

English Peasants and Medieval Miracle Lists

By

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A perennial problem in establishing an image of medieval peasants is the effect of filtering over the succeeding centuries, with the peasant seldom allowed to speak for himself. Furthermore, our images are usually those created by various elites. One way to address this problem is to review the lists of miracles compiled as part of the canonization process. Such an examination offers historians a rare and valuable insight into the mind of the English peasant.

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Miracle lists are primarily sources of information about medieval Christianity, but there are also other uses. While individual miracles reveal a good deal about peasant society as a whole, they tend to be most valuable in regard to health problems, as well as parent/child and male/female relations. Studying peasant medicine through miracle lists is in some ways more rewarding than looking at the activities of physicians and surgeons, for the lists enable us to focus on disease and other medical problems rather than the practitioners themselves.

Miracle lists are an imperfect source for viewing peasant culture for two reasons. The first is the ever-present problem of someone other than the peasant recording what the peasant said about his or her problems. The second is the role of the hagiographer who was trying to present a case for the canonization of his saint. Hagiographic bias affected miracle lists less, especially after the twelfth century, than the recordings of individual saint lives, many of which have conventional characteristics. Compilers usually recorded what they heard even if they had doubts about the validity of a miracle. They desired to chronicle miracles involving the powerful, for these helped to glorify their saints, but

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because of their concern with numbers they noted all reported miracles involving their saints. While no one can be sure of the social status of miracle recipients, it is safe to assume that most came from humble backgrounds. Because some of the descriptions of miracles are brief or lack discussion of the social class of the recipients, assigning social class is risky. R. C. Finucane's estimates may be too precise, given the problems of the data, but his figures and a reading of the miracle lists indicate that approximately two-thirds of the miracle recipients came from the peasantry and urban poor.¹ Unless otherwise noted, all specific miracles discussed in the text involved peasants.

In spite of efforts to define peasantry as used in a medieval context the term remains subject to debate. R. H. Hilton's definition of the peasantry is perhaps the best, for he recognizes the gradations within rural society, although he excludes urban dwellers, who shared much of the same social and religious sophistication.² In an effort to embrace a broader definition the term here includes both Hilton's rural dwellers and the urban poor. Additional research may show this to be an overly expansive definition for it includes everyone from the wealthy villager to the poor cotter and from the day laborer with a regular job to the scavenger in the city.

Part of the problem concerning miracle lists comes from the reason for their production. Clerics compiled these lists as evidence of saintliness and tended to follow a formulaic style. Early miracle lists involved literary effort as much as sober retelling of the facts. Some of St. Edward the Confessor's miracles cured people, while others provided visions, such as one of King Svein of Denmark drowning as he prepared to invade England.³ Most later miracle lists recited dry medical facts of the case, although occasionally other information emerged. This change from the high-flown to the mundane came as the Church gained control over the canonization process and the recording, presentation and investigation of miracles came to be a quasi-legal

¹R. C. Finucane, *Miracles and Pilgrims* (Totowa, N.J., 1977), 143. While the miracles Pierre-André Sigal used are more forthcoming as to social class of the recipients, such is not true for the ones used here. See Sigal, *L'homme et le miracle dans la France médiévale (XI^e-XII^e siècle)* (Paris, 1985), 293-310.

²R. H. Hilton, *The English Peasantry in the Later Middle Ages* (Oxford, 1975), 3-19. For a view that emphasizes the collective nature of peasant society, see Henri Mendras, "Un schema d'analyse de la paysannerie Occidentale," *Peasant Studies Newsletter* 1 (1972): 79-93, 126-44.

³Osbert of Clare, "La Vie de S. Edouard le Confesseur par Osbert de Clare," ed. Marc Bloch, *Analecta Bollandiana* 41 (1923): 75-77.

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procedure.⁴ Miracle lists continued to be more than proof of a saint's miraculous power; they also provided readers with moral lessons, some expressed in only a few miracles, with others simply a recitation of problems the saint had cured.

A miracle list presents three layers of truth to those who use it as evidence concerning peasant society. First, there is the truth of the persons involved with the miracles. Although some may have had a self-serving motive in describing a miracle, most believed their cures genuine. The compiler's truth comprises the second layer. Compilers generally recorded all miracles involving their saint, no matter how implausible. Some voiced their suspicions, as did Benedict of Peterborough when he questioned the cure of a mute who, upon regaining the ability to speak through St. Thomas Becket's intercession on Easter Sunday 1171, immediately asked for wine.⁵ Because the document would be subject to rigorous scrutiny, compilers tried to be as accurate as possible. A few unintentional errors notwithstanding, the basic information concerning cures depicted the informant's story with accuracy. Moral asides or criticism of the medical profession came from the compilers, not the recipients.

Finally, there is the third layer, the historian's truth—what should be accepted as true? Under the canons of modern social science, miracle lists cannot be subjected to rigorous examination, nor do they need to be. In a study of folk attitudes, miracles can be accepted as evidence if people perceived them to be true. The historian's truth is an all-embracing one that must accept folk attitudes on their own terms. Both contemporaries and historians could trace Edward the Confessor's dream that foretold the future to a prevailing literary convention. Contemporaries regarded a saint's miraculous cures as emanating from his ability to intercede with God, and historians must accept this evidence at face value.

