



The Victorians: Life and Death

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When we think of elaborate funeral rituals we think of the Victorians. Indeed if we want an especially elaborate funeral we can take up the offer of some undertakers to supply the full panoply of the Victorian ceremony with its glass coffin drawn by black horses clad in black velvet with black plumes (1). On special state occasions such as the funeral of the Duke of Wellington in 1852, huge crowds joined the procession or lined the streets (2) but even for relatively modest occasions a whole panoply of ritual was deployed, (3) including the supply of special mourning clothes, which were so much in demand that retailers even had special warehouses in which they sold them. (4) You could buy mourning teapots, black-edged stationery, and black crepe to cover the brass knocker on your door, even special mourning umbrellas for a rainy day. The most elaborate monuments in Britain's graveyards inevitably come from the Victorian era, like these at the Undercliffe cemetery near Bradford (5).

The use of show and display at and after funerals wasn't entirely new in the Victorian era, of course; upper-class and aristocratic funerals had been elaborate occasions at least since the 18th century if not earlier. But it reached its highest pitch of elaboration in the decades following the end of the Napoleonic Wars. An undertaker's order book dating from 1824 records the following requirements for a particularly elaborate funeral:

A strong coffin with white padded satin lining and pillow, mattress, sheet and a padded satin-lined lid; a very strong outside oak case, covered with superfine black cloth, best silvered nails, and rich ornaments also silvered; a rich plume of black ostrich feathers, and a man to carry ditto; silk scarves, hatbands and gloves for attendants; gifts of ditto for mourners; feather-pages and wands; mutes on horseback; silk dressings for poles; best black velvet pall and saddlecloths for horses; more ostrich feathers; cloaks; pages with truncheons and staves; hatbands and gloves; crape, attendants; rooms on the road; coachmen; feather men; and turnpike fees to the family seat in Herefordshire - costing total of £803.11.0

This was a huge sum at the time. No wonder there were moves later in the century towards a simpler style of funeral. But elaborate display was only part of the Victorian celebration of death. Many people in the nineteenth century had what seems to us nowadays to be an unhealthy, morbid attitude to death. The advent of photography even enabled mourners to pose with the dead laid out in her coffin before they set off for the burial (6); it even allowed families to pose with the deceased loved one, eyes opened and dressed as if she was alive (7).

Death was ever-present in poetry, perhaps most notably Tennyson's *In Memoriam*, and in verse: the famous Scottish versifier William McGonagall, well known as the worst poet ever to have put pen to paper, was almost obsessed with death and disaster. (8) Even ordinary deaths such as that of a Scottish clergyman who perished after losing his way on a mountain walk impelled him to write:

FRIENDS of humanity, of high and low degree/I pray ye all come listen to me/And truly I will relate to ye/The tragic fate of the Rev. Alexander Heriot Mackonochie.

Who was on a visit to the Bishop of Argyle/For the good of his health, for a short while/Because for the last three years his memory had been affected/Which prevented him from getting his thoughts collected.

Victorian art celebrated death in a whole variety of ways; here for example in Elwell's *The Wedding Dress*, from 1911. (9) Death was often represented as something beautiful, converting the dying man or woman into an ethereal being, already halfway to heaven. Death scenes from the Classics or, as here in Millais' 1850 painting of the death of Ophelia, were equally popular. (10). Heroic death was particularly popular, as in this endlessly copied and reproduced contemporary painting of the death of Nelson at the Battle of Trafalgar, by Arthur Devis. (11). Indeed the most famous Victorian heroes were those who met their death in battle, and perhaps especially in defeat, like General Gordon, killed in Khartoum by the Sudanese troops of the Mahdi in 1885, painted here nine years later by George William Joy and also endlessly reproduced. (12)

