The Reading Medievalist: A Postgraduate Journal

The Graduate Centre for Medieval Studies, University of Reading

Selected Proceedings from ‘The Maladies, Miracles and Medicine of the Middle Ages’, March 2014

It is undeniable that within the hagiographic *miracula* curative miracles are prominent. The saints, following in the pattern of Christ in the Gospels, are shown to be capable of healing an array of ailments, from lifelong disabilities to sudden, life-threatening sicknesses or accidents. Whether the affliction was enduring or whether it is required immediate attention the saints are shown as able to assist. In all miracle cures there is, unsurprisingly, an overwhelming sense that the cure produced, by God, through the intercession of the saint, was only possible due to divine intervention. The pattern of cure-seeking is often formulaic: the sufferer is afflicted, they come to the saint’s shrine and pray and perhaps give an offering and then, either immediately or after some time spent in vigil, they are cured and return home. Yet despite this common pattern hagiographic sources are not carbon-copies of what has come before. As individual sources *miracula* offer insights into the individuals who came into contact with the saints. Personal details, such an individual’s name and the place they lived, are often recorded alongside descriptions of the ailment, or ailments, they suffered and how they both coped and were treated whilst afflicted. These sources, therefore, not only offer an insight into the saints and their cults but also into a wider, social aspect, into the lives of these individuals who are recorded in the *miracula*; many of whom would otherwise go unrecorded in contemporary source materials.

This paper focuses on eight twelfth-century English hagiographies in order to consider accounts of those who were deaf, or mute, or both. Despite these being major sensory disabilities, they appear rarely within the *miracula*. This infrequency is intriguing and must surely raise questions about how these disabilities were understood and how those who suffered from deafness or mutism coped. Do the lack of miracles suggest that other, temporal, medicines were able to assist? Were saints unable to cure these afflictions despite being able to cure the more severe disabilities of paralysis and blindness? Or did sufferers not seek a remedy in the first place, instead learning to cope with their affliction? If this was the case, that they did not seek cure, then how did they

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cope with their afflictions, and how did others treat them? Were the deaf and mute perceived to be frauds or, because of their struggles to communicate, to be ignorant? By using both hagiographic sources and medical materials these questions will be explored in this paper. In addition, this paper will question why, when cases of deaf-mutes do appear in these *miracula*, the cures granted by the saints are only half-cures, restoring hearing before speech. Why are sufferers only half healed and does this imply that there was a recognised connection between vocal and aural afflictions? By raising these issues this paper will consider these sufferers and their disabilities, allowing for an insight into their suffering and their cure.
A certain poverty-stricken boy, afflicted since birth by the misfortune of being deaf and lacking any means of speaking, communicated by signs and gestures, from which he was able to sustain himself by begging. He was received into the poor-house by the almoner, and the fact that he was truly deaf was proved every day to everyone’s satisfaction, since when stones or timber were crashed together in great collision behind his back, he remained motionless, not taking any notice at all. No-one ever heard any sound of hawking from him, nor, when he was beaten by people, any sound of wailing or moaning; in his silence he possessed the habits and nature of a fish. This boy, then, who lived for a long time in the house and courtyard of the monks through his daily presence was accepted by them, is taken to church on the prior’s orders when, after several years, the holy feast day returned; he is stationed among the other diseased persons with a candle at the tomb through the merits of the blessed St Swithun God’s mercy operated on the boy he had received the hearing which previously he had lacked. Meanwhile, this boy was learning to speak and pray from the men and women coming and praying at the tomb – he keeping silent when they were silent, and he likewise repeating what he heard them saying... [to the bishop and assembled clergy] he confesses himself clearly able to hear and speak...[however] was unable to vary the grammatical cases and persons...[and] replied in all languages