The miracles to be examined involve a cross section of canonized and uncanonized English saints from the eleventh through the fifteenth centuries. These 1575 miracles are compiled from the lists of the miracles of Earl Waltheof of Northumbria (11th century), St. Edward the Confessor (11th-12th centuries), St. Thomas Becket (12th century), William of Norwich (12th century),

⁴E. W. Kemp, *Canonization and Authority in the Western Church* (London, 1948), 88-140. Stephan Kuttner, "La Réserve papale du droit de canonisation," *Revue historique de droit français et étranger*, 4th ser., 17 (1938): 172-228. Michael Goodich, *Vita Perfecta: The Ideal of Sainthood in the Thirteenth Century* (Stuttgart, 1982), 21-47.

⁵Benedict of Peterborough, in *Materials for the History of Thomas Becket*, ed. J. C. Robertson, 7 vols., Rolls Series, 67 (London, 1875-85), 2: 57.

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Earl Simon de Montfort (13th century), St. Thomas of Cantilupe (13th-14th centuries), Archbishop Robert Winchelsey (14th century), and King Henry VI (15th century).⁶ With the exception of William of Norwich, the sample includes no peasant saints, but, as historians Donald Weinstein and Rudolph Bell have shown, peasant saints numbered only a handful in the Middle Ages.⁷ Only three of these saints were canonized. Three of the remaining uncanonized saints—Simon de Montfort, William of Norwich and Henry VI—had widespread cults.

In his discussion of popular sainthood André Vauchez (echoing the earlier work of Josiah Cox Russell) points out that several medieval cults, such as Simon de Montfort's, evolved from political opposition to the king.⁸ All of the cults examined here, except that of William of Norwich, could fall into that category. The person who invoked Simon de Montfort's or Waltheof's aid showed less concern with high politics than with obtaining help. Since political stimulation of a cult did occur, the authors of the *vitae* may have been exercising political motives. Most peasants, however, lacked the sophistication necessary to venerate a particular saint for political reasons.

Good health always constitutes a major concern in all peasant societies, medieval England being no exception. A combination of hard work, inadequate diet and the lack of medical practitioners led medieval Englishmen to seek other means of attaining good health. Physicians, surgeons and cunning men all plied their

⁶The sources for the miracles follow. Edward the Confessor: Osbert of Clare, "Edouard le Confesseur," 5-131, and Ailred of Rievaulx, "Vita S. Edwardi regis," in *Patrologiae cursus completus: Patrologia latina*, 221 vols., ed. J. P. Migne, (Paris, 1855), 195: cols. 739-90; Earl Waltheof: *Original Lives of Anglo-Saxons and Others who Lived before the Conquest*, ed. J. S. Giles, Caxton Society, 16 (London, 1854), 23-30; Thomas Becket: William of Canterbury and Benedict of Peterborough, in *Thomas Becket*, vols. 1 and 2, respectively; William of Norwich: Thomas of Monmouth, *The Life and Miracles of St. William of Norwich*, ed. and trans. A. Jessopp and M. R. James (Cambridge, 1896); Simon de Montfort: *The Miracles of Simon de Montfort*, ed. J. O. Halliwell, Camden Society, O.S., 15 (London, 1840); Thomas of Cantilupe: Ms. Vat. Lat. 4015, fols. 123-45, and *Acta Sanctorum*, "October" (Paris, 1866), 1: 609-61; Robert Winchelsey: *Concilia Magnae Britanniae et Hiberniae*, 4 vols., ed. David Wilkins (London, 1737), 2: 487-90; and Henry VI: *Henrici VI Angliae regis miracula postuma*, ed. Paul Grosjean (Brussels, 1935).

⁷Donald Weinstein and Rudolph M. Bell, *Saints and Society* (Chicago, 1982), 197. Goodich also makes the point in "A Profile of Thirteenth-Century Sainthood," *Comparative Studies in Society and History* 18 (October 1976): 432-34.

⁸André Vauchez, *La sainteté en Occident aux derniers siècles du Moyen Age* (Rome, 1981), 173-83. Josiah Cox Russell, "The Canonization of Opposition to the King in Angevin England," in *Anniversary Essays in Medieval History*, ed. C. H. Taylor (New York, 1929), 279-90.

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trade, but many ailments remained untreatable.⁹ To seek aid through saintly intermediaries became natural to those people who regarded God as the source of all healing. While the Church may not have intended that the cults cure people, for many they became a viable means of healing.¹⁰

Saintly medicine, instead of (or in addition to) other remedies, took many forms. Some people chose the invocation of a saint after all else had failed, while others tried this remedy first. Also, unlike some of their continental counterparts, English saints were general practitioners rather than specialists aiding only one type of ailment.¹¹

What ailments, then, did people call upon the saints to cure? Accidental death, especially from drowning, was common in medieval society. When young Margaret Denys fell into a fishpond, a quick-thinking passerby pulled her out. She regained consciousness after her parents invoked the aid of "holy Henry VI" and the Virgin.¹² As Barbara Hanawalt has shown, open wells and pools of water invited disaster, and the miracle lists depict the suddenness and frequency of drownings.¹³ In reporting these and other deaths of unattended children, such as strangulation and falls, the anguish of the parents becomes evident as they struggled to revive the child.¹⁴ Overall, sixteen percent of the

⁹Vern L. Bullough, *The Development of Medicine as a Profession* (New York, 1966); Charles H. Talbot, *Medicine in Medieval England* (London, 1967); Talbot and E. A. Hammond, *The Medical Practitioners in Medieval England* (London, 1965); John M. Riddle, "Theory and Practice in Medieval Medicine," *Viator* 5 (1974): 157-84; Stanley Rubin, *Medieval English Medicine* (Newton Abbot, England, 1974); *Medieval Medicus* (Baltimore, 1981); Carole Rawcliffe, "Medicine and Medical Practice in Later Medieval London," *Guildhall Studies in London History* 5 (1981): 12-25; Robert S. Gottfried, "English Medical Practitioners, 1340-1530," *Bulletin of the History of Medicine* 58 (Summer 1984): 165-82; and Gottfried, *Doctors and Medicine in Medieval England, 1340-1530* (Princeton, 1986).