In all these representations, literary as well as visual, it's striking that the body remains intact; there is no blood, no gaping wounds, no mess; and the same is true of the Victorian funeral, where the arts of the embalmer were employed to render the deceased as much as possible like he or she had been in life. The often sordid realities of death were concealed, in an attempt to make death respectable. This desire was present across the social spectrum. Bodily integrity in death was desirable in preparation for resurrection at the end of time; and perhaps also to avoid the depredations of the body-snatchers who in the late 18th and early 19th century frequently dug up newly interred corpses to sell to the anatomy schools, (13); this may well have been a factor in the insistence in people's wills on a strong coffin, and the heavy monumental masonry often erected above the grave. The Anatomy Act of 1832 regularized the provision of specimens to the Anatomy Schools, and in the hundred years after it was passed, no fewer than 57,000 bodies of paupers were requisitioned for use in the Anatomy Schools; the alternative, burial in a mass grave, was no more palatable, and the desire to avoid this fate was an important factor in the growth of friendly societies and burial clubs among the working class during the Victorian era. In the meantime, the custom of laying-out the corpse in the parlor for several days may well have had as one of its motives the desire to render it unfit for use by the anatomists.

(14) Mourning could go on for far longer than this; social convention required for example that a widow should wear full mourning black for two years before the transition to half-mourning clothes, usually grey or lavender, for six months. The five years during which Queen Victoria mourned for Prince Albert were unusual, an expression above all of her own deep personal grief; indeed she only brought the mourning period to an end at the entreaties of her staff, who were getting depressed by it all. This is scarcely surprising, since mourning also meant social isolation, with no dinners or invitations or visits and even public places preferably avoided. (15). Parents conventionally mourned a dead child, children a dead parent, for a year.

While for some the rituals of mourning may have been a way of assuaging grief, for others they were a burden, particularly since they could involve a great deal of expense. The average funeral costs for an aristocrat in the 1840s ran at between £800 and £1,500, for a gentleman £200 to £400; the Duke of Wellington's cost all of £11,000, and was widely criticized for its extravagance, and indeed the 1850s probably marked the high point of funeral ostentation. Already there were voices calling for the reduction of the expense and ceremony. (16) The *Lancet* noted in 1894 that 'the cost of funerals has been very greatly reduced among the upper and upper-middle classes. It is found that the expenditure of £10 to £15 will allow of everything being completed in good taste and reverence, but without any excess.'

How can we explain this trajectory? What was the place of death in Victorian society? To get an idea of this we need to look at some statistics. In England and Wales (17) death rates did not begin to decline sharply

until near the end of the Victorian era. The same may be said of Scotland (18), where the crude death rate peaked at around 24 per 1,000 populations in the 1860s and 1870s before falling to about half that rate by the middle of the twentieth century. Tuberculosis, the biggest killer of all, accounting for around a third of all deaths from disease in the Victorian era, was by contrast in decline throughout the period (19). The decline in tuberculosis mortality accounted for around half the overall decline in mortality from 1850 to 1900. Still, in 1894 it was claimed that each year it caused as many deaths as had been caused by the whole of the Crimean War.

The nineteenth century was a period of great advances in medicine; scientists like Pasteur and Koch discovered the causes of a whole variety of infections, while antiseptics and anesthesia led to lasting improvements in surgery and in particular in the nature of the patient's experience of it. The improvement of hospital conditions and the nursing profession associated with the name of Florence Nightingale had a similar effect on survival rates. (20) But there was one thing that Victorian medicine was not very good at, and that was actually curing diseases. The discovery of the cause of tuberculosis for example had no measurable effect on treatments. The main causes of the transmission of infectious diseases were overcrowding and lack of hygiene and sanitation. What accounted for the decline in tuberculosis was above all the reduction of overcrowding through slum clearance and the construction of better housing, and better controls on the hygienic standards of milk, a major transmitter of the disease from infected cows. The only disease effectively combated by medical intervention was smallpox, where the discovery of the cowpox vaccine in 1898 led to widespread and successful vaccination programmes.