Miracula S. Swithuni.52

2 *Puer quidam pauperculus surditätatis ingortunio a natiuitate mulatus, loquendi carebat officio, signo et gestu loquens, a quibus poterat sustentando sibi alimoniam petens. Hic ab elemosinario in domo pauperum receptus, cotidie ab omnibus quod reuera surdus existeret aperto indicio probabatur, cum post tergum illus lapidibus vel lignis cum impetus multo simul collisis, remota omni animaduersione permaneret immotus. Numquam aliquem sonum screandi, numquam, dum percutiebatur a multis, eiulandi vel gemendi aliquis ab illo audiébat; consuetudinem et naturam piscium... Iste itaque iam in domo et curia fratrum diu consuersatus et diuturna consuetudine probatus, die festo post annos plures redeunte, ex precepto prioris ducitur ecclesiam; sistitur inter alios infirmos cum cero ad sepulturam... meritis beatissimi patris Swithuni misericordia Dei facta est super illum: ponens pro signo digitum ad aures, satisfaciebat astantibus se recepisse quem prius non habebat auditum. Interim uementibus et orantibus ad sepulchrum uiris et mulieribus secundum uerba eorum et iste ad loquendum et orandum informabatur, tacentibus illis tacens, loquentibus odo, quod audiébat referens loquebatur... se et audire et loqui manifestissime confitetur... in responsione casus uel personas variare non*
The above account, from the *Miracula S. Swithuni* [MaS], offers a fascinating insight into the life of this boy, but, perhaps the most notable feature of this account is the manner in which the boy’s full cure comes about. St Swithun does not provide him with a complete cure but, rather, provides him with the necessary skills, by restoring his hearing, to bring about this result through his own work. Following the restoration of his hearing the boy resided within the priory and learned to speak as a result of listening to both the monks and visitors to Swithun’s shrine. The result being that, by the time he was cured of his mutism, he has succeeded in learning not only English but also Latin and French, the one issue being that he has not learnt to speak grammatically.

MaS is one of eight hagiographical sources which are the core sources of the thesis from which this paper has developed. All eight sources were produced in England during the twelfth century; *MaS* written anonymously at Winchester in c.1100, Eadmer of Canterbury’s *Miracula S. Dunstani* [MD] c.1110 and *Miracula S. Oswaldi* [MO] c.1115, Abbot Geoffrey of Burton-on-Trent’s c.1118-35 *Vita et Miracula S. Moduenne Virginis* [VSM], the *Liber Eliensis* [LE] produced in c.1130-80 by Richard or Thomas of Ely, Thomas of Monmouth’s *The Life and Miracles of St William of Norwich* [WoN] c.1172-3, and the anonymously written *Vita et Miracula S. Æbbe Virginis* [MÆ] of Coldingham Priory and *The Miracles of the Hand of St James* [HoJ] from Reading Abbey, both c.1190-1200.³

These eight sources, which contain two-hundred and ninety-three accounts of both cured, and punished, individuals, can be used to explore the experience of those who interacted, directly or indirectly, with the saints. By interpreting the miracle accounts in their literary forms and as numerical data it is possible for a fresh approach to be taken to the sources, an approach which can reveal information in a way that is not

otherwise evident. Statistics allow for a more effective analysis of issues such as the
distances travelled by cure-seekers, the balance of gender, the age of cure-seekers and
patterns in types of affliction; the latter of which is the focus of this paper.

As might be expected within miracle narratives there is a trend towards recording
accounts of paralysis and blindness, both of which could have a serious effect on the life
of the individual; and also heavily featured within these sources are severe, life-
threatening, illnesses which needed immediate resolution. However, the account from
Swithin’s miracles of the deaf-mute boy is a surprisingly rare example of the double
disability of mutism and deafness within these eight hagiographical sources. In fact, the
miracula scarcely make mention of the cure of deaf-mute persons, or for that matter, of
those who are either solely mute or solely deaf (Table 1).