¹⁰The theory and practice of miracles is discussed in Benedicta Ward, *Miracles and the Medieval Mind* (Philadelphia, 1982), 3-32. Sigal emphasizes the attitude of viewing the saint as a continuation of the healing ability traced back to Christ and the Apostles in *L'homme et le miracle*, 32-35. Some hagiographers tried to minimize the miracles and emphasize the holy life of the saint. Goodich, "A Note on Sainthood in the Hagiographical Prologue," *History and Theory* 20 (1981): 168-74.

¹¹Jean Fournée, *Le culte populaire des saints en Normandie* (Paris, 1973), 12; William A. Christian Jr., *Local Religion in Sixteenth-Century Spain* (Princeton, 1981), 93-94.

¹²*Henrici VI Angliae regis miracula postuma*, 176-78.

¹³Barbara A. Hanawalt, *The Ties That Bound* (New York, 1986), 27.

¹⁴*Miracles of Montfort*, 72. *Henrici VI Angliae regis miracula postuma*, 141-43. *Acta Sanctorum*, "October" 1: 626-28.

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recorded miracles involved recoveries from death, with nearly a quarter of such miracles ascribed to Henry VI. (See table.) People often regarded saints as their first line of defense in emergencies, although they usually coupled the invocation of a saint to other actions.

The invocation of saintly assistance in cases of accidental death is not surprising, for in an emergency people sought any possible source of aid. Less likely than other members of society to have access to a medical practitioner, peasants found that praying for a miracle often offered the only remedy available. Even when the victim may have been merely stunned, revival following the invocation of a saint showed a clear cause-and-effect relationship to concerned bystanders.

On the other hand, saints also became the last resort in medieval England for long-term problems, such as those arising from birth defects. Hard work and poor diet produced a variety of arthritic ailments that led to gradual crippling, while poor diet and smoky interiors contributed to numerous cases of blindness.¹⁵ Sainly healing cured twenty-one percent of the cases of long-term crippling and eleven percent of blindness. The two eleventh-century saints, Edward the Confessor and Earl Waltheof, specialized in eye problems, while one-third of Simon de Montfort's and Thomas of Cantilupe's miracles involved cures of chronic ailments of some sort. His left side crippled, a young man from Warwick sought medical attention but his ailment worsened and sores broke out on his body. The compiler reported the man's subsequent cure, once he sought the help of Thomas of Cantilupe.¹⁶ People often resorted to the saints after other treatment had failed, and some sufferers even traveled from one saint's tomb to another in search of a cure. Matilda, a woman crippled from birth, finally gained the ability to walk at William of Norwich's tomb after having visited many other shrines.¹⁷

Paralysis, blindness and other ailments such as ulcers, headaches and limb pains could be psychological as well as physiological in nature.¹⁸ For example, while saying mass one day, a

¹⁵Sources pertaining to peasant diet are scarce, but it seems that even though protein deficiency lessened after the fourteenth century, periods of famine still hurt people at the bottom of the social pyramid most. See Hilton, *A Medieval Society* (London, 1966), 110-13, and Christopher Dyer, "English Diet in the Later Middle Ages," in *Social Relations and Ideas*, ed. T. H. Aston et al. (Cambridge, 1983), 194-216.

¹⁶*Acta Sanctorum*, "October" 1: 663.

¹⁷Thomas of Monmouth, *St. William of Norwich*, 272-74.

¹⁸J. J. Groen, "Emotional Factors in the Etiology of Internal Disease," in *Psychosomatic Research*, ed. J. J. Groen (New York, 1964), 6. Sainly healing

CURES ATTRIBUTED TO MEDIEVAL SAINTS

	Waltheof	Edward the Confessor	Becket	William of Norwich	Montfort	Canlupe	Winchelsey	Henry VI	Percentage of Total	Number of Cases
Death			13.0%	9.0%	18.0%	18.0%	12.5%	24.0%	16.0%	250
Wounds and Broken Bones			5.5		5.0	3.0	6.0	13.0	5.0	81
Blindness	67.0%	43.0%	11.0	7.0	6.0	14.0	6.0	6.0	11.0	173
Deafness	12.5		1.5	2.0	1.0	2.0		1.0	1.0	23
Fever		21.0	2.0	3.0	4.0	1.0		2.0	2.0	33
Stomach Ailment			3.0	2.0	4.0	2.0		1.0	3.0	42
Pregnancy			2.0	1.0	2.0	1.0		1.0	1.0	21
Insanity and Epilepsy	12.5		5.0	13.0	3.0	5.0	44.0	7.5	6.0	96
Skin Diseases		7.0	6.0		1.0			1.0	3.0	41
Continuing Ailments and Crippling	12.5	21.0	11.0	27.0	35.0	32.5	12.5	9.0	21.0	333
Miscellaneous Ailments	12.5	7.0	20.0	13.0	10.5	7.0	12.5	14.0	14.0	214
Unknown Ailments			5.0	12.0	6.0	8.0		15.0	7.0	107
Lost Objects			3.0	1.0				6.0	2.0	29
Miscellaneous			11.0	10.0	4.0	7.0	6.0	7.5	8.0	132
PERCENTAGE OF TOTAL	1.0	1.0	38.0	7.0	12.0	29.0	1.0	11.0		
NUMBER OF CASES	12	14	600	106	191	462	16	174		1575

SOURCE: See footnote 6.