As the industrial revolution took hold, population grew, and towns and cities began to expand, existing ways of disposing of waste became a danger, particularly to vulnerable children and infants. Rubbish of various kinds piled up everywhere. (21) Streets, as in this rather foggy London scene from the early 1850s, were so covered in horse-dung and other rubbish that small boys earned a living by sweeping the muck away for well-off passers-by. (22) Raw sewage was poured into rivers from cesspools, (23) along with industrial effluent. (24) In Leeds for example, an investigation in 1867 found that the rivers were heavily polluted by the discharge of fluids from dye-works, fulling mills, the tanning industry, and 'had more the appearance of ink than water'. 'Carcasses of dead animals float down until intercepted by shoals and banks, where they remain to become putrid and most offensive.'

In 1851 Henry Mayhew described the tidal ditches in Bermondsey in the following terms:

As we passed along the reeking banks of the sewer [i.e. the open ditch], the sun shone upon a narrow slip of water. In the bright light it appeared the colour of strong green tea, and positively looked as solid as black marble in the shadow - indeed it was more like watery mud than muddy water; and ye we were assured this was the only water which the wretched inhabitants had to drink. As we gazed in horror at it, we saw drains and sewers emptying their filthy contents into it; we saw a whole tier of doorless privies in the open road, common to men and women, built over it; we heard bucket after bucket of filth splash into it. We asked if they really did drink the water? The answer was, 'They were obliged to drink the ditch, without they could beg a painful or thieve a painful of water.'

The Thames itself was notoriously dirty and smelly, (25) and in 1855 the scientist Michael Faraday wrote to *The Times* complaining about the state of the river. (26) Nothing was done, but in the summer of 1858 the 'Great Stink' even caused the Houses of Parliament to be closed for a time. By this time it was widely recognized that it was a source of pollution and disease: cartoons showed Father Thames introducing diphtheria, scrofula and cholera to Britannia in 1858, suggesting that it was recognized that the noxious fumes rising from the river could be linked in some way to the incidence of disease. (27)

Enough was enough. By the 1850s the political class no longer found this acceptable. A House of Commons committee set up to investigate the causes of the Great Stink recommended the construction of a proper sewage system. So sewers were built regulations for the disposal of waste were introduced, and

clean and effective water supply systems were constructed. (28). The Victorians took pride in these achievements. As the historian Anthony Wohl has noted,

the opening of ceremonies at the southern outfall [of the main London sewer constructed between 1858 and 1865] 'were attended by the Prince of Wales, Prince Edward of Saxe-Weimar, the Lord Mayor, the Archbishops of Canterbury, the Archbishops of York, and 500 guests, who dined on salmon while the city's excreta gushed forth into the Thames beneath them.

The Sanitary Act of 1866 obliged all water closets to be connected to urban sewerage systems, by the 1870s there was general acceptance that local authorities had to provide pure water and dispose effectively of liquid and other wastes, following a Royal Commission on the Prevention of the Pollution of Rivers, which led to legislation in 1876.

So what reduced death rates was above all what's been called the sanitary revolution: the introduction from the 1850s onwards of proper waste disposal and sewage systems, the introduction of sand-filtrated water supplies piped into people's homes, the improvement of street cleaning services, the provision of separate washing and bathing facilities for households, or public baths for those without them, and above all, perhaps, the construction of new, clean, hygienic houses to replace the ramshackle, tumbledown slums and 'rookeries' of the older parts of Britain's great cities. (29) Many of these were provided by housing co-operatives and associations, and building regulations enforcing sanitary conditions also played their part. (30) The provision of good housing for the masses had an effect above all on diseases spread by droplet infection such as tuberculosis, along with hygienic educational efforts to persuade people not to spit in enclosed spaces or on crowded streets, to sneeze into handkerchiefs, and to wash their hands after going to the lavatory.