<table>
<thead>
<tr>
<th></th>
<th>Accounts of deaf persons</th>
<th>Account of mute persons</th>
<th>Accounts of deaf-mute persons</th>
<th>Total</th>
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<tr>
<td>MaS</td>
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<td>3</td>
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<td>MD</td>
<td>1</td>
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<td>3</td>
<td>1</td>
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<tr>
<td>WoN</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>2</td>
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<tr>
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<td>6</td>
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<td>7</td>
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<td>HoJ</td>
<td>0</td>
<td>1</td>
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<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2</strong></td>
<td><strong>15</strong></td>
<td><strong>3</strong></td>
<td><strong>20</strong></td>
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| Percentage in relation to all accounts (293) | 1% | 5% | 1% | 7% |

Table 1. Analysis of the accounts of deafness, muteness and deaf-muteness.

While it might not be expected that mutism or deafness would as common place as
cures of paralysis or blindness the percentage of such afflictions is surprisingly low, but
why was this case? Why are cases of cured hearing and speech impairments quite so
rare within these hagiographies? Moreover why in the two cases of deaf-mute
miraculous cures found within these eight sources, the third case being a punishment
doled out by St Æthelthryth of Ely, do the sufferers both find the cure to their deafness

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\[4\] LE.3.cxxxviii – in this account of a deaf-mute person the disability is the result of a punishment
from St Æthelthryth and is not cured.

\[5\] There is also an account of the triple disability blindness, deafness and muteness and an account
of a blind-mute child, see: WoN.5.xvii, WoN.7.xvi.

\[6\] There is account of the triple disability blindness, deafness and muteness, see: MÆ.4.i.
sometime prior to the restoration of their speech, thus meaning that they undergo a curative process in which they are only ‘half healed’.\(^7\)

Despite the low number of hagiographical accounts, these two ailments, either separately or in combination, and either congenitally or as a result of aging, were surely not uncommon afflictions. Nor, surely, would there have been a lack of desire to be rid of them. Whilst not as physically incapacitating as certain other afflictions, an impairment from one, or both, of these sensory disabilities had the ability to be socially, and possibly financially, limiting. Yet, although the aforementioned boy from MaS.52 was described as having begged for food before being taken in by Winchester’s almoner it should not too readily be concluded that his poverty was a direct result of his disability; he might well have had to beg even if he had been able-bodied. Unfortunately the account offers no insight into his familial background, although owing to the fact he remains for such a long period of time within the monastery it might be concluded, albeit speculatively, that he had nowhere else to go and lacked any other form of support. Undeniably, any disability, particularly one which prevented easy communication, has the potential to be very isolating for the individual, even today and this isolation must have been felt to an even greater extent within a social community which, owing to low literacy levels, relied predominantly on oral communications.

In order to understand medieval attitudes, especially those of ecclesiastics, towards disability and the disabled it is important to consider the precursors which influenced them, in particular the representation of disability in the Bible.\(^8\) Within the remits of this paper it is not possible to cover in detail a discussion of pre-existing attitudes, such as those from antiquity, or Biblical theories and the manner in which they impacted upon High Medieval attitudes but, it is worth recognising the progression of theories which connected suffering and sin. The Old Testament’s attitude to physical suffering is, predominantly, that it was a visible manifestation of sin; and this is particularly prevalent throughout Deuteronomy 28. Indeed, Deuteronomy 28:15 clearly states that: ‘if thou wilt not hearken unto the voice of the Lord thy God, to observe to do all his commandments and his statutes…all these curses shall come upon thee, and overtake thee’. Elsewhere in the Old Testament, however, the connection between sickness and

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\(^7\) The accounts of mute-deaf individuals can be found in the aforementioned MaS.52, and ME.4.vii, and the punishment case of LE.3.cxxxviii.

\(^8\) Widger, D., Andrews, D. and Taylor, B. (eds.) The King James Bible: The Project Gutenberg Edition of the King James Bible. <http://www.gutenberg.org/files/7999/7999-h/7999-h.htm> November 2004, it should be noted that all further Biblical references are also taken from this edition.
sin appears to be less certain with Exodus 4:11 implying that God created the disabled just as he created the able-bodied, whilst Leviticus 19:14 stresses the need to be kind, rather than mock, to those who were disabled:

And the Lord said unto him, Who hath made man's mouth? Or who maketh the dumb, or deaf, or the seeing, or the blind? Have not I the Lord?