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priest of Wells lost his vision and the ability to speak. After his parishioners invoked Simon de Montfort's aid, he regained both faculties.¹⁹ Because the priest had supported the earl, the invocation of Simon may have helped to resolve an inner conflict, which then led to recovery. Saints could undoubtedly deal with psychosomatic ailments better than physiological ones. A person who felt guilty of a sin might develop physical symptoms, and a saint could help the victim expiate some of the guilt. Sainly healing was effective in other cases, as well. Preparing to go on a pilgrimage sometimes improved a person's outlook so that healing occurred more readily. A girl whose condition improved in stages as she traveled from Austrey in Warwickshire to Canterbury had regained total health by the time she reached St. Thomas Becket's shrine in Canterbury.²⁰ Such problems were not regarded as mental ailments in the Middle Ages. The definition of mental disease included only obvious signs of dementia.²¹ Because people often considered the mentally ill to be possessed by the Devil, the invocation of saintly assistance seemed to be a proper treatment. John Dunselyn of Stanes repeatedly saw visions of demons until he invoked Thomas of Cantilupe's aid.²² This narrow definition of mental disease explains why only six percent of the miracles in the sample recorded cures of insanity.

The cure of psychosomatic ailments explains only part of the success of saintly medicine. The recurrence of problems with social relationships in small village communities may have led to such stress-induced conditions as ulcers. Taking part in a pilgrimage to a saint's tomb often proved efficacious in such a situation. Since the ill person would leave the village for a time and return transformed, it appears the act of leaving may have

could be particularly effective in treating paralysis caused by nerve disorders, since little information existed about paralysis in general. Sigal, "Comment on concevait et on traitait la paralysie en Occident dans le Haut Moyen Age (Ve-XIIe siècles)," *Revue d'histoire des sciences* 197 (1971): 193-211. See also R. Kaebbling, "Comparative Psychopathology and Psychotherapy," *Acta Psychopathologica et Psychosomatica* 9 (1961): 10-28. For two different, suggestive approaches to faith healing see Jerome D. Frank, *Persuasion and Healing*, rev. ed. (New York, 1974) and James Dow, "Universal Aspects of Symbolic Healing: A Theoretical Synthesis," *American Anthropologist* 88 (March 1986): 56-69.

¹⁹*Miracles of Montfort*, 96.

²⁰Benedict of Peterborough, in *Thomas Becket*, 167-68.

²¹For a discussion of mental illness in the Middle Ages see: Penelope B. R. Doob, *Nebuchadnezzar's Children* (New Haven, 1974); Judith S. Neaman, *Suggestion of the Devil* (Garden City, N.Y., 1975), and Basil Clarke, *Mental Disorders in Earlier Britain* (Cardiff, 1975).

²²*Acta Sanctorum*, "October" 1: 647.

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helped to resolve the social problem that caused the illness. Becoming a pilgrim set the person off from the rest of society, thus improving his self-image; leaving the village gave social conflicts a chance to settle and removed a source of stress from the pilgrim's life.

Two other types of ailments were also good candidates for saintly assistance. People perceived that problems such as toothaches or wounds could be cured through the invocation of a saint. A monk of Norwich whose whole face swelled from a toothache obtained relief after touching his face to young William's tomb, while Henry Fromby invoked Henry VI's aid and recovered from being stabbed in the stomach in June 1490.²³ As with revivals from the dead, the peasant saw a clear cause-and-effect relationship between cure of these ailments and invoking a saint's help. Other more serious ailments, such as rheumatoid arthritis and scrofula, were subject to periods of remission. Alicia of Hereford walked with a stick for five years, but was able to discard it after being "measured" to Simon de Montfort.²⁴ Lacking any follow-up investigation, it cannot be ascertained if Alicia continued to walk without a cane. Scrofula, or the King's Evil as it was known in medieval England, showed periods of remission in which the pustules diminished in size and number, helping to explain the success of English monarchs as healers of this ailment. The imprecision of medical knowledge led many to diagnose scrofula and other skin diseases such as scabies, eczema and psoriasis as leprosy. This is not to deny the prevalence of leprosy in medieval society, a disease all too common.²⁵ Agnes' leprosy returned after her pilgrimage to St. Thomas Becket's tomb at Canterbury, alleged William of Canterbury, because she had left the tomb too soon after being cured.²⁶ Its reappearance after a period of remission suggests that Agnes suffered from something other than leprosy.

People also sought assistance from the saints for other needs, such as help in finding lost objects or animals, stopping barrels of wine from leaking and delivering prisoners from unjust imprisonment. While "St. Richard" [Scrope], archbishop of York, helped extinguish a blazing church, St. Thomas Becket's retrieval of a

²³Thomas of Monmouth, *St. William of Norwich*, 129. *Henrici VI Angliae regis miracula postuma*, 56.

²⁴*Miracles of Montfort*, 72. Measuring a person involved taking his measure and then pledging a gift of wax equal to his height to a saint's tomb.

²⁵For leprosy, see Saul N. Brody, *The Disease of the Soul* (Ithaca, 1974). For scrofula, see Marc Bloch, *The Royal Touch*, trans. J. E. Anderson (London, 1973).

²⁶William of Canterbury, in *Thomas Becket*, 216-17.

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lost pig may have been far more important to the peasant.²⁷ From the life-threatening to the ridiculous, the saints delivered for the asking.

