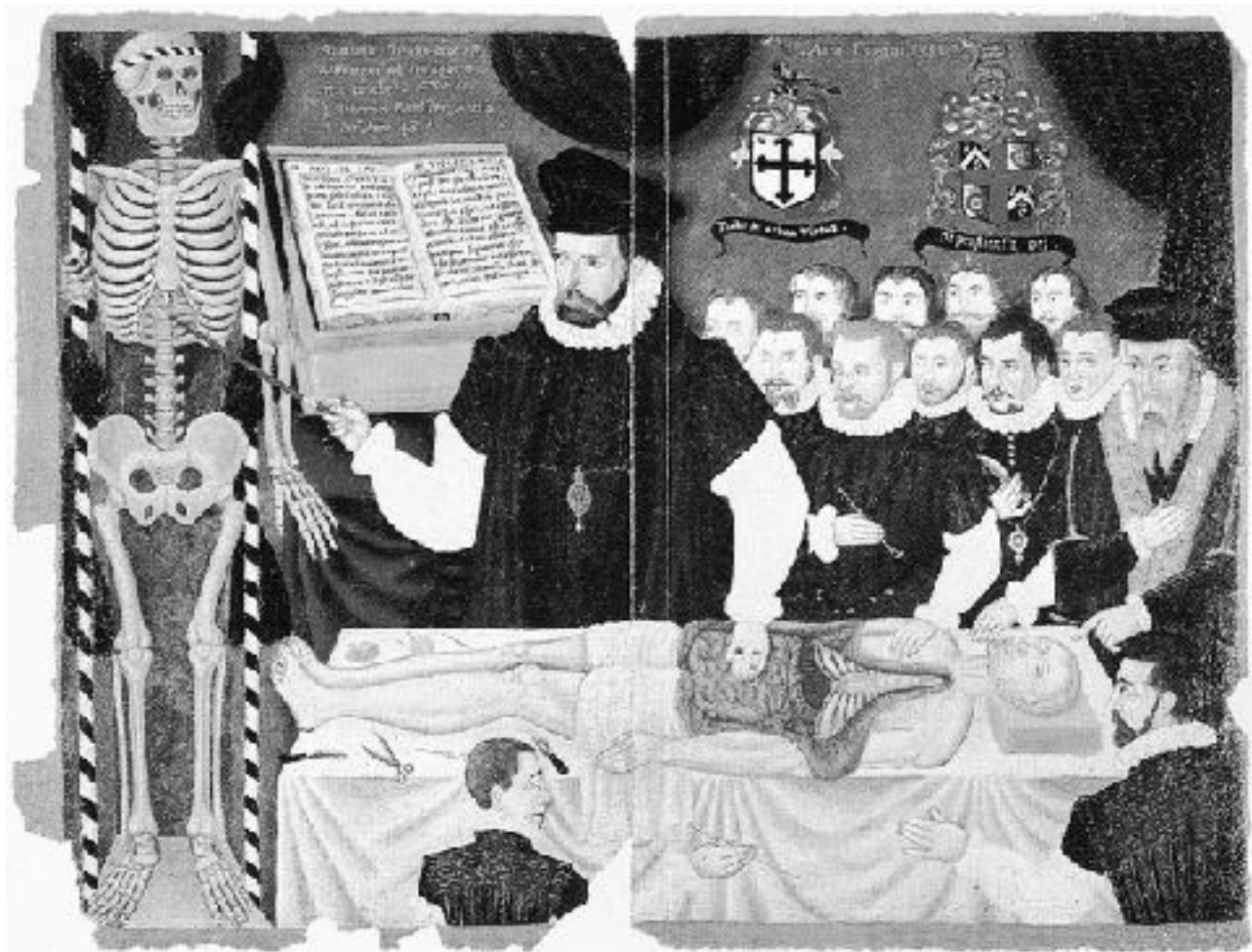
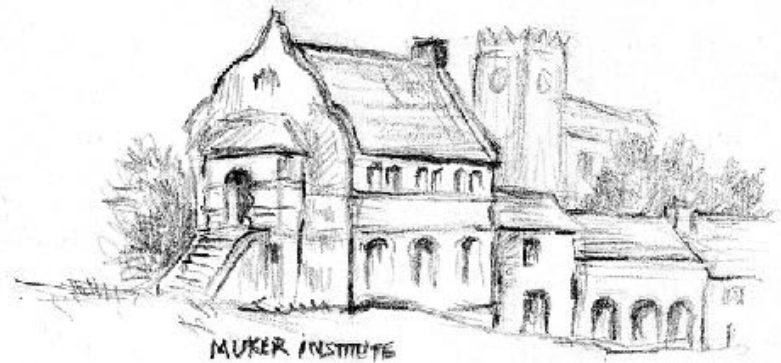
Meanwhile, families on the verge of starvation depended on help for occasional clothing, rent or even food, from the Poor Relief handed out by the Select Vestries of the Church. So desperate were they, that when the price of corn fluctuated and caused great hardship among Dales people, on 3rd December 1757, being Market day in Richmond, "a number of nearly a hundred rioters, masons, knitters, and

labouring men, from Askrigg, Bolton, Redmire and elsewhere in Wensleydale, with some from Swaledale rose up to protest about the price of corn." They caused indignation among the landowners and business men. "The Riot Act was read in the town, and the leader and about ten others were committed to gaol, where they now remain" (London Evening News.6th Dec. 1757)

As Europe entered the era of the 'Enlightenment' in the 18th century, things started to change even at the local level. How much the remote Dales were effected is questionable. However, schools were being established in the villages, by individuals and religious bodies. Literacy was becoming more general, and a desire for knowledge of the world around them was taking hold. Several Literary Institutes were opened, where villagers could meet, have lectures and read a growing

collection of books. In 1822 Richard Garth was authorised to purchase books for the Muker Institute. He selected some pretty serious stuff. For £6.9s.6d he bought the following:

- Rollin's Ancient History.
- Plutarch's Lives.
- Robertson's Histories(5 volumes).
- Addison's Travels.
- Prideaux Connections.
- The Pilgrom's Progress.
- Johnson's poems.
- Village Dialogues.
- Boswell's Johnson.
- Storm's Reections.



ADVANCE IN MEDICAL KNOWLEDGE

By this time medical schools were appearing, particularly on the continent. Dissection of cadavers was legalised in some countries and a greater understanding of the human body occurred. Although, no doubt, superstitious cures for illness lingered on, especially where 'qualified' doctors and pharmacists were not affordable for help. Progress was advancing by the mid 18th Century, and the causes of some diseases by germs was becoming understood, which meant that some illnesses began to decline.. But while this was happening new diseases were appearing in Britain. Cholera appeared in major epidemics and continued over many years. With the return of armies and travellers from overseas illnesses such as Syphilis became a scourge in crowded cities. In inadequate rural housing TB continued, and was a major killer. Poor living conditions, poor diet, lack of sanitation and clean water remained issues well into Victorian times. Progress in many ways will have been slow in the Dales, and indeed, little changed until well into the 20th century.

T.P.Cooper from York wrote an article about Muker where he spent Christmas in the 1890s with a friend, at the old Queens Inn. He describes the village as barely a hamlet with half the population of the village down to 837, although it still claimed to be a 'market town'.