Exodus 4:11

Thou shalt not curse the deaf, nor put a stumbling block before the blind, but shalt fear thy God: I am the Lord.

Leviticus 19:14

The Gospels of the New Testament, likewise, do not provide any sense of the disabled as ‘unclean’, a point which has been discussed in detail by Irena Metzler in Disability in Medieval Europe. Indeed, in John 9:3 Christ emphasises that: ‘neither hath this [blind] man sinned, nor his parents: but that the works of God should be made manifest in him.’ Thus, it might be considered that there is a sense of progression between the two works, with the New Testament beginning to imply that there is ‘not always a direct causality between sin and illness, or impairment’.

This separation between sin and sickness was then developed further in the later Biblical commentaries, Commentarius in Evangelica Secundus, from the Canterbury School of Theodore and Hadrian. Originally composed between the mid-seventh and mid-eighth centuries, and surviving in the most extant form in a later eleventh century copy (Milan, Biblioteca Ambrosiana, M.79 Sup.), the commentary for Mark 7:32, in which Christ cured the abovementioned deaf-mute, reads:

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9 Metzler, I. Disability in Medieval Europe: Thinking about Physical Impairment during the High Middle Ages, c.1100-1400. (London. 2006).
10 Metzler. Disability in Medieval Europe. p.42.
And they bring unto him one that was deaf, and had an impediment in his speech; and they beseech him to put his hand upon him.

Mark 7:32

Some commentators say that these illnesses come from an evil spirit; physicians, however, do not think in these terms, but say that they arise from contracted veins.

Commentarius in Evangelia Secundus.73

Despite the realisation made by some ecclesiastics and physicians that sickness and sin were not connected, the link between the two continued to have an influence, at least upon lay concepts of health and such ideas could greatly impact upon the lives of individuals who suffered from all manners of illness and disability. An apt example of this can be found within the miracles of St Æbbe in which a knight from Malton and his wife both took religious vows after all six of their children were born mute, a consequence, they feared, of their sin. The account, unfortunately, does not give any details of what this presumed sin might have been, although it does report that he joined the Benedictine monks at York, and she the Cistercian nuns of Keldholme. The lack of this detail may however be very simply explained by the fact that the miracle central to this report is the cure of only one of their abandoned daughters, now aged fifteen, who appears to have had no contact with her parents since they left. It is possible that she was never informed of the full details of her parents’ actions, or that she did not wish to divulge this information when reporting the miracle. However, whilst it might not be possible to gain any insight into her parents reasoning, MÆ.4.xvii paints a vivid picture of the girl’s experience of growing up mute:

12 ‘Dicunt aliqui tractors illas infirmitates a daemonio esse; medici autem non sic opinantur, sed de uenis contractis et domientibus.’ Commentarius in Evangelia Secundus.73.
13 MÆ.4.xvii.
14 MÆ.4.xvii York is approximately twenty miles from Malton, whilst Keldholme is roughly twelve miles away; these distance have been estimated using Google Maps: <https://maps.google.co.uk/maps?hl=en&tab=wl> March 2015.
A knight from the area of Malton had had six children with his wife, namely five daughters and one son, who, just as they were born one after the other, turned out as they were born one after the other, to be mute. Eventually the parents came to consider that this was a penalty for sin and turned their grief at their silence into love of their punishment. For the knight fled to the monastery of the monks of York, and his wife became a nun in Keldholme. They left the mute children to the care of relatives… [one of the daughters, now aged fifteen, came to Coldingham having been cured by St Æbbe via a vision] She confessed to us that she had borne much mistreatment from her neighbours, as sometimes they hung her from her thumbs, sometimes they afflicted her finger in the joint with a pin, but such great violence did not extort a human voice. She showed us also a lump on her head. This was done so that a trial of the illness when it was doubted should provide proof that the healing was given.