How all these things could affect death rates can be illustrated by the great infectious epidemics of cholera that swept Britain in the Victorian age. The disease was unknown in Europe before the 1820s; it was spread by the British conquest of northern India and moved along the trade routes this opened up, to Central Asia and Russia, reaching Moscow in September 1830 and then moving steadily westwards; called, not surprisingly, Asiatic Cholera, it reached Britain in October 1831. Cholera is a disease of the digestive system; it causes massive vomiting and diarrhea, until they die through rapid dehydration. (31) It was a disease in other words that confounded the Victorian desire to conceal bodily functions from onlookers. The victim, turning blue as the blood coagulated in the veins, with corrugated skin, sunken eyes, violent stomach cramps, terrified to the extent that a new phrase 'a blue funk' - entered the language, was turned into a living corpse, and then in fifty per cent of cases, died, within a few hours. There was no opportunity for elevating deathbed scenes or fond farewells of the sort so often represented in Victorian literature. It reduced everyone to their basic physicality and then extinguished that as well.

Although it did not spare the wealthy and the well-off, it affected particularly the poor. Cholera occurred only intermittently, at intervals, spread above all by the movement of trade, people and armies during international crises such as the Polish rebellion of 1830, the revolutions of 1848, the Crimean War of 1854-6, or the Austro-Prussian War of 1866. Some 32,000 people died of it in Britain in 1832, 62,000 in the next epidemic in 1848-9, then when it returned in 1853-4, 28,000, and finally, in 1866-7, some 14,000. In 1848-9, death rates reached 6.2 per thousand in London, where more than 14,000 people died, and 8.7 per thousand in Hull, where the dead numbered more than 2,000. In 1853-4, more than ten thousand people died in London, as many as all those who died from cholera in the rest of the country put together.

Medical opinion was divided; some ascribed the disease to improvidence and lack of a moderate and regular lifestyle, and advised people to avoid drinking alcohol, eating too much or too little, and over-exerting themselves. (32) Others thought it was caused by a miasma rising from the ground, and offered fumigation of the streets as a way of dispelling it. (33) Some recognized that cholera was spread by the movement of people, a fairly obvious point since its occurrence in one place after another could be traced

without difficulty; this meant that seaports like London and Liverpool were particularly vulnerable, but from there it could be spread by traders and travelers, (34) and the coming of the railway made its transmission across Europe faster and less predictable in the epidemics of the 1850s and 1860s.

Boards of Health had already begun to be established during the 1831-32 epidemic but because doctors could not agree on the causes of the disease and therefore adopt a common policy of combating it, they were generally felt to be ineffective (35) and indeed there was widespread rioting against the doctors in 1831-2, reflecting popular fear that they were killing people to procure corpses for the anatomists; the policy of isolating and quarantining victims was particularly unpopular; in Exeter in 1832, for example, angry crowds attempted to prevent the doctors from burying cholera victims. (36) Boards of Health were set up across the country along with Medical Inspectors of Health and Inspectors of Nuisances by the Removal of Nuisances Act of 1848 and the Public Health Act of 1848 to combat the disease by introducing or improving street cleaning and waste disposal, regulating slaughterhouses and ensuring a clean water supply, but here too there was some feeling that though they made a lot of public noise and trumpeted their achievements, they were not managing to do very much. (37).

It was not until the cause of the disease was discovered that real progress could be made. In 1854 the physician John Snow mapped the cases of cholera that occurred in one London district and traced them all to households that obtained their water supply from a single supply source. (38) Snow wrote:

I found that nearly all the deaths had taken place within a short distance of the [Broad Street] pump. There were only ten deaths in houses situated decidedly nearer to another street-pump. In five of these cases the families of the deceased persons informed me that they always sent to the pump in Broad Street, as they preferred the water to that of the pumps which were nearer. In three other cases, the deceased were children who went to school near the pump in Broad Street...

With regard to the deaths occurring in the locality belonging to the pump, there were 61 instances in which I was informed that the deceased persons used to drink the pump water from Broad Street, either constantly or occasionally...

The result of the inquiry, then, is, that there has been no particular outbreak or prevalence of cholera in this part of London except among the persons who were in the habit of drinking the water of the above-mentioned pump well.