As late as 1897 in an article describing Muker by Arthur Harwood Bierly also of York, wrote "The dales farmer lives by his butter and cheese, mutton, and wool. He might if he would only learn, be able to add to his profits by vegetable growing, bee keeping or scientific poultry breeding. How is it that in the vegetable way he will plant nothing but potatoes? One may send miles for a bob of lettuce. The answer is that his father did not specialise in these unfamiliar products, so why should he?"

With the closure of the lead mines at the end of the 19th century there was no possible alternative employment in the Upper Dales, the minimal, fragmented farming, and a few trades were the only possibility, and there was no alternative but for the people to find employment elsewhere. The population was halved as they left for the coal mines in Durham, the mills in Lancashire, or emigrated to America, Canada and Australia. Those who were left struggled with their basic existence.

A look at the numbers from 1821 to 1901 reveals the severe decline in the population.

	1821	1901
Grinton	689	262
Marrick	621	178
Melbecks	1726	497
Muker	1423	549
Reeth	1460	570
Arkengarthdale	1512	427

CARE of the POOR

During Tudor times there had been a growing problem over pauperism. Acts of 1598 and 1601 required every parish to levy rates to relieve the poor and destitute. Harsh methods against vagabonds, if they didn't have employment, could include sending them back to their place of origin, or those unrepentant to the house of Correction in Richmond. Church wardens elected an Overseer of the Poor and Select Vestries administered relief to those they considered were deserving of help. In Muker according to Vestry minutes, this could be the giving of clothing, bedding and sometimes food, even a small weekly pension. The mines often only paid their workers yearly, even quarter yearly, leaving families in debt and near to starvation. They took to poaching which could incur heavy punishment if discovered.

Most Dales villages had a small Poor House, where the elderly without income might live, as well as orphans and single mothers. They were very basically furnished, often without chairs or beds. Anyone showing any ability to work was set to breaking stones for the roads, or in the case of women and children, knitting of stockings, the sale of which contributed to their keep. In 1588 one



of the major sources of knitters were orphans and pauper children. Some were apprenticed to "knit for seven years which seemed one way of coping with poor children. By the 17th Century most stockings were sent to London, and Richmond was a centre of knitted goods, from where stockings and hats were sent abroad. However by the end of the 18th century knitting had started to decline, and the agents who distributed wool and collected the finished articles began to disappear.

In the Dales work and unemployment fluctuated with the fortunes of the lead mines. What farming existed was so small scale that there was no alternative employment. Pauperism to near starvation, caused more ill health, and compounded by successive bad harvests led to real crises

Although there had been an upsurge in demand for lead at the end of the 18th century, and during the Napoleonic wars, by mid the 19th Century demand had declined and local mining became less competitive, there was a temporary up-surge and investment in the mines till finally closures rapidly paralysed the industry, leaving hundreds of workers facing disaster. Half the population left for the coal mines of Durham, the Mill towns of Lancashire or emigrated overseas. Many prospered in their new surroundings while those left behind struggled on small farms and verging poverty until the 20th century. Housing remained basic, homes were damp, ill ventilated and over crowded and

basically furnished, often with only blankets to wrap themselves in and no bedsteads, no chairs and a 'board' instead of a table.

The Vestries who were self elected, sometimes made quite arbitrary judgements as to whom they helped. Those they considered 'worthy' might be given small pensions or a few goods. The Vestries sometimes paid a pauper to house someone who was also a pauper., rather than resorting to the village poor house.

In the Select Vestry minutes of Muker Parish in 1821 we find that it was "resolved that upon complaint of Mary Hodgeson "on account of the disposition of her daughter has contracted a debt of £1. We agree to discharge the same but as her pension is 5/6 we in the future shall not discharge any more on her account so constructed"

May 1822. "resolved that Mary Cowper's son shall be sent to the Whitchurch on account of a complaint in his knee, the expense to be paid by the township"

"Dick Dack be relieved with 2d a week on account of his wife till this day fortnight".

Titus Jack be allowed a pension. Jim John's widow be allowed 4/s a week. William Cooper 3/6 a week.

In 1819 that " James Hird of Arkengarthdale have his pension increased to 5s to get him some coals , as we judge him to be a deserving pauper".

Others were helped by provision of such things as a pair of clogs, a shift or blanket, and the destitute sometimes received a regular pension of a few shillings a week . For instance, James Peacock was relieved with £2.0.6. in consideration of the scarcity of work and having a small family.

These were the lucky ones.

The " undeserving poor" on the contrary were seen to be scroungers, argumentative or drunks, and could find that even what they had in their homes removed and sold, rather than be given help from the parish.

Clearly this was seen as unjust as this poem by someone unknown in Muker illustrates:

Come all honest men who have cesses to pay
Let your care be attention to what I shall say.
Your wise Vestry Laws, restrictions and rules
Are left to a parcel of asses and fools.

Nay worse than all that intent upon evil
Their works prove that they are in league with the Devil.
These human infernal, their masters surpass,
In planning out evil while drinking the glass.

Yet who would have thought it could enter their brains
As only such men as hold of the reins.
This business most surely was hatched in hell
To take from the paupers, their prayer books to sell.

Etc. for another six verses.

In tune with the general attitude to children born out of wedlock, the select vestries tried to stem Bastardy by claiming money from the father, if known, as it was likely that the mother and child fell into extreme poverty. Muker Vestry reports that in June 1803, "Mr John Grime and John Pounder, both of Muker,,,,,,promise to pay the Church Wardens and Overseas of the Poor, the sum of £5 within a month after Sarah Hunter shall be delivered of a child or children whether the child lives or dies, and they promise to pay a further £5 after a year of her delivery, and a further sum of £4 at the expiry of three years. There seems to have been some doubt about the paternity of the baby, no DNA testing in those days! Sarah gave birth to a female bastard child who died at the age of one year and 42 days.

Between 1812 and 1814 sums were received from the following fathers of bastard children: Adam Thwaites, Joseph Hodgson, George Guy, Adam Thwaites, Robert Metcalfe, Thomas Preston, Thomas Sunter, William Kearton and John Buckle.

AMENDMENTS TO THE POOR LAW 1834

In answer to the growing national increase in pauperism during the first quarter of the 19th century, in 1834 the Government amended the existing Poor Laws in an attempt to stem the rising cost of supporting the poor. They formed Poor Law Unions incorporating groups of parishes. They were answerable to the Poor Law Commission in Somerset House, London. Initially the two Upper Dales were part of the Richmond Union, however, feeling that the situation was different in the rural areas from the town, after a lot of negotiation they formed a separate Union in Reeth. Guardians were chosen from the surrounding parishes of Muker, Melbecks, Arkengarthdale, Marrick,, Reeth, Grinton and Ellerton.

One of the purposes of the amendments was to halt the rise in pauperism by making it impossible to claim relief outside the workhouse. The existing small village poor houses, which were the last resort for the old, the unemployed, single mothers and orphans were to be closed, They had provided minimal accommodation. In Arkengarthdale the Poor House in Arkletown is said to have had only three beds, some bedding, two tables, three boards (used as tables) four coffers and some cooking utensils. The lack of beds was not uncommon among the inhabitants generally. They simply wrapped themselves in blankets and slept where they could. There is little evidence of chairs either.