MÆ.4.xvii

Whilst the knight and his wife may have escaped from the secular world and any derision they faced, or feared they would face, their daughter clearly struggled as a result of her mutism. Importantly, however, the grief caused is said to have come from neighbours, rather than her relatives, who took on the duty of care. This is a point worth noting as it highlights a difference between levels of social compassion and familial support towards the disabled. Nevertheless the girl, and presumably her siblings too despite nothing being said of them in the account, was deliberately caused pain in an attempt to make her speak even though she was unable to ‘extort a human voice’.

15 ‘Miles quidam de Maltone partibus sex de uxore sua liberos, quinque uidelicit filias et unum filium, sustulerat, qui, sicut successiua sibi natiuitate procedebant, ita muti matiua successione permanebant. Quod denique parents pernam esse perpendentes peccati, dolorem eorum silencii in amorem sui convirtebant supplicii. Miles namque ad cenobium Eboracensium congugit monachorum et uxor eius se in Chendholm ad conersionem transtulit monialium. Liberos autem memoratos mutos post se amicorum cure relinquebant… Factebatur nobis quod multas a cohabitatoribus suis molestias sustinuisset dum eam aliquando per polices suppiderent, aliquando in foramine digitum cauilla constringerent; nec tanta violentia uocem humanam extorquerent. Gibbum quoque ostendit in capite. Factumque est experienca dubitate ingirmitatis probacio fieret date sanitatis.’ MÆ.4.xvii.

16 MÆ.4.xvii.

17 MÆ.4.xvii.
would appear, therefore, that she was able to produce some sounds meaning that her
mutism was a speech, rather than a vocal, impairment. Conversely, the aforementioned
boy from MaS.52 appears to have been unable to make any sound, proof of which was
also found through the infliction of physical pain as: ‘no-one ever heard any sound of
hawking from him, nor when he was beaten by people, any sound of wailing or
moaning’.18 Likewise, he was proved to be truly deaf by the fact that he did not react to
the sound of crashing timbers.19

Concerns over possible ridicule were also felt by Alditha, the widow of a chandler named
Toche from Norwich, who became increasingly deaf in her later life and, as a result,
withdrew from society out of the fear that her disability would be discovered:

during a long time her ears had been growing deaf, to such
an extent that you could only make yourself heard by
putting your lips close to her ear. She was consequently
afraid to go out, and only talked to her own family, fearing
lest the reproach of her deafness should be detected by
others, and bring derision upon her. So she had recourse to
the intercession of St William, and offered a candle, and
with a copious flow of tears prayed there for some time.
Then, with knees bent in prayer, and stung by the fervour of
faith, she stopped both her ears with the cloth that covered
the tomb. What more? At once the devout tears smote the
heavens, the faith of the suppliant extorted the mercy of
God, and the deaf ear received hearing.

WoN.5.xxiii20

18 MaS.52.
19 MaS.52.
20 ‘Ex multo etenim tempore obsurduerant aures adeoque inualuerat incommodum, ut nisi tuum illius auribus
os appicases ab ipsa nequaquam audiri posses. Vnde et in publicum prodire uerebatur, et non nisi
domesticorum utebatur alloquis. Timebat enim ualde ne surdiciei sue obprobrium alieae quandoque noticie
prodiret in risum. Cuius rei gratia ad Sancti Willelmi suffragia confugit, candelam optulit, effusoque
lacrimarum fonte, ibidem aliquamdiu orauit. Denique flexis in oratione genibus et fidei tacta fervore aures
utrasque quo sepulchrum tegebatur oppleuit pallio. Quid multa? Temporis articulo lacrimarum deuotio celos
pulsavit petentis fides diviue pietatis misericordiam extorsit, et auris surda auditum suspepit.’ WoN.5.xxiii.
As her hearing had deteriorated so much that she required someone to put their lips 'close to her ear' it would have become evident very quickly that she was deaf, to anyone she might communicate with. The idea of this being known outside of her family was clearly a source of shame and fear for Alditha. Again there is an implication made within this account that a familial response and the community’s attitude towards disability differed. No details are revealed within WoN.5.xxiii to explain exactly what derision Alditha thought she would face nevertheless it is clear that she wished to remedy this and, having previously had success at St William’s tomb, she sought his aid again.\textsuperscript{21}