Or did they? Compilers tended to overlook failed attempts at cures yet evidence suggests that God did not always show mercy. After invoking the aid of St. Thomas Becket a man obtained only partial use of a crippled hand.²⁸ Another man, cured of a skin ailment after asking Becket's help, suffered a recurrence. William of Canterbury attributed the return of the disease to the man's sinful life, although he acknowledged that the man obtained a lasting cure after he repented and sought St. Thomas' pardon.²⁹ There are even a few reported instances of saintly failure. A crippled boy from Lincoln, gaining no relief from the aid of St. Robert of Lincoln (probably Robert Grosseteste) turned to Simon de Montfort for successful treatment.³⁰ Excuses such as a person's sinfulness or beseeching a saint's help in an improper fashion served to rationalize a failure. Even though St. Robert of Lincoln failed to aid the crippled boy, Simon de Montfort's subsequent success preserved the effectiveness of saintly medicine. Rarely would the custodian of a tomb admit that his saint had failed. Aware of this problem, the clerical authorities from the fourteenth century onward included in the canonization process an investigation of the reputed saint's miracles. This could be a time-consuming procedure, as in the investigation of the cult of Thomas of Cantilupe in 1307. The papal investigators could reexamine only seventeen of Thomas' several hundred miracles.³¹ Peasants more quickly rationalized cures that did not last than did papal investigators, saying that the saints did not always hear people's prayers.

Even if not correct doctrine, peasants perceived saints as powerful figures with the ability to cure. While they assumed that the saints exercised power in a benevolent fashion for the most part, peasant shrewdness recognized that it could be exerted in a negative fashion. Some saints were vindictive, punishing those who had offended against them. John Robins, for example, became blind after he insulted the memory of Henry VI, recovering

²⁷*Eulogium chronicon*, ed. F. S. Hayden, 3 vols., Rolls Series, 9 (London, 1858-1863), 3: 407. William of Canterbury, in *Thomas Becket*, 464.

²⁸William of Canterbury, in *Thomas Becket*, 539.

²⁹*Ibid.*, 431-32.

³⁰*Miracles of Montfort*, 71.

³¹For analyses of the investigation see Finucane, *Miracles and Pilgrims*, 173-88; A. T. Bannister, "The Hereford Miracles," *Woolhope Naturalists' Field Club Transactions* (1902-1904): 377-83; and Vauchez, *Sainteté en Occident*, 633-47.

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only after he vowed to visit Henry's tomb.³² Denying the virtuous character of a saint brought almost certain punishment, as it did to a Norman monk who called Earl Waltheof a traitor, only to sicken and die.³³ Orderic Vitalis' depiction of the monk's punishment, while a literary device, reflects the view of the saint as a figure of power. Perhaps because of his imperious nature, St. Thomas Becket provides a good example of this point. William of Canterbury reported that St. Thomas punished a French woman and the son of a priest because their attitudes conflicted with his.³⁴ Since it is doubtful that the compilers of the miracles of Henry VI or Thomas Becket made up these accounts, the lists tend to reflect popular attitudes toward the saints. Robins may have felt such remorse for his insult that he developed hysterical blindness, but here, as is true in the other instances, the saint received credit for the ability to punish his enemies. Peasants saw saints as temperamental beings who could dispense both good and harm, and even, as in the case of Henry VI, forgive their enemies.

In spite of the above problems people continued to resort to saintly medicine as a supplement to, and in lieu of, regular medicine, except for one major ailment: the plague. Although they tried to explain, treat and prevent it, many physicians regarded the plague as divinely inspired and advocated prayer as the remedy.³⁵ Surprisingly, the role of saintly medicine did not expand to meet this problem. If the miracles of Henry VI are any indication, few called on English saints for aid. Henry protected Thomas Syman and eleven others in his house when the plague struck Farlington, Hampshire, in 1488 because they had earlier invoked his assistance.³⁶ Avoiding the plague differed from being cured and, as Robert Gottfried reminds us, the plague did not account for all outbreaks of epidemic disease in the fifteenth century.³⁷ Perhaps people turned to old stalwarts such as St. Thomas Becket or the Blessed Virgin for help. On the continent people often called on St. Sebastian for assistance and from the

³²*Henrici VI Angliae regis miracula postuma*, 133-38.

³³Orderic Vitalis, *The Ecclesiastical History of Orderic Vitalis*, ed. Marjorie Chibnall, 6 vols. (Oxford, 1969-1981), 2: 348-49.

³⁴William of Canterbury, in *Thomas Becket*, 519, 526. The list of miracles examined here contains few examples of saintly punishment of scoffers or malefactors, unlike the list examined by Sigal, *L'homme et le miracle*, 276-79.

³⁵Darrel W. Amundsen, "Medical Deontology and Pestilential Disease in the Late Middle Ages," *Journal of the History of Medicine* 32 (October 1977): 403-21.

³⁶*Henrici VI Angliae regis miracula postuma*, 24-25.

³⁷Gottfried, *Epidemic Disease in Fifteenth Century England* (New Brunswick, N.J., 1978), 62.

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late fourteenth century onward St. Roch became known as a plague saint.

If a completely functional interpretation is adopted, new saints should have been created in the late fourteenth and early fifteenth centuries in response to outbreaks of the plague, but this did not happen. People may have invoked other saints, but because compilers did not report failures these invocations went unrecorded. If the contributions to the tomb of St. Thomas Cantilupe are any indication, the income of some shrines declined in the fourteenth century, hardly evidence of pilgrims who had successfully invoked their aid.³⁸ People usually called on the saints to prevent the onset of the plague, rather than to cure it. Finding the saints as ineffectual as other means when it came to coping with the plague, many appear to have resigned themselves to the disease as divine vengeance impossible to counter by any means.