With the new laws no outside relief would be available and the only alternative was to be taken into the large workhouse in Reeth. The workhouses were to be a harsh alternative, and were seen more as a punishment than as an act of kindness. To some extent they had the desired effect in halting the rise in relief given by the previous Select Vestries, but how much was the result of the removal of rural populations into cities or the new colonies is not stated.

In attempts to halt the need for poor relief, prizes were offered at local fairs and shows. At Reeth Fair and Cattle Show in November 1848 £2.00 was to be given to a working man, of good character, who had brought up the greatest number of children to the age of ten without parochial assistance. There were no competitors. A similar offer was made, but without the condition of the 'good character' was taken up by entrants. This was won by Elizabeth Brown from Hurst, with the second prize going to Isabella Pedley from Healaugh. It seems women were allowed to compete. A report states that "after the prizes had been given a large party with sumptuous dinner was provided by the Buck, but the working miners were not invited." I'm sure they would have deserved a good meal.

It is only with the new Poor Law rules of 1834 that we have written records of medical provision for the upper Dales. Medical officers, appointed by the union Guardians, answerable to the Poor Law Commission in London who demanded regular reports and sent inspectors from London. By that time advances and knowledge of the causes of disease were beginning to be understood, although the source of some diseases was still a mystery

Reeth Union opened a workhouse which could accommodate sixty inmates. They appointed a Master and Matron, and crucially a Medical Officer to oversee the health in the workhouse and the district. The Poor Law Commission scrutinised every aspect of the work done. They expected regular reports on the finances, health and diet. They sent regular inspectors. They appear to have found the independent Yorkshire men rather difficult to work with. They complained about ignored reports and of delayed information with the lack of questions answered.

A draft letter from the secretary of the Poor Law Commission in London, to Tomlin, Clerk of Reeth Guardians, on the subject of the Lunatic return states that, "the Commission had experienced considerable inconvenience in consequence of the clerk not returning details of Insane persons, Lunatics and Idiots in the parish of Reeth, which was required by section 6 of the Act. 5 and 6 Vic. "

The commission complained that the Clerk systematically "ignores the duties of his office and they question his fitness to continue in this position" Reeth Union was the only one in the Kingdom which delayed completion of their work. Oh dear!

For us the appointment of medical officers by the Union for the year 1842, opens up a lot of written information about the state of health in the district.

Inspectors' reports described that Reeth Workhouse "was generally adequate. The receiving and sick wards had been treated for dampness and are now dry. There were two girls receiving schooling from the Master of the Workhouse and they are very ignorant" He said that the vagrant wards were sufficient. and that no work was performed as most of the inmates were not able-bodied or were sick, women or children.

An on-going correspondence between Reeth and London was over the stopping of outside relief of the poor. The Guardians wished to be able to sometimes give help to someone by providing the occasional pair of clogs, clothing or blankets, saying it was a much more economical use of Union funds than taking them into the workhouse, which often entailed a whole family at considerable cost. Apart from that they felt it was bad for the children to be separated from their parents, as was the practice in the workhouse.

They argued the case of a widow Wells, who had a bastard child as well as several legitimate children, claiming it would be cheaper to give her outside relief than to send all the family to the workhouse. The Commissioners replied that "the hardship for the children was only imagined, and that they would probably be better brought up there than by an immoral mother..The workhouse should be seen to discourage immorality and discourage others from burdening society with illegitimate offspring."

The Guardians tried again that year to keep a father and his children out of the workhouse by giving him some outside relief. He had employment, but not enough income to support all his children. The Commissioners recommended, but did not order, "that the family should be sent to the workhouse, otherwise it would be an encouragement to have large families and subsidy on wages which prevents the labourers from winning a fair market price for their labour, and that their earnings are regulated by their wants rather than their industry"

Another case recorded in Union correspondence has a letter from Ottiwell Tomlin, clerk to the Governors, requesting sanction to pay outdoor relief to Margaret Metcalfe from Grinton. She was a single mother with one bastard child. The reason given was that while in the workhouse she could no longer support her parents, both aged 71, one of whom was blind and the other infirm. If she remained with them she would still receive 1/6 from the father of the child (described by the clerk as 'the putative father') It was suggested that it would save the Union money if she received outside help. A reply from Sir E. Head, noting that he had great doubts about giving in to this case. He felt that outdoor relief for assistance to the parents in such



circumstances would encourage a vast number of similar requests. He believed the clerk was mistaken in thinking the 1/6 would be paid to her from the child's father if she left the workhouse. He advised that a letter should be written asking how much assistance the girl would render her parents. The fact that there existed a blind parent might make it a special circumstance. Annotations on the envelope of this letter to the Poor Law Commission, initialled by Mr Hawley, adds that "there seemed no objection to giving relief to Margaret Metcalfe, the pauper who asked for support for her to care for her parents. Support should be withdrawn if she obtained employment. The father of the child should be compelled to pay the required sum."

The Commissioners dealt with dramatic decisions on matters of embezzlement of money, rape by the Workhouse Master, and unprofessional doctors.

One concern raised by the Poor Law commissioners was the situation where by children, particularly the many orphans, were apprenticed out of the Dales to the Mill towns where they were literally treated as slave labour, working long hours for no pay. The villages from where they came were relieved of paying for their keep and the Mill owners gained cheap labour. The Commissioners didn't ban the practice, however they wished the Unions to avoid allowing this if possible.

The Poor Law Commissioners expected annual reports on the state of Mental Health among the poor. There is no evidence that treatment of the mentally ill ("Idiots, lunatics and the insane") was any different in the dales from elsewhere. Instinctively one feels that the 'village idiot' type of case was perhaps treated more humanely in small communities and families, but there is no proof that this was so. Mr Hawley, inspector of the poor, wrote of an inmate at Reeth workhouse, who was manacled to his chair because he was prone to wander. He ordered his release, and said he should be properly supervised, or sent to the Pauper's Lunatic asylum in York. The Guardians replied that he was quite harmless and should remain in Reeth. I have little doubt that the poor man was suffering from dementia.

In 1865 the following women were sent to the East Riding Lunatic asylum at the cost to the Union of 6s and 8d each. They were:

Ann Close of Melbecks.
Deborah Bell 'Common charge'.
Frances Whitehead 'Common Charge'.

Were these just old ladies suffering from dementia? One shudders to think of the treatment they received in the asylums. Did people who constantly lived under the threat of poverty and illness

suffer from Depression?. It seems possible when one reads of the constant occurrence of ill health, epidemics , unemployment, and poverty. Life must have been very stressful.

Whether Syphilis spread locally when it became such an epidemic in the 19th century, with the attendant mental instability which it could cause, we do not know. Certainly it was a big problem in the cities as armies and travellers returned from abroad. What happened to poor Ralph Fenwicke, from Grinton, who was press-ganged into the navy during the Napoleonic wars, while delivering the church bell to York for repair. Did he ever return to Grinton I wonder?

Occasionally a room was set aside in the Richmond Workhouse where someone suffering mental ill health could be cared for by another pauper. This seems to have been the case with one of my forebears, Isabella Cowper, considered insane in 1807 in Reeth. She was finally also sent to York. In 1816 Richard Cooper was also sent to the asylum. It cost the Union 10s a week for his support and clothes.

(from correspondence between the Union and the PL Commissioners in London)

MEDICAL DOCTORS

We know of the doctors who oversaw the health of the upper Dales from the advent of the Poor Law Amendments in 1834. Prior to that other doctors did exist in the Dales, although they were often too expensive for the average family. We know of three brothers of the Barker family , sons of

Adam Barker in Healaugh.