Whilst Alditha’s concerns over the communal response may well have been valid, and whilst the knight’s daughter cured by St Æbbe, and poor boy cured by St Swithun, were proved mute through being beaten it should not be assumed that all of those who were mute or deaf were mistreated. Indeed, the hagiographies show a high level of parental concern towards children suffering from a wide variety of disabilities and illnesses, with parents are often actively participating in securing the miracle; such as the parents of a boy from London who travelled with him to Winchester to seek a cure for his paralysis.\textsuperscript{22}

Similarly, friends also feature in accounts, assisting the cure-seeker’s journey to the shrine and rejoicing in their cure as depicted in MD.5 in which a young man who had been paralysed and mute since birth was ‘carried forward through the crowds on the shoulders of his friends’.\textsuperscript{23}

The recorded testing of muteness, whilst cruel by modern standards of welfare, and undeniably painful, were attempts to prove without a shadow of doubt that the claimed disabilities were real. Thus another cure-seeker from MÆ a young mute man was tested by many means to see if his affliction was genuine or ‘mere show and deceit’, the account recording that:\textsuperscript{24}

\textsuperscript{21} Alditha was previously cured of a long-standing illness by St William, as recorded in WoN.3.xiv.
\textsuperscript{22} MaS.11.
\textsuperscript{23} ‘\textit{suorum humeris aduehitur}’ MD.5.
\textsuperscript{24} MÆ.4.vii.
some bloodied his legs with forks, almost piercing them, while others hung him up sometimes by the thumbs, sometimes by the feet. But they were not able to extort anything from him other than terrible yells and wretched moaning.

MÆ.4.vii

Unsurprisingly the *miracula* make no mention of those who might have feigned their afflictions but it cannot be doubted that there were some who would have done this in order to receive sympathy or more alms than they might have done as an able-bodied person. One Scottish woman, Ronald Finucane noted, supported a ‘paralysed’ man in her home until she found he was a fraud. Owing to its invisible nature, muteness must have been a particularly doubted disability; after all it would not have been difficult to act as if mute, especially when medieval ‘mutism’ broadly covered all speech impediments not just the inability to create sound. Communities clearly would wish to be certain that a supposed mute, or for that matter deaf person, was truly unable to communicate. Thus forcing an individual to the point of having to make a sound, if possible, was a sure-fire way, albeit not the most humane, to test this. Yet, while muteness was often doubted and communication for those who were either mute or deaf, or both, must have been difficult at times, relying as they did on signs and gestures, it is important to recognise that those who suffered were not seen as incapable of rational thoughts or piety. Just because they were unable to communicate vocally did not mean they were seen as idiotic. Indeed, the hagiographies offer multiple examples in which the individuals are referred to as having been capable of thought, and communicating with God, even if they were unable to display these qualities outwardly:

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25 ‘alii furcis crura cruentabant et pene perforabant, alii perpollices quandoque manuum quandoque pedum suspendebant, nec ab eo preter clamores, horridos et mugitus miaweanos extorquebant.’ MÆ.4.vii.