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In a happier realm, miracle lists help to confirm some of Barbara Hanawalt's conclusions, contra Philippe Aries, regarding a strong parental regard for their children.³⁹ Miracles involving children comprised twenty-six percent of the sample, while two-thirds of revivals from the dead involved children. Left unattended, a small boy fell into a drain and nearly drowned. The parents invoked saintly assistance by "measuring" the boy to Simon de Montfort and promising a penny to the earl's tomb.⁴⁰ Most of the cures of children involved emergencies in which a parent sought saintly assistance usually while trying other remedies. While parental attitudes, or guilt about leaving a child unattended, cannot be ascertained, what emerges from the miracle lists is a genuine love for children that led parents to employ any remedy to preserve the life of a child. Many, but not all, parents delivered in person the measure of wax equal to the height of the child as did the parents of little Nicholas when they made the short trip from their home along the Wye to St. Thomas Cantilupe's tomb in Hereford.⁴¹ The substantial number of children revived through saintly invocation helps to explain England's position as a country of children, many of whom failed

³⁸W. Nigel Yates, "The Fabric Rolls of Hereford Cathedral, 1290/1 and 1386/7," *National Library of Wales Journal* 18 (1973): 79-86.

³⁹Hanawalt, *Ties that Bound*, 171-87, and Philippe Aries, *Centuries of Childhood*, trans. Robert Baldick (New York, 1962), 128.

⁴⁰*Miracles of Montfort*, 74.

⁴¹*Acta Sanctorum*, "October" 1: 618-20.

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to reach adulthood. Childhood was a dangerous time in which children fell into streams and dry moats or had walls fall on their cradles.⁴² While the aforementioned children survived, many young victims of accidents and disease were not so fortunate. What surfaces in the miracle lists illustrates a concern with preserving the lives and health of children, thus humanizing the demographic approach.

Parental concern for children's welfare did not give rise to a children's saint in medieval England. Except for Edward the Confessor's miracle list which contains only adult names, the lists of other saints vary from a low of nineteen percent children (Robert Winchelsey) to a high of thirty-three percent (Thomas of Cantilupe and Waltheof). Although little William of Norwich accounts for more cures of children (twenty-nine percent), he was not solely a children's saint. Just as no medical specialists existed among the English saints, there seem to have been none that people regarded as particularly helpful in aiding children. Turning this relationship around, it can be seen that people called upon all types of saints, from peasant children (William of Norwich) to austere bishops (Thomas of Cantilupe) to kings (Henry VI) for help with their children's ailments, emphasizing the general practitioner status of English saints.

Miracles involving children tended to occur near saints' tombs. Although an overall figure of twenty-six percent of the miracles involved children, thirty-four percent of all the miracles involving people living within twenty miles of the tomb involved children.⁴³ Records show fifty-four percent of miracles involved children from fifty miles or less away, in contrast to only forty-seven percent of adult miracles for this same distance.

A lack of specificity can also be found in the sexual distribution of miracles. The sample presented here contains no female saints, as few existed in medieval England.⁴⁴ This may help explain why sixty-eight percent of the miracles involved men, although other factors also played a role. Compilers, trying to present their saints in as favorable a light as possible, may have considered miracles involving men better evidence of saintly virtue than miracles affecting women. Male prejudice also excluded women

⁴²*Concilia* 2: 488; *Acta Sanctorum*, "October" 1: 626-28; William of Canterbury and Benedict of Peterborough, in *Thomas Becket* 1: 206-207 and 2: 252-53, respectively.

⁴³Thirty-seven percent of the miracles involving children occurred within the twenty-mile distance which the compilers measured from the person's residence to the tomb.

⁴⁴For the question of the number of women saints see Weinstein and Bell, *Sanctity and Society*, 220-38.

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from shrines. In the early twelfth century Symeon of Durham boasted that no woman had ever been admitted to the shrine of St. Cuthbert in Durham Cathedral, while in the fifteenth century John Capgrave asserted that female lewdness caused their exclusion from many shrines in Rome.⁴⁵ The dangers of travel may have also inhibited women from visiting a saint's tomb, or they may have resorted to the Blessed Virgin or St. Anne. An examination of the distribution of the miracles supports the former explanation. Women comprised thirty-two percent of the cures, but they accounted for forty-four percent of the miracles within twenty miles of the shrine.⁴⁶ At a distance of fifty miles, fifty-nine percent of the miracles involved women while only forty-three percent of the male miracles were tabulated at that point. While the invocation of "women's" saints cannot be ruled out, this distribution seems to indicate that women experienced less mobility than men.

Medieval women could turn to midwives and cunning women for help during pregnancy, but they had to resort to male physicians and surgeons, the eleventh-century Trotula notwithstanding.⁴⁷ Their saints also seem to have been men. In some cases, a man invoked a saint's aid for his wife, such as when he gave her a cup of holy water in which a fern from William of Norwich's tomb had been placed to enable her to give birth to a child. In addition, men may simply have been more inclined to call upon a male saint.⁴⁸ In any case, this demonstrates a husband's concern for his wife as well as a desire for children.

⁴⁵Symeon of Durham, "Histora de sancto Cuthberta," in *Symeonis monachi opera omnia*, ed. Thomas Arnold, 2 vols., Rolls Series, 75 (London, 1882-1885), 1: 95; John Capgrave, *Ye Solace of Pilgrimes. A Description of Rome, circa A.D. 1450*, ed. C. A. Mills and H. M. Bannister (London, 1911), 71, 440-41. Women were also prohibited from some shrines for fear that they would be injured by the press of the crowd. See Jonathan Sumption, *Pilgrimage* (Totowa, N.J., 1975), 262-63.