Dr John Barker 1732-1818. trained as an apprentice in Yarm.

Dr Robert Barker 1741-1871 was apprenticed in Barnard Castle .Later he studied in Guys hospital and St Thomas's London, as a surgeon and in midwifery.He married Margaret Buckle and they lived in Langhom House, Reeth.

The third brother Dr James Barker 1744-1772 . He left a fascinating little book of notes taken when attending lectures on midwifery by a Dr Kelly'

The great grandson of Dr Robert was also a Dr, born in 1862. He was briefly Medical Officer for Reeth Union in Gunnerside , with Dr Turner in the late 19th Century, and a member of the Royal College of Surgeons. Prior to that he worked as a ships doctor crossing the Atlantic, but finally moved to Australia in 1889 where he died of TB.

The Amendment to the Poor Law made a significant change.

The increase in poverty throughout the county was quite out of control after a temporary boon period during the Napoleonic wars. The end of the 18th Century had been a good time for the lead mines, however this did not last, and pauperism was rife. One of the benefits , as already stated, of the new laws in 1834 was the formation of local Poor Law Unions who had to appoint Medical Officers for the local Workhouses and the poor in their union. All the same there seems to have been occasional medical help prior to the new Act, for in 1793 a Dr Dawson was paid £6.10s in Muker for his services, and John Jackson, surgeon, was paid £9.12s. 7d for inoculating three children, and 15s for delivering Peggy Nelson's child. But such expense was hardly within the means of most locals. A local blacksmith, James Littlefair, was sometimes called upon to perform tooth extractions. Rotten teeth could cause health problems among the locals.

Josef Foster Armstrong was appointed to replace McCollah, however it was discovered that he was not properly qualified so he was replaced by Dr Kernot. McCollah had taken on the work of Corsan when he died and at some time Robert Luther Bailey became a Medical Officer. These three remained for many years, in the case of Corsan, till his death in 1847 and McCollah till he died in 1865.

Dr Kernot kept diaries which are now in the NYCRO. Unfortunately, although he mentions all his medical 'visits', he rarely mentions the diseases his patients suffered from. As in the Parish registers, it is the more dramatic calls which give us any details. His entries are minimal, he writes the day and the week in Latin, and gives acronyms occasionally for medicines and, what I presume was an illness. So we find that On 14th Solis (Sunday) in 1846, he 'strapped an ankle of a Harker child' He also visited a child of Peacock's for Pulm., which one assumes was a lung infection. Poor Mrs Batty of Gunnerside in 1867 had a number of visits when suffering from 'Pulm'.

What does 'Pie' mean? and 'Mist'? It seemed it was followed by nose bleeds and cramp. But most commonly he simply reports 'a visit' to patients with illnesses not involved in accidents. We do know that he cut the tongue of John Calvert of Gunnerside, and also of Angus Alton at Dirty Spot. Presumably for tongue-tie? There were midwifery cases, where the frequent use of forceps seemed to be the common practice among all the medical men.

But he gives more information about broken limbs, or George Calvert's dislocated elbow, as well as 'to free an internal couple of Striveons'.

Was the mention of illness a taboo subject, even in the Drs personal records?

A Guy in Angram for surgery to his hand.

George Calvert at Muker for a dislocated elbow.

Some one called Scott at East Stonesdale to remove a tumour on the hip.

A Harker child had an 'ankle strapped'.

in 1865 George Mitchell's son in Blades needed "bandaging and dressing wounds etc"

He regularly mentions when he was called out at night.

W.Harker at Low Row "visit express, 5.00 am" He needed visiting two days thereafter, for "consil and mixture".

Needing help at 5.00 am was Charles Alderson of Stone house.

Michael Wiseman called the doctor at 1.00 am "visit express during night"

But the greatest number of cases are simply reported as 'Visits'. One can gather nothing about the illnesses he was treating.

We know from fluctuations in the population that disease could decimate the inhabitants with epidemics such as Smallpox and Typhus. There were continual deaths and ill health caused by the work in the lead mines, but which individuals suffered what illness remains a mystery, perhaps kept either in family memorabilia or history.

Dr McCollah, already referred to, seems to have been a colourful character. In 1850 he took on a partner to help with surgical work. He was frequently helped by James Clarkson who had knowledge of pain-killing drugs. In 1854 they operated on Betty Taylor for cancer in Peggy Huthinson's bakery in Silver street, Reeth. In 1856 they amputated James Mudd's left leg after a mining accident. They removed a tumour on a boy from Booze called Garbutt.

He also had young apprentices for five years, who paid £50. One of these, John Wilkinson, in 1836, described how he assisted McCollah cutting off Martin Raws arm at High Whitaside. He said "I never experienced such a sight in my life". When his apprenticeship was over he was replaced by Thomas Hird from Arkengarthdale, and reported that "we can none of us please the Doctor", He, John Wilkinson, ultimately moved to America.



It seems that appointing doctors in this remote area was not easy. The Union wanted to encourage doctors to remain in the district. They advertised later in the British Medical Journal in 1871 for a doctor for Muker at a salary of £22.10s and extra fees, and again in 1895 for a Medical Officer for the whole Union at £95.

In 1867 young Dr William Smith was appointed. He had practiced for four years. and lived close to the Workhouse where he was paid £10, as well as £22.10s for the district. This appears to have been an unfortunate appointment as we find correspondence with the London based Poor Law Commission reporting a visit by Robert Hedley, Poor Law Inspector. It describes an enquiry in September 1870 on charges against William Smith. William Martin, relieving officer of the workhouse, stated that he had issued a medical order for Smith to attend James Hawkins of Hurst. Smith made no reference to a visit in the Medical Relief Book. Several other witnesses reported trying to get Smith to visit the little boy, but he died. As did Margaret Frankland who was also neglected by Smith who was, when called, at James Peacock's Public house and refused to visit, becoming abusive. The child died. Malala Nelson, a widow, confirmed that Smith had been called to see her, but never came. She fortunately survived. Not so Thomas Tate who was left to die. Smith was dismissed.

The area covered by the Doctors was extensive and the terrain difficult. The population was scattered and often difficult to attend. Winter weather and dark nights made for additional problems

The Poor Law Commissioners frequently complained about the lack of cooperation from the Reeth Union, and there were times when medical information was missing, which particularly exasperated them.

in 1841 there had been an attempt to halt the continual epidemics of Smallpox among the population generally. The Poor Law Commissioners complained, as late as 1849, that they "regretted that only five children in Reeth Union, out of 261 births, and none under the age of one had been vaccinated" They asked the Guardians to impress on the public vaccinators the importance of their duties, and urged them to widely extend the practice of vaccination.

Richard McCollah, William Rudd and John Corsan were to be paid 1/6 per vaccination. The Guardians only offered them 1/- per case. Carson agreed and the others followed. In 1853 they set up Vaccination stations at Adam Harher's house in Arkengarthdale, Weds 2-3 pm., Mary Littlefair's house Mondays 2-3pm, and Mary Cherry's house on Thursdays 2-3 pm, Also in Low Row on alternate Mondays, Gunnerside in William Alton's house on Fridays .Keld in Michael Wisemans home and at Mrs Walton's house on Saturdays 10-11. In answer to the Commissioners complaints about the small numbers, Dr McCollah said there had only been one case in thirty years and that many parents refused to bring their children for the free vaccination. He had given up the vaccination stations and did it in their homes, and although he had vaccinated hundreds he had never been paid by his Union.