26 Finucane, R. *Miracles and Pilgrims: Popular Beliefs in Medieval England.* (London. 1977) p.70. It should be noted that this account occurs in the canonisation proceedings for Thomas Cantilupe which is preserved in Biblioteca Apostolica Vaticana MS. Vaticano Latino 4015, f.46v.
There were two men, dumb from birth, who lacked human speech: one was called Ulf, the other Ælred. They could not demonstrate functionally the notions of intellect which were conceived by them, as they had the harmony of their voice obstructed, and possessed their rationality not in the functioning of the voice but in nature alone...both of the men in question, at different times certainly, but in a similar frame of mind, approached the body of St Æthelthryth, making their prayers for the gift of speech by means of emotions rather than their voices. Nor did the betrothed of the Lord fail to respond to such great devotion but, to the glory of Christ and her own glory, she restored full fluency to Ulf, but in the case of Ælred, it was her wish that a human educative purpose should succeed, and just as boys starting from syllables are taught the whole art of rhetoric, similarly the aforesaid man, having been taught human words by a gradual process, subsequently gave utterance to complete thoughts.

LE.2.cxxx

That the two men were recognised as not being incompetent despite their inability to communicate vocally is very interesting as it would suggest an understanding that lacking the capacity to communicate ‘out loud’ did not lessen their ability for rational thought, or their ability to communicate with God. Likewise, a mute man from Worcester was also noted for his ability to speak inwardly with God, and through his pious actions proved his merit not only to God but also to the brothers of Worcester Cathedral priory. ²⁸ Inner reflection and private communication with the divine was, of

²⁷ ‘Duos a nativitate mutos humana dampnavit loquela. Quorum alter Ulf appellatus, alter Ailredus, conceptos intellectus lingue non poterant officio demonstrare, obstrusam habentes vocis armoniam suamque rationalitatem non in vocis efficacia, sed in sola possidentes natura...uterque istorum diverso quidem tempore, sed pari mente, ad corpus sancta Aëldreðe accesserunt, affectibus magis quam vocibus pro vocis munere supplicantes. Nec defuit tante devotioni sponsa Domini, sed ad laudem Christi et suam Ulf plenam restituit facundiam, Ailrede autem humanam voluit eruditionem proficere et, ut pueri sillabis ad plenam dictionem intruantur, ita homo ille, verba humana paulatim edoctus, plenas deinde expressit rationes.’ LE.2.cxxx.

²⁸ A certain man of good repute once lived in Worcester. He had been unable to speak from infancy, but he habitually busied his inner thoughts with speaking with God, and thought it pleasant to visit the house of God with devout zeal. It was this man’s custom to stand in the church in the particular place where he knew that men in holy orders would most often pass by,
course, something which the monastic communities themselves practiced, albeit out of choice rather than necessity. That it was recognised that a person’s rationality and intelligence was not proved through the spoken word, and that communication with God and the saints could be achieved silently, by members of the laity as well as ecclesiastics, is worth highlighting.

Although a connection between sin and sickness still prevailed in the minds of some into the twelfth century, hagiographical sources do not themselves make any mention of believing in this. Unless an affliction is the direct result of saintly punishment there is no sense of judgment against the individuals in the miracula. Even in the aforementioned account from Æbbe’s miracles it is clear that it is the knight and his wife who believed their sin to be the cause of their children’s disability, the author makes no suggestion that others believed the same. Certainly there is no implication that the hagiographer himself agreed with this. But if one inherited, traditional view, the religious view, was unable to explain the cause of such disabilities could another, the classical, medical view, shed a better light on mutism and deafness?

There is not the scope within this present paper to produce an in-depth discussion of contemporary medical knowledge and its ancient roots, however it is important to note certain prominent classical theories for both deafness and muteness, such as those found in the Hippocratic Corpus which could have affected the medieval understanding of these disabilities. In the Corpus, Epidemics notes that deafness was caused by the onset of fever, whilst Aphorisms claims that it could be caused by southerly winds and that deafness was also associated with the elderly, the category which Alditha from WoN.5.xxiii would have fallen into. Whilst in the second century A.D. Galen explained that deafness could result from damage to the auditory nerve or owing to bilious humours in the auditory passages. Humoral theories were similarly cited by later writers; and Meletius’ tract On the Nature Of Man from the late-eighth to early-ninth

