

The children of the Reformation

It is rare to find details about the lives of children before the Industrial Revolution and especially before parish records began, so an article 'Grave secrets - The children of the Reformation' in *Current Archaeology*, Issue 301, April 2015, pages 20-26, by Benjamin Penny-Mason, is well worth summarising for the light it could shed on what happened to children in this area as well as the rest of the country.

Penny-Mason synthesized the data on the skeletons of 4,626 children dating from AD1000 to AD 1700 and found that the Reformation caused the single greatest change in childhood health. It had more of an effect than the Black Death, Wars of the Roses or the Hundred Years' War.

The religious reforms instigated by Henry VIII as a result of his obsession with marrying Anne Boleyn and his break with Rome saw the dissolution of the monasteries and thus tore apart the social fabric of England and destroyed the infrastructure provided by Catholic 'social welfare'. In particular an unforeseen consequence of the Reformation was the destruction of hospitals. By AD 1530 the Church presided over 585 hospitals where, as well as a spiritual regime of prayer and confession, patients could have bed rest, warmth, food, exercise, and nursing in a clean and quiet environment. The majority of medieval illness and accidents would have been curable with such basic treatment and nutrition. By 1550 only 220 hospitals remained and these were poorly funded and overcrowded. The closure of monastic hospitals would have had most impact on children in need, given that they were the most vulnerable subsection of society.

Penny-Mason's research into patterns of disease or trauma in bones over a 700-year period revealed for the first time three clear and separate stages of childhood:

1. The under-fives

About a quarter of all births resulted in the babies' deaths, but, for survivors, levels of infection and trauma for the under-fives throughout the medieval period were lower than for older age groups. In the period of social stability provided by the reign of Henry VII, the only disease which increased for young children was rickets, caused by vitamin D deficiency. After the Reformation the rate of rickets quadrupled and the trauma rate in children of all groups peaked. The most likely reason for the increase in rickets is an increase in swaddling possibly up to the end of the first year of life. Subsequently children became more mobile, their play likely centred round imitating adult activities with the use of scaled-down versions of domestic household items as toys. Trauma seen in skeletal evidence could have been the result of choking, falling down, drowning and attacks by household animals. Overall the evidence shows that the under-fives, even during the hardships of the Reformation, were relatively protected by their caregivers from the realities of medieval life.

2. The middle stage of childhood, ages 6-11

Skeletal evidence contradicts previous historical interpretations that children aged five or six were undertaking a substantial portion of adult tasks. The patterns of disease from their skeletons compared to 12-16 year olds and adults are too dissimilar, suggesting that 'childhood' was retained between the ages of 6-11. Education was largely based on learning Christian principles, mixed with the customs and etiquette of medieval society. The Church would support children in times of crisis, poverty and sickness; children could seek alms, shelter, education and hospital care from the Catholic Church. Skeletal data shows an extremely high peak in overall stress at around AD 1540, but the stress levels are nevertheless much lower than in 12-16 year-olds and adults. This indicates that the middle stage of childhood was mostly buffered from the harsh realities of medieval life, even during the Reformation.

3. Adolescent growing pains, ages 12-16

Around the age of 12 the majority of children undertook occupational roles with boys working in the fields and girls in the household, learning their occupational skills by watching their parents. Some would work in great households or become apprentices. By AD1540 children in this age group made up almost one third of the entire English workforce. This shift towards working life is shown in skeletons' trauma rates where children were exposed to the same dangers as adults. Trauma rates for 12-16 year olds doubled during the Reformation. However, although infectious diseases were higher than in earlier stages of childhood, they were still not at adult levels. Penny-Mason believes the behaviour of the economy had a direct impact on the health of these older children, through its impact on food prices, wages, and employment opportunities (the number of people living below the poverty

line doubled between 1500 and 1560). Post Reformation there was now limited assistance from the Church and adolescents were no longer as buffered by their families as younger children. Some clearly found themselves stranded.

The changes instigated by Henry VIII were swift and came at a time of significant economic turmoil (poor harvests, plague outbreaks, tax increases, population pressure, a rise in the cost of living, growing poverty and the debasement of the coinage all slowing market growth by AD 1530). The ending of social welfare provided by the Catholic Church removed any supplementary support for the medieval child. Overall signs of disease and stress in children almost doubled from 1530 to 1550, with signs of trauma also increasing.

The only possible conclusion from examining children's skeletons was that growing up in Reformation England was a traumatic experience.

Thanks to the acting editor of 'Current Archaeology', Dr Nadia Durrani, for permission to publish this summary and thanks to Benjamin Penny-Mason for his original article.