As early as 1795 Edward Jenner had observed that milkmaids who handled the udders of cows, and had been infected by Cow-pox, did not catch Small pox, which spread regularly through the country. He developed a vaccine from Cowpox. This was the first attempt at vaccination and was so successful that it finally eradicated the disease in Britain and Europe. Although it was still used voluntarily by 1853 it later became compulsory to vaccinate children. Amazingly vaccination was known in China several centuries before it was practiced in Europe.

One suspects that many people still patronised the so-called doctors who today we would describe as 'Quacks'. Sellers of patent medicines and cures who would sell their wares in Markets, or in grocers's shops, such as afore mentioned J.Hilary of Langthwaite who was known as a vendor of medicines, and William Peacock, spirit merchant and and patent medicine vendor, of Healaugh. Unqualified "drs" were described as 'rife' in the 1700 hundreds. In the 1820s Thomas Wakley created the Lancet. He had no patience with 'quakery' in the sense of profit orientated commercial practice performed by the medically unqualified'

Some claimed cures were certainly imaginative, such as John StJohn Long in Harley street who claimed to cure consumption by making caustic blisters and giving Bread pills.

In the Dales in May 1805 the following notice appeared.

" Park-wall Doctor."

"Mr Leveer, but better known by the name of Park-wall Doctor, wishes to inform his friends and the Public in general, that he has now taken rooms at the house of Mr Os. Whitehead, Feetham, Swaledale, Yorkshire, where he is to be met and consulted with daily, on all difficult cases and dangerous Diseases whatever, attaching to the human Frame.

It is thought unnecessary to stuff a Paper full of Certificates of the most wonderful Cures he has performed, and of the past services and abilities of this eccentric Character to this Country while being already so well known and gratefully acknowledged by thousands of his Patients, when they have been given up, and reported incurable by other Gentlemen of great practice and supposed judgement and experience. But no relief or remedy without experience and aid of the Park-wall Doctor, who is be met with at the above.

NB The Nobility and Gentry are warned, not to be fearful or daunted at the first personal interview with Mr Leveer, from his not going in the genteel habit of dress, as a Gentleman of his distinguished merit and abilities is looked upon to do."

"Feetham, Swaledale, May 18th 1805"

A Chancer? I wonder how many canny Dalesmen would fall for that sales talk!

There had actually been an Act against 'Quacks' as early as 1421, but clearly control had never been successful. The Barber/Surgeons received their first charter in 1461. It didn't seem to halt wild medical claims by others. The College of Physicians of London was formed in 1522 and they had the power to inspect apothecary shops. They and apothecaries visited patients and dispensed medicines although the Physicians looked down on both as well as Surgeons as being simply technicians. The apothecaries were mainly called in for help where available, by the poorest in the community. They even attended childbirth. By 1815 they were legally allowed to practice.

PUBLIC HEALTH

By this time there was a growing realisation that disease was spreading where conditions were unsanitary and filthy, and the cause of some illness was the discovery that germs were responsible. In 1840 Edwin Chadwick in London, felt that the number of poor people living in crowded conditions, was causing disease and illness. He pressed for sanitary improvement in the towns. By the 1830s there had already been major outbreaks of cholera and it was still unknown how it was spread. Chadwick believed dirt and disease were linked, as was the state of poverty in which many lived. He reported in 1840 on the sanitary conditions and health of the labouring population in Britain.

Although at Government level Edwin Chadwick in 1842 felt that diseases occurred in the filthiest of conditions, he didn't know how. He became commissioner in charge of Public Health when an Act in 1848 was passed to tighten the few regulations which existed. Chadwick became deeply unpopular, he was damaging vested interests, and appeared arrogant and domineering. He was finally sacked 1854.

By 1860 there was a flood of legislation dealing with factory conditions, vaccination, sewage and water supplies, which was followed by the 'Public Health Act in 1875. Local areas had to appoint a Medical Officer of Health. In Richmond he reported that "houses are surrounded by all kinds of filth, both liquid and solid, which for months undergo foetid decomposition".

In 1872 Richmond corporation became also the urban authority for the borough and appointed a Medical Officer for £30 per year. He reported that health in the town was fairly good, although there were areas which were filthy and unsanitary" His complaints continued over the years. One problem was the difficulty in finding anyone to empty the privies and ashpits "unless there was a cart load to remove" people simply tipped their rubbish into the Swale. It was not until 1892 that Richmond acquired a rubbish dump. When rubbish collection was discussed it was shelved on the grounds of cost.

In 1851 the Lancet had already begun an investigation into the adulteration of food, which was a common occurrence.

In a report of the Leeds Board of Health in 1833 they said "We are of the opinion that the streets in which malignant cholera prevailed most severely, were those in which the drainage was most imperfect, and that the state of general health of the inhabitants would greatly improve, and probably future visitations from such epidemics diminish, by a general and efficient system of drainage, sewerage and paving, and enforcement of better regulations as to the cleanliness of the streets."

Alastair McIntosh Gray quotes in 'Medical Care and Health', an article about the river Aire in Leeds:

“ It was full of refuse from water closets, cesspits, privies, drains, dunghill drainage, infirmary refuse, waste from slaughter houses, chemical soaps, dye houses and manufacturers coloured blue, and black, pig manure, wine wash,. Then there were dead animals , vegetable substances and occasionally a decomposed human body”

No wonder water-borne diseases, such as cholera, Typhoid, and dysentery thrived. Air-borne disease, Scarlet fever, Diphtheria, Small pox, Pneumonia and Influenza also flourished in the squalid, over-crowded homes, where conditions were ill ventilated and insanitary.

Although in 1848 the Government passed a 'Public Health Act' where Chadwick was put in charge, a Times article of the time reported the opinion “that we prefer to take our chance of cholera and the rest, than be bullied into health” (shades of the 'Nanny state'?) Chadwick was seen as inflexible, and self-opinionated till in 1854 he was sacked. Cholera outbreaks continued over many years. Although Chadwick had been ignored and finally dismissed, in 1875 'The great Public Health Act' was passed and control of slaughter houses, hospitals, streets, sewage and water supplies was attempted, and Medical officers were appointed by local authorities. In Richmond a sanitary authority was formed for the rural area .

It clearly made little difference in some rural districts. Certainly village slaughter houses existed in the centre of villages, such as Muker, where the slaughter of sheep took place in the butcher's doorway on the main street, and the offal was thrown into the river. This occurred until well into the 1930s. Sanitation and water supplies were very much left to the individual inhabitants until at least the 1950s.

All the same, by the 20th century things had changed. As well as the appointment of Medical Officers throughout the country, Sanitary Inspectors were appointed to oversee matters relating to the wellbeing of the population.

LOCAL SANITARY INSPECTOR.

At the beginning of the 20th century in Reeth Mr Reynoldson kept daily records of his work (now located in the Reeth Museum). A great deal of his time involved the supervision of the laying of water pipes to ensure clean water was generally available. He inspected sanitary arrangements with the local medical officer, Dr Want. They conducted a survey of homes which still had earth closets. some with as many as three seats! They report in 1913 that 126 houses in Reeth still had 'ash pits' and only 87 had water closets. At Healaugh 40 had earth closets and Muker 20.