⁴⁶Forty percent of the total number of cures of women came from the twenty-mile-and-less category.

⁴⁷Eileen Power, "Some Women Practitioners of Medicine in the Middle Ages," *Proceedings of the Royal Society of London* (1921): 20-23; Muriel Joy Hughes, *Women Healers in Medieval Life and Literature* (New York, 1943). *Medieval Woman's Guide to Health*, trans. Beryl Rowland (Kent, Ohio, 1981); Edward F. Tuttle, "The Trotula and Old Dame Trot: A Note on the Lady of Salerno," *Bulletin of the History of Medicine* 50 (1976): 61-72; John F. Benton, "Trotula, Women's Problems, and the Professionalization of Medicine in the Middle Ages," *Bulletin of the History of Medicine* 59 (Spring 1985): 30-53. See also Pearl Kibre, "The Faculty of Medicine at Paris, Charlatanism and Unlicensed Medical Practitioners in the Middle Ages," *Bulletin of the History of Medicine* 27 (1953): 1-20.

⁴⁸Thomas of Monmouth, *St. William of Norwich*, 78-79.

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In addition to varying somewhat in their age and sex distribution, the eight cults differed in their geographic expanse. The cults of Edward the Confessor, Waltheof, William of Norwich and Thomas of Cantilupe tended to be local, with a substantial portion of their miracles coming from the immediate region of the tomb.⁴⁹ In keeping with their fame, the cults of Henry VI and Simon de Montfort attracted a wider audience. Only eighteen percent of Simon's miracles and twenty percent of Henry's occurred within twenty miles of the shrine. Computations show the median distance for each between fifty and fifty-five miles, indicating that people traveled beyond the local community to reach the shrines. St. Thomas Becket's international status is seen in the distribution of his miracles. Although sixteen percent of his miracles took place in the vicinity of Canterbury, people came from far and wide to his tomb, making the median distance 110 miles. Although not everyone who was cured after invoking a saint visited the tomb, enough did to make these mileage estimates reliable. In spite of the difference between the cults, a picture emerges of a society that was not tied solely to the village community. As Anne Reiber DeWindt indicates, many peasants operated in a regional setting so that local pilgrimages would not have been unusual.⁵⁰ Pilgrimages of more than fifty miles, however, took peasants away from their familiar surroundings. While the extent of this spatial mobility should not be overestimated, it indicates that not all Englishmen restricted themselves to the village. Pilgrimages gave a veneer of legitimacy to those peasants who wished to leave home. The authorities suspected that peasant pilgrimages led to a breakdown in the social order and tried to curtail them in the Statute of Cambridge of 1388 and again in a proclamation of Edward IV in 1473.⁵¹ In both instances the authorities viewed peasant pilgrims as potential robbers and beggars.

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⁴⁹Seventy-five percent of Edward the Confessor's miracles, fifty-eight percent of Waltheof's, seventy-one percent of William of Norwich's and forty-three percent of Thomas of Cantilupe's were in the twenty-mile-or-less category. Although thirty-four percent of Robert Winchelsey's miracles occurred within twenty miles, others from substantial distances made the median distance seventy miles. Even though they were local saints, Edward, Waltheof, William and Thomas were not specialists, and thus performed counter to the trend which Stephen Wilson indicates; see Wilson, ed., *Saints and their Cults* (Cambridge, 1983), 18.

⁵⁰Anne Reiber DeWindt, "Redefining the Peasant Community in Medieval England: The Regional Perspective," *Journal of British Studies* 26 (April 1987): 163-207.

⁵¹12 Richard II, c. 3, 7, in *The Statutes of the Realm*, ed., A. Luders et al., 11 vols. (London, 1810-1828), 2: 56-59. *Calendar of Close Rolls, 1468-1476*, (London,

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Although miracle lists leave some questions unanswered, they do serve to confirm information found elsewhere and provide insights to supplement those gained from studying individual villages. It is possible to obtain an outline of the medical problems of peasant society as well as a glimpse of parental regard for children. The miracle lists depict a harsh society in which ill health was a way of life and show the poor state of medical knowledge which allowed frequent misdiagnoses. People tried to cope with their problems whether through herbal remedies of the leechbooks or calling on the saints. A spirit of optimism tends to prevail in miracle lists, for people believed they could overcome their problems if only they could find the right remedy.

There is a hint of faddishness about saintly medicine. Except for internationally known saints, people often turned to new saints. Interest in most cults peaked at an early stage—usually during the canonization process—and then declined. For example, Simon de Monfort's cult became quite popular in the vicinity of Evesham for a time in the late thirteenth century, but the cult of Thomas of Cantilupe in nearby Hereford replaced it by the turn of the fourteenth century. Old standbys remained active, but people tended to invoke the assistance of saints who were in the public eye. This functionalist interpretation of sainthood breaks down, however, upon close examination. Popular demand for miracles, rather than major social problems such as those created by the plague from the mid-fourteenth century onward, may have led some people to seek new saints. The decline in the number of new saints in the fourteenth and fifteenth centuries, from a thirteenth-century peak, may be attributed to the tightening papal standards of canonization, but even new proto-saints became less numerous.⁵² Of three of the fifteenth-century uncanonized English saints—Archbishop Richard Scrope, Master John Schorn and Henry VI—only Henry enjoyed much of a reputation. Changes in popular piety offer a better explanation for a decline in the number of new saints and support for existing cults.