I had an interview with the Board of Guardians of St James's parish, on the evening of the 7th inst [Sept 7], and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day. (39)

After the epidemic was over, however, the pump handle was replaced, since the local authorities considered the danger was over. Nevertheless, this began a process in which it was gradually recognized that the disease was carried in polluted water supplies, as indeed the discovery of the bacillus and its mode of transmission through the excreta of infected people by the German medical scientist Robert Koch in 1884, confirming its initial observation by an Italian scientist thirty years before, publicly confirmed. Already, however, as the declining incidence of the disease in Britain showed, the great clean-up, the provision of safe drinking water and the proper disposal of waste and sewage were having an effect. The hygienic revolution extended into the Victorian home, where by the 1870s, in the proverbial phrase, cleanliness was next to godliness. (40)

The hygienic revolution affected especially the health and life-chances of children. As I've suggested, infant and child mortality only began to decline towards the very end of the Victorian era. But the deaths of

children featured so strongly in Victorian literature and statistics also because there were simply a lot of children. Birth rates remained high until the last quarter of the nineteenth century; in Scotland live births per thousand population remained at around 35 until the 1880s, before starting a long-term decline to their present rate of around 10. (41) With high birth rates and high death rates especially among infants and children, that meant that there were proportionately a very large number of young children, many of whom did not survive to reach adulthood. So the age pyramid of Scotland in 1861 looked like this. (42) In our own time, by contrast, it looks like this (43). High infant mortality rates meant that life expectancy at birth was low, as it had been for centuries. It only began to increase in the second half of the nineteenth century, as this graph for England and Wales shows. (44).

With undeveloped digestive systems and in poor areas, living in overcrowded and insanitary conditions, Victorian children were especially vulnerable to infection. Here's a graph of age-specific death rates in a district of Leeds during the nineteenth century, for example, where you can see that the early years, here shown on the left, were by far the most dangerous. (45) Infant mortality rates only fell very slowly. The big killers were measles, scarlet fever, whooping cough and diphtheria. Death rates from scarlet fever began to fall earlier than from the other diseases, but overall the impact of these infections only began to decline right at the end of the Victorian era. (46) Malnourished children were particularly vulnerable to scarlet fever, spread particularly through contaminated milk, in an era when of course milk was not refrigerated and was open to all kinds of adulteration and pollution; as late as 1863, 34,000 children died from it, and there were still 26,000 deaths in 1874.

So up to the second half of the nineteenth century, the average number of children born per family in England and Wales was about five, of whom two or at most three normally survived into adulthood. (47) It was only in the last third of the century that family size began to decline, down to two by the outbreak of the First World War; and the likelihood of both of them surviving was now very high. In Luke Fildes' painting *The Doctor*, completed in 1891, it is now uncertain whether the sick child will survive; the doctor's presence at the bedside gives at least a glimmer of hope. (48) By the end of the decade, the deaths of children had now become rare and unusual occurrences. Victorians had had to come to terms with it; Edwardians no longer did. No doubt that was why the accounts of children dying that run through the novels of Charles Dickens and his contemporaries now seemed so sentimental. (49) The death of Little Nell in *The Old Curiosity Shop* was described by Dickens as a gentle passage to heaven, in his instructions to George Cattermole, the illustrator:

The child lying dead in the little sleeping room, which is behind the open screen. It is winter-time, so there are no flowers; but upon her breast and pillow, and about her bed, there may be strips of holly and berries, and such free green things. Window overgrown with ivy. The little boy who had that talk with her about angels may be by the bedside, if you like it so; but I think it will be quieter and more peaceful if she is alone. I want it to express the most beautiful repose and tranquility, and to have something of a happy look, if death can...I am breaking my heart over this story, and cannot bear to finish it.

Oscar Wilde's famous comment which I quoted in my first lecture in this series - One must have a heart of stone to read the death of little Nell without laughing - expressed not only the end of Victorian earnestness but also a new attitude towards death.