He comments that in Reeth the ashpits were 'nearly clean'. Although what was known as Fish yard, one lavatory had been left unemployed for a long time, the occupier having moved. The owner said she could never get anyone to empty what she described as 'several card loads'.

He visited Mrs Raisbeck in Arkengarthdale and gave her verbal notice to be more careful over milking her cows, as there were reports of TB locally. He also advised households to boil their milk, and included those at Dubbin Garth, Low Row and Blades.

He ordered the demolition of unsafe chimney stacks and derelict buildings which might cause harm to children.

Mr Reynoldson and Dr Want spent a lot of time organising the fumigation of local schools , which continually had to be closed owing to outbreaks of infectious diseases. Epidemics of measles, whooping cough, scarlet fever, chicken pox and diphtheria occurred regularly, causing closure of schools sometimes for weeks on end.

Even into the 1920s diphtheria took the lives of children. Mrs Squires of Reeth wrote to her daughter "sorry I can't come (to Tyneside) the kids very ill with bad case of diphtheria". in 1921 Reeth school closed when three children fell ill with the disease. The clock maker, Boothroyd, lost two daughters to the disease, and fell ill himself, but he recovered.

Not only was fumigation arranged in schools, but private homes were also frequently treated. Edward Hammond's dwelling, Mr Close's, Mr Robert Clemisson's and Mrs George Porter's sickrooms were all fumigated, no reason given. Dr Spiers ordered the burning of bedding and clothing of those who had suffered fever. The 'Historical Restaurant House' was fumigated after a woman from West Hartlepool had suddenly died there from Pythosis. Mr Reynoldson inspected the house where WW1 refugees from Belgian were living, and found all "comfortable". However when Belgians moved from Mr Taylor's cottage they fumigated all the rooms, Dr Spiers having reported a skin disease, "Gave all rooms a strong dose". There were also Belgians visited in Arkengarthdale, where there was only a child who had suffered small pox several years earlier.

The daily reports mention the death of Mr James Pratt's son from Tuberculosis. That two sons of Mrs Tiplady had Meningitis. Scarlet fever seemed to be particularly prevalent, and there were frequent closures of schools owing to these epidemics.

The inspector's report book continues to give account of the attempt to improve the local public health well into the 20th century. It seems to have been the start of the Health and Safety laws familiar today.

Although with greater understanding of the causes of illness and the training of medical staff illnesses changed during the 18th Century and Plague became very rare throughout the country. Smallpox, Typhus increased. Epidemics of Measles, Scarletina, diphtheria and Tuberculosis could still ravage communities. Rickets, Whooping cough, kidney and bladder stone, and bad teeth were all common. The local schools could be closed for weeks at a time. In 1891 Arkengarthdale it was said to have hardly a household with children which had escaped whooping cough. The school was closed for a month. In 1907 it was closed for six weeks because of an epidemic of measles and flu and Typhoid. Scarlatina lasted for six months in 1878 and James Slack and May Alderson died. With this and the frequent absence of pupils through peat cutting, hay time, spring cleaning and local shows, the disruption caused for the teachers must have been extremely difficult.

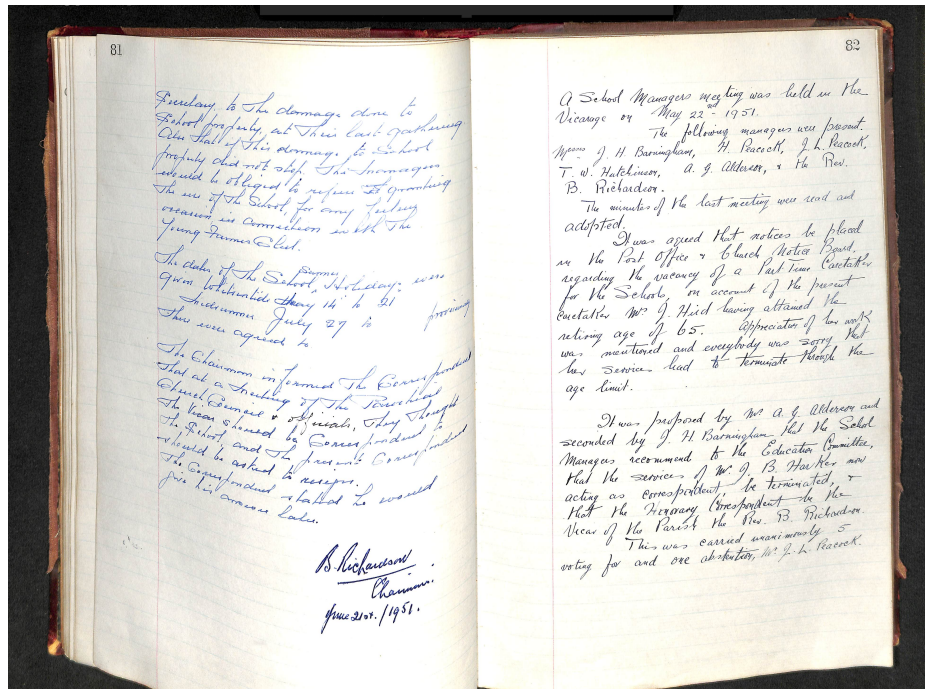
In September 1914 an epidemic of whooping cough also closed the schools, . These diseases continued till well within living memory.

The Upper Dales remained static for many years with poverty and ill health a constant threat. Life remained precarious right into the 20th century. A look into the school day books of Muker and Arkengarthdale, and Reeth schools indicates how illness and basic living standards were a constant anxiety.

SCHOOL LOG BOOKS

The headmasters of the local schools kept daily log books, which give one some idea of the continual disruption caused by illness well into the 20th century.

In 1890 the Arkengarthdale school reports that it was closed because of whooping cough for six weeks. Epidemics could cause as many children absent as 40%. The headmaster reports in the 1990s that "school numbers have decreased in this last fifteen months from 220 to 154 owing to the scarcity of lead and low wages.", an indication of how difficult life had become during the collapse of the mines, and how much poverty and sickness still prevailed.



In Reeth Friends School in 1905 there were many children absent with Flu, by February nearly "half the children away sick".

In 1906 there was an epidemic of measles which kept the schools closed for six weeks. In 1907 an epidemic of scarlet fever kept closures for a number of months.

A well known head of the Friends School in Reeth was Arthur Shepherd. He was keen on encouraging healthy outdoor activities, such as gardening and sport. One report mentions an unfortunate accident when a boy received a cricket ball in an eye which caused concussion. A similar accident occurred sometime later when a boy was hit on the head by a cricket ball. He was "taken to the doctor as a precaution". There seems to have been some wild bowling going on.

Margaret Batty in her book on Reeth, relates a near tragic accident when a small boy went rabbiting on a hill at night. He didn't return and a search party found him next day stuck in a rabbit hole with only his clogs visible. He survived.

