

## Status and environment as determinants of infant mortality change in early modern London

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There is now a substantial body of evidence that indicates a significant worsening of infant life chances in England as a whole over the late seventeenth century into the early eighteenth century with a noteworthy negative impact on overall life expectancy. The period was not one in which living standards worsened and in general the consensus would be that *per capita* incomes were rising within a context of favourable labour market conditions. London remains a key setting in which to investigate this phenomenon since it experienced a rapid growth in its size as well as significant environmental changes. This paper compares infant mortality and more specifically its component parts of neonatal, endogenous and exogenous mortality in three different locations. The first concerns a set of parishes in the eastern half of Cheapside (All Hallows Honey Lane, St Martin Ironmonger Lane, St Mary le Bow., St Mary Colechurch, St Pancras Soper Lane together covering an area of c. 3.08 ha. This was a densely populated area with high value housing that was had experienced relatively modest population growth in the century after 1550 but declined demographically slightly after the Great Fire when it was very largely rebuilt. A second area concerns the parish of St Botolph Aldgate (29.8 ha) lying outside the eastern wall of the city but partly within its jurisdiction. Most of the parish was open ground and gardens in 1550 but the population grew rapidly from 1,500 in 1655 to over 11,000 in 1665 and reached 16,000 in 1700 when there was little area which had not been built up. It was one of the poorest parts of the late seventeenth-century city and one of the worst affected by the 1665 plague. A third area concerns the large suburban parish of St James Clerkenwell (128.2 ha) peripheral to the medieval metropolis but merging into the expanded early modern conurbation well before 1750. The parish having been a small village reached nearly 11,000 by the early eighteenth century, although the great majority of inhabitants were concentrated in the southern end of the parish and contained both densely settled and open areas.

This spatial diversity of environmental attributes and income levels provides an ideal sample from which to assess the extent to which the worsening of infant mortality was roughly equal over these three areas of London or whether rising early age mortality was more intensive in areas of dense settlement or poor quality housing and low incomes or still evident in areas substantially rebuilt after the Great Fire and populated with inhabitants of high social status who had incomes well above the metropolitan average. Data relating to mortality experienced at the level of individual houses and streets provide a particularly fine-grained basis for investigation of these matters.