What emerges from miracle lists is an appreciation of the multi-faceted nature of medieval peasant culture. As George Foster has shown, many limitations circumscribed peasant life.⁵³

1949) 299. For pilgrimages see: Raymond Oursell, *Les Pèlerins du Moyen Age* (Paris, 1963); Sigal, *Les Marcheurs de Dieu* (Paris, 1974); Sumption, *Pilgrimage*; and Finucane, *Miracles and Pilgrims*.

⁵²Weinstein and Bell, *Saints and Society*, 167. For late medieval sainthood, see Finucane, *Miracles and Pilgrims*, 191-202, and Vauchez, *Sainteté en Occident*.

⁵³George M. Foster, "Peasant Society and the Image of Limited Good," *American Anthropologist* 67 (April 1965): 293-315.

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With both land and freedom in limited supply, and even good health at a premium, obtaining any one of these often resulted in a zero-sum game in which one household gained at the expense of another. English medieval peasants valued life, sharing plough teams and harvest work and even uniting in protests against their lords. Limitations that circumscribed community cooperation often led to violence, however, especially toward outsiders regarded as interlopers, and sometimes against each other.⁵⁴ In the area of health, in particular, the community could offer little help. Village cunning men did what they could and bystanders even invoked the aid of the saints, but the impetus for curing remained in the family. Peasants welcomed any means by which they could step outside this limited relationship. Reliance on the medicine of the saints gave peasants just such an opportunity. The cure of one person following invocation of a particular saint led neighbors to seek the same saint's aid; God's mercy knew no limits.

Acceptance of the power of saints at once presented a boon and a dilemma for the medieval Church. Sainthood made God's power tangible, offered examples of proper conduct and even encouraged popular devotion. This devotion could turn in unexpected directions, as when peasants venerated as saints such rebels as Waltheof of Northumbria, Simon de Montfort or Thomas of Lancaster. In the fifteenth century devotion to the saints took an even more surprising turn with the Lollard saints. A major tenet of Lollardy involved questioning the role of the saints, especially St. Thomas Becket, and attacking pilgrimages. Some Lollards, particularly the less well-educated, regarded John Wyclif and other leading Lollards as saints and gathered ashes of executed Lollards as relics.⁵⁵ In these cases peasant veneration followed conventional practice but took as subjects figures that clerical authorities viewed with dismay. These actions were not in keeping with conventional Lollard beliefs, but regarding the excommunicated rebel Simon de Montfort as a saint could hardly be called conventional either.

⁵⁴Studies of crime abound; see in particular, Hilton, *English Peasantry in the Later Middle Ages*, 54-75; J. B. Given, *Society and Homicide in Thirteenth-Century England* (Stanford, 1977), 150-87; Hanawalt, *Crime and Conflict in English Communities, 1300-1348* (Cambridge, Mass., 1979), 151-83; Judith M. Bennett, *Women in the Medieval English Countryside* (New York, 1987), *passim*.

⁵⁵*The Great Chronicle of London*, ed. A. H. Thomas and I. D. Thornley (London, 1938), 252-53; *Six Town Chronicles of England*, ed. Ralph Flenley (Oxford, 1911), 101.

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Folk religion leads to many obscure byways that are often confusing, and road maps are hard to find. On the one hand is Peter Brown, who argues against a dichotomy between popular and learned religion.⁵⁶ On the other hand are Robert Muchembled and Jean Delumeau, who assert the existence of two strands of belief. Delumeau even goes so far as to embody peasants with an animistic mentality that turned Christianity into pagan belief.⁵⁷ Neither camp by itself allows a thorough understanding of medieval miracle lists. A belief in the validity of the saints, especially when expressed through the compilation of a miracle list, is evidence of a unified belief system. The regard shown to some saints is, however, evidence of folk traditions that are an uneasy translation of official beliefs. While it is natural to criticize Margarey Baxter's regard of the fifteenth-century Lollard leader William White as a saint (as does J. A. F. Thomson), Margarey could also be considered a syncretist trying to reconcile her old beliefs with her new ones.⁵⁸ Under this interpretation, the saints continued to play a major role in her life; she simply substituted new saints for the old. This view ignores the nuances of John Wyclif's teachings, but it better explains the translation of intellectual beliefs into the folk area. While most saints were not as improbable as Wyclif or Simon de Montfort, the cults of other saints help to reveal folk religious attitudes that go beyond the narrow restrictions of the conventional.

On the surface, miracle lists are expressions of official religious attitudes. Lurking beneath, and often obscured by a veneer of learned polish, a picture emerges of peasants concerned with trying to solve the everyday problems of the world around them, parents protective of their children and spouses solicitous of one another. For them Christianity played an integral part in their daily lives. Within this framework the unusual could become commonplace as they relied on saintly intervention to improve their lives. So too did the commonplace reinforce the overall structure of belief, as everyday miracles became evidence of God's hand touching the life of every man. Miracle lists thus succeed in showing how English peasants linked together the material and the spiritual worlds.

⁵⁶Peter Brown, *The Cult of the Saints* (Chicago, 1981), 18-22.

⁵⁷Robert Muchembled, *Popular Culture and Elite Culture in France, 1400-1750*, trans. Lydia Cochrane (Baton Rouge, La., 1985), 13; Jean Delumeau, *Catholicism between Luther and Voltaire: A New View of the Counter-Reformation*, trans. Jeremy Moiser (Philadelphia, 1977), 163, 167.

⁵⁸J. A. F. Thomson, *The Later Lollards, 1414-1520* (Oxford, 1965), 127.