The collapse of the lead mining industry with the huge rise in poverty during the 19th Century exacerbated the conditions for ill health and disease. In 1879 a correspondent in the Ripon Gazette wrote that in "Arkengarthdale miners are starving on half wages. Lost looking men, in ragged clothes, are roaming about for employment"

In 1818, Thomas Buxton, a miller in Gunnerside, who seems to have cared for his neighbours, met Stephen Dinsdale going to work at Old Gang, who said "Buxton, how can we endure this?" He had returned from work at night having no food all day and was going to work next day having had nothing to eat. Buxton sent his maid after him with part of an oatcake.

A report from Chris Buxton of Gunnerside tells of his midwife wife having attended Mrs Metcalfe at the birth of her sixth child. She said that the mother had nothing to wrap the baby in, nor even a blanket to cover herself. The other children were dressed in rags. A member of this caring family, she sent for a blanket from her own home.

(from William Spensley's 'An extensive History of Wensleydale mining industry')

SELF HELP in 20th Century.

Reeth Museum has two volumes owned by an unknown housewife. She (delinquent)ly pasted over a large account book which had belonged to John Clarkson in 1859. She stuck articles gleaned from available magazines and newspapers, possibly well into the 20th century. Better understanding of the causes of infections and epidemics, housewives in the area still relied on self-help. She has diligently pasted over the copper-plate ledger newspaper and magazine cuttings relating to household illnesses and health, rather than find outside medical help she could rely on the first aid advice given in print. The first article expresses a need for all young girls to attend basic classes of instruction on first aid needed in an emergency. They should know where to tie a bandage in the case of a cut artery, that hot water prevents congestion and the black and blue marks of a bruise when a toddler has bumped its head. They should know that washing a person suffering from consumption, with salt and water helps them sleep and sweat less. That in case of poisoning a drink of mustard and warm water will empty the stomach as soon as anything that can be ordered from an apothecary. It should be followed immediately by the white of an egg.

They should know that 'Toast water' cures a cough, how to make a poultice and administer an enema, knowledge of symptoms of children's diseases, how to cure worms and so on.

The articles go into all kinds of symptoms and cures, and must have been important for those seeking self-help rather than expensive treatment elsewhere.

Having obliterated Clarkson's account book, she then went on to decimate a book of sermons by a Mr Webb.

TWO TWENTIETH CENTURY DOCTORS.

Two notable and much loved Doctors served the communities in Wensleydale and Swaledale. The Dales were so close that because of the detailed records kept by Dr Pickles in Aysgarth I will give information about this redoubtable man, assuming that the illnesses he speaks of were also effecting Swaledale and Arkengarthdale.

Dr William Pickles settled for a lifetime as a GP in Aysgarth. By his interest in the spread of disease in his scattered practice he kept meticulous notes about his patients and their life styles. He became known worldwide as a distinguished epidemiologist, and lectured all over the world, including US universities such as Harvard.. He was heaped with Medical honours, but always remained the family Doctor in his Dale.

Dr Pickles discovered that the school mistress at West Burton in 1933 had struggled to school feeling unwell, on returning from a visit to Scarborough, and had infected 78 children with Flu. Several years later the village seemed immune from an outbreak of Flu in the surrounding villages. Conclusions were then made by the medical profession as to how long such an immunity could last, after an initial outbreak.

Dr Pickles pioneered discoveries about epidemics of infectious Hepatitis (Jaundice) He wrote articles in the British Medical Journal entitled 'Bornhom Disease: an account of a Yorkshire outbreak' He charted each day how infections were spreading. We know from a letter from Mrs Spence in Reeth to her daughter that "poor Mrs Hird is recovering from jaundice very slowly" as late as 1943. It seems her son also had the illness.

In 1939 , when WW2 broke out, there was an outbreak of diphtheria introduced by the arrival of evacuees. Dr Pickles minimised the spread in the locality by immunising all the local children, and since then there has been no similar outbreak. His book 'Epidemiology in a country practice' was well received ,and the advantage of a country GP in following developments of a disease in a sparsely populated country practice was encouraged as of medical importance.

Dr Pickles , reported that his father, also a GP, had in the 19th century found that endemic Goitres were common, however by his time he rarely came across this complaint and surmised that this was because there was an increase in the local diet of tinned fish, pilchards , sardines and herrings.



John Pemberton quotes him (in his Biography of the doctor) that a local cure to relieve pneumonia helped, if sponging with tepid water had not improved the patient, was to kill a rabbit, skin it, and wrap the effected side of the suffer's chest with the still warm rabbit's skin.

Whether Dr Pickles continued to use such cures as late as the mid 20th century, I don't know. He rarely mentions non- infectious deceases. Epidemics were still the major cause of death as they had been for centuries. Measles epidemics usually lasted about six months and Mumps could continue for a year, according to Dr Pickles. Such epidemics would reappear after as many as nine years. He seemed to endorse the idea that the supposed responsibility that illnesses were being spread in the Dales from places outside. Visits from relatives living in large cities, and by the 20th century holidaymakers, and Dales children going on school outings around the region, all could introduce disease to this isolated district.

One can safely assume that health in Swaledale will have been very much the same as a few miles over the hills in Wensleydale.

Dr Spiers of Reeth, served as doctor for fifty six years. The Sunday Express reported his retirement in 1968. He had ceased to be GP by then and was a public Health officer working in the district. He had been appointed the Poor Law doctor in 1907 and finally medical officer in 1928 There are many tales of Dr Spiers's exploits in Swaledale, often retold in the local press. At the beginning of the 20th Century he arrived in the Dale, having qualified in medicine in 1901 from London, Switzerland and Edinburgh. He replaced a Dr Packer. He performed operations locally (on the proverbial kitchen table!) some quite major. He extracted teeth and delivered babies. The first confinement he attended is said to have been at the birth of Tom Sayer at Bellerby, in 1907.

Initially he travelled to his patients on horseback, sometimes, even when he acquired a car, it was a better way to reach the remote farms in this wild district. There is the tale of one, sixteen year old Denis Raw in Ravenseat, who called for help from Dr T. Cocks in Hawes and Dr Gibson in Kirby Stephen. Neither could cross the the moors as it seems there was deep snow and a blizzard. Dr Spiers answered the call which involved his horse and a walk from Keld. On some occasions he had to spend the night away from home when called out on a winter's night in inclement weather. It is said that he was fairly casual about payment from his patients, and sometimes accepted a chicken or some ham instead of cash.

On one occasion he was performing in a village concert when he was called for a confinement in Low Row. He rode as far as Scabba Wath where he found the road flooded and had to detour via Kearton. He arrived for the birth but on his return he had crossed the river at Low Whittaside bridge

where unfortunately he lost his medical bag. The road between Grinton and Draycott Hall was flooded, but his horse managed to get across. Fortunately his bag was found next day.

RICHMOND



Although the town was within twelve or so miles of Reeth and the upper Dales, it is part of Swaledale. But its development and problems were very different. It was not dependent on the lead mining industry other than being a staging post for distribution elsewhere. It became a thriving little market town with a medieval citizenship of successful traders and some good housing, built around the Norman castle. The importance of the castle was itself fairly short lived, and houses were built within its walls. There developed a social hierarchy within the population, the markets became organised and taxes were levied, the control of vagrants staying in the town was attempted. However the town suffered badly during the Black Death and subsequent epidemics brought the town to a state of poverty, from which they overcame, unlike some other Yorkshire towns.

Prior to that raids from the Scots had harried the town. To stem these attacks the town had paid what we would today call 'protection money'. It is believed that half the population died in the 1350 plague. By then the town was crowded and disease was easily spread. An extra burial ground had to be created in Easby to accommodate all the dead.