For already by this time, death in old age had become more common than death in infancy or childhood. The death of young men in the prime of life, shocking enough in the cholera epidemics earlier in the century, had now become more shocking still in an age when there was a widespread and growing expectation that people would live out the full term of their fourscore years and ten. The Christian emphasis on dying a good death, so evident in the deathbed scenes in Dickens's books for example, demanded clarity of mind to the end; a deathbed struggle against the delusions brought on by fever could become a metaphorical struggle for repentance and forgiveness. A good death was peaceful and gentle, as in Henry Peach Robinson's 1858 painting *Fading Away*. (50). Religion guaranteed triumph over suffering, however severe it might be. Families, even children, gathered round the deathbed to witness the dying person's

transition to the life beyond. As the influence of Evangelical Christianity declined in the late Victorian era, so concern for the dying person's life beyond death gave way to a more immediate concern to avoid suffering in the present. A good death became one free from physical suffering.

By the Edwardian era it had become regarded as a blessing when someone died without knowing that they were dying; a sudden death, or death in one's sleep, were thought of as ideals. When his father Lord Carlisle died in 1911, his son told a friend that 'no one ought to be called on to see a man die.' It was 'shocking'. Where the early and mid-Victorians had made death a subject of earnest conversation, early twentieth-century English people now avoided it. When Mrs. Humphrey Ward's daughter Dorothy had tea with her aunt in March 1901, knowing she had terminal cancer, she was told by her family beforehand that it was best to keep 'cheerful and bright' in her presence and not mention her illness. In 1902, Lady Knutsford confessed that she was the only person who knew that her friend Alice Dugdale was dying, apart from the dying woman herself, who had 'bound [her] over not to tell. 'Alice', she wrote, '...knew that she was dying ever since October last. Her one dread was that her friends should know and pity her.'

As the Duke of Argyll, a retired politician, was dying, in 1900, after falling into senile dementia some years before, his daughter Frances Balfour expressed nothing but horror, and her letters to her brother-in-law Arthur Balfour, included no descriptions of the deathbed scene at all; instead, she reported on the continuing efforts of the doctors to keep him alive; and she complained that they were repeatedly summoning her to his bedside, though 'my horror of death is such that these summonses always give me deadly faintness, and I have a great struggle with myself.' Death had become something to avoid talking about. Indeed late Victorians and Edwardians even began to seek for supposedly scientific evidence that it was only a transition to another life, as Christian certainties began to ebb away, (51) Spiritualism, a movement spreading from America, where it began in the 1840s, reached the height of its popularity in these years, as séances proliferated, offering a variety of supposed proofs that the soul continued to exist in the afterlife the dead could communicate with the living through a a medium, speaking with his or her voice or inspiring him to automatic writing on a blank sheet of paper, or manifesting themselves physically through movements of chairs and tables.

These new attitudes to death rendered people peculiarly unprepared for the mass slaughter of the First World War. The decline of faith and the simplification or even disappearance of mourning rituals were sharply accelerated by the experience of mass death in wartime. Cremation now became more popular, as burial rituals seemed to lose their meaning in the face of anonymous death on the battlefield. 723,000 British servicemen were killed in the war, one in eight of those mobilized for combat. Death ceased to be a family occurrence and was taken over by patriotic sentiment as families were assured, and tried to assured themselves, that sons and brothers had died for their country. The enormous number of monuments to the dead of the First World War that can be encountered all over Britain, and the continuing centrality of the First World War in national rituals of mourning, which still take place on the anniversary of the armistice that brought the war to an end, marked an attempt to come to terms with the death of young adult family members that had become an extreme rarity long before the war broke out. The war ruptured the links between death and Christian faith, and left an entire nation in a state of unresolved grief and mourning. It was not only because many of the soldiers who died in the trenches were from other faiths in far-flung parts of the British Empire that Edwin Lutyens's national war memorial, the Whitehall Cenotaph, was entirely without any religious connotations. (53)

Experiences of life and death were throughout the Victorian era intimately connected with the themes of sex and religion, which I will turn to in my next two lectures, after the Christmas break. Meanwhile, whether or not Christmas itself has any religious connotations for you, it certainly owes a great deal of its ritual and ceremonial to the Victorians, so in the spirit of the Victorians let me say, a very merry Christmas to one and all. (54)