In parts of the town it stank of rubbish and excrement. Animals and people lived together.

Some of the diseases in Richmond were different from those in the Dales, who suffered a great deal from lung and chest illnesses caused by the mining of lead. In Richmond there were gracious Georgian homes as well as districts of abject poverty with unsanitary and filthy housing. In 1587 at least 152 people were buried and 113 the following year, compared to 39 burials which was the

average number in previous years. Famine as well as disease contributed to early death and another two thirds of the population is said to have died of plague between August 1597 and 1598.

Where other small market towns languished, Richmond struggled on and finally became the focal point for a large rural area, from Upper Swaledale to the lowlands in the east. The weekly market and fairs serviced the surrounding area, and the upper Dalesmen sold their wool and bought corn to grind locally in the Dale's Mills.

For many years the town had descended into bad times and the period between the 14th and 16th centuries the castle fell into ruins with houses built within its walls. In spite of this the population slowly increased and trade continued. In 1588 the marketing for knitted goods made in the dales, made Richmond famous for the trade in woollen stockings, many of which were shipped to London and the Continent. One of the major sources of knitters were the many children who were paupers or became orphans in the Dales. They were knitters from the age of seven, and some were 'apprenticed to knit for seven years'. Whole families of Dales people, men, women and children spend hours knitting. Prepared wool was provided by travelling agents, who later collected the finished goods to sell in Richmond and surrounding towns. However by the end of the 18th Century knitting started to decline and this useful addition to a families' income gradually stopped.

Depending on the seasonal weather and foreign trade, by 1751 corn prices became so prohibitive, that, as already mentioned, the people of Wensleydale and Swaledale started demonstrating in Richmond. This displeased the wealthier townsmen who had the Riot Act read in the market place and arrested the ring leaders.

Gradually various crafts and industries developed in the town, including cloth making, leather and metal goods, and the town became the central point for the surrounding area, with contacts to the rest of the country denied to the rest of the upper Dales. The problems associated with ill health as mentioned were different from those further up the Swale. In the upper Dales development of contact with the outside world through professional and political people which was possible in the town, hardly existed in the poor communities further west. The construction of a railway gave far greater mobility to Richmond citizens, and although there were a number of plans to continue the railway up the dale, proposals that continued into the 20th Century, this was never achieved,

In 1834 with the amendments to the Poor Law all areas were effected. Initially Reeth became part of the Richmond Poor Law Union, a situation they fought, believing their rural problems to be quite different from those in the town and ultimately a separate Poor Law Union was formed in Reeth.

In 1872 the Public Health Act was passed and the local Richmond corporation became also the Urban authority for the borough and was responsible for appointing a medical officer, paid £30 a year. He reported that the health in the town was fairly good, although there were areas which were "filthy and insanitary". He described the stench in some districts as "unbearable" and he urged action. His complaints continued for years. One problem was the difficulty in finding anyone to empty the privies and ashpits "unless there was a cart load to remove", people simply tipped their rubbish into the Swale.

In 1881 London tried to ban pigs from the streets, and later trades such as "horse Flaying and tallow melting". The spread of disease gave added impetus to improve sanitation. Quarantines had been introduced on people and goods in some areas, and Pest Houses were created where diseased people were sent.

Richmond's Medical Officer struggled for years to get proper facilities for rubbish collection. It was not until the threat of a Cholera outbreak in 1892 that Richmond created a rubbish tip.



CONCLUSION

With the collapse of the lead mines those who remained in the Dales relied on their small farms and minimal local trade well into the 20th century.

Although by the 19th century life was changing in outlook over matters of health and education, things were slow to change in the dales. The opening of schools certainly widened the population's outlook. However, employment remained dependent on lead mining, which steadily declined during the 19th century. It is during that period that we have more specific written information about the lives of the dales people. We have a picture of a stoical people, faced with extremely hard basic living conditions and a struggle for survival when faced by poor health and unemployment. In spite of a reluctance to leave their home ground it became inevitable that there was no future remaining, and the population dropped by nearly 60% in the middle of the eighteen hundreds.

There were those who criticised the people for sticking to the old traditions of their forebears and not finding ways to improve their situation by leaving for work elsewhere. In Arkengarthdale, although some mines remained working longest, the population dropped from 1000 in 1851 to just about 427 in 1901.

The real change to their lives occurred after the second World War when free education became universal, opportunities to mechanise farming made for far less intensive labour in the form of family members and the seasonal hire of Irishmen. This led to a widening of horizons for the younger men and women who gained educational qualifications and found employment out of the Dales. With the advent of the Welfare State, where not only educational opportunities opened up, but where medical provision and pensions became universal, and subsidies in support of farming assisted during hard times, things changed. The hard struggle of life in the Dales at last diminished. Readily available medical services and hospitals became accessible, although the latter at some distance. The population became mobile with privately owned transport, and life became rapidly

integrated with the rest of Britain. As many younger people left for education and careers beyond farming, others moved into the area. With greater mechanisation farm land was taken in by smaller farms and empty houses were sold for retirement or holiday homes,. The life of the Dalesmen and women is today hardly recognisable from that of those living previously during centuries of hardship and isolation which they had faced with such tenacity.

The diseases so common and crippling, still just within living memory, which must have led to constant anxiety, are hardly heard of today. In particular, TB, measles ,Scarlet fever, and other “childhood” illnesses. We expect good health and usually receive it thanks to medical care available to us all. The discovery of antibiotics and the forming of the National Health Service after WW2, dramatically changed life in the dales. Doctors, such as Dr Spiers, visited villages by car, hospitals became accessible. Life expectancy almost doubled, partly, of course, because of the closing of the mines. Mothers survived child birth, and infant deaths became uncommon. Even in 1900 infant mortality was 142 per 1000 (and one in seven died in their first year). In 1898 thirteen thousand people died of measles in England and Wales, and in 1991 there were only two deaths.

Those families whose predecessors emigrated at the collapse of the lead mines still return to visit the Dales ,feeling a deep-rooted connection with the place, where their ancestors had struggled through hard, and occasional good times. As part of a National Park the physical changes which have in some areas aesthetically altered the country side adversely, have not effected the dales ,where the beauty of it's hills and buildings remain to be appreciated by the local population and it's visitors.

Acknowledgements.

For the historical background here I have used not only information gleaned over many years from many sources, but I have delved into many written accounts, some of which I acknowledge in the text, and others I list here.

The most comprehensive history of the two Dales is surely Fieldhouse and Jennings “A History of Richmond and Swaledale”, also written accounts of the mining industry by Arthur Raistrick. I have found accounts in many books which helped my understanding of the hard lives endured by our forbears in this remote area.

Undoubtedly there may be other sources, such as reports in Quarter Session reports, the Press Manorial minutes, and family papers and letters, where references to illnesses might be found. The reticence to mention specific diseases in much that I have looked into suggests a great deal more work needs to be done.

NYCRO. Muker Select Vestry minutes .

“ Dr Kernot's Case book.

“ Local Coroner's reports.

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Urban Sanitary Authority minute book.

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Elsie Thompson.“Those hundred yesterdays”
Grinton and Muker Church records.
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T.Bagenal. “History of your house”
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Darlington and Stockton Times, and other newspaper reports.

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