hoping to display to them by his bowed head the obedience and humility he was unable to demonstrate with his voice. ‘Homo quidam non ignobilis famae Wigornae habitatbat. Hic ab infantia mutus, sed mentis affect diuinis alloquis sepsisse functus, domum Det pio studio frequentare dulce habebat. Consistere in illa eo loci consuetudinis ipsi erat, ubi sancrorum ordinum uiros maxime transituros sciebat, cupiens eis aliquod humilitatis obsequium, demisso capitem quod uoce nequibat, exhibere.’ MO.7.
30 Epidemics.1.iii, Epidemics.1.x, Epidemics.3.vii, Epidemics.3.viii, Aphorisms.3.iii, Aphorisms.3.xxxi in Hippocratic Writings.
31 Metzler. Disability in Medieval Europe. p.74.
century went as far as to suggest that ‘the faculty of speech may be linked to a specific area of the brain’. A mid-twelfth century contemporary of these hagiographical sources, and earliest known medieval surgical book the *Bamberg Surgery*, from Salerno, recorded that damage to the *pia mater* (the delicate innermost membrane surrounding the brain) caused: ‘destruction of the voice, the growth of pustules on the face, and a discharge of blood and sanies from the nostrils and ears.’ Whilst William of Conches’ *Dрагматикон*, c.1145, argued that it was humoral imbalances of the brain that were to blame for ‘a dull wit, soggy memory and imperfect speech’. At the close of the twelfth century, the *Prose Salernitan Questions*, similarly, recorded humoral imbalances as a cause of deafness; too much humidity would block the ears. But, just as importantly the *Prose Salernitan Questions* made a connection between deafness and mutism, asking:

> Why are all mutes deaf? Response. The nerves which come to the tongue in their origin are continued by nerves which come to the ears. If therefore it should happen that a certain humour obstructs the nerves of the tongue about the beginnings they are obstructed like those which come to the ears, whence simultaneously he may be mute and deaf.


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34 O’Neill, Y. *Speech and Speech Disorders*. p.128. It should be noted that a century later Guy de Chauliac and Taddeo Alderotti were both suggesting that humoral imbalances across the whole body could affect senses such as hearing or speaking, see Metzler p.77.
36 ‘Quare omnes muti surdi sunt? Responsio. Nervi qui veniunt ad linguam in sua origine continui sunt nervis qui veniunt ad aures. Si ergo contingat aliquem humorem opilare nervos lingue circa principia, opilantur et illi qui veniunt ad aures, unde simul fit mutus et surdus.’ *The Prose Salernitan Questions Ba.12.*
Clearly there was interest in discussing these disabilities during the twelfth century, suggesting that these were not an uncommon impairments. Indeed as both disabilities can be congenital, due to aging, or the result of trauma or disease it must be assumed that such conditions were relatively frequent and, therefore, there was a necessity to discuss them within medical texts. It must be considered that medieval concepts of deafness and mutism were undoubtedly different from the modern understandings of these afflictions owing both to the fact that less was known about the internal systems of the human body and that words, such as ‘mute’ have changed their meaning over time, for example the previously mentioned girl from MÆ.4.xviii was called mute and was unable to speak but, importantly, she was not silent. It is clear, however, that an attempt was being made to understand the reasons for deafness and mutism and that some recognition was being made that the two could be connected; after all congenital deafness would have affected the individual’s ability to develop speech in their formative years. Yet, despite this, the hagiographies are greatly lacking in cures for the mute and deaf and it must be recognised that few medical sources, despite discussing possible causes, suggest ways in which these sensory sufferings could actually be cured, or even just slightly improved. Interestingly, when sources do refer to cures more attention appears to be paid to the alleviation of deafness, the less frequently recorded of the two

37 It is worth noting the modern medical definitions given for these disabilities as found in Martin, E. (ed.) The Concise Medical Dictionary, 8th Edition. (Oxford University Press, Oxford. 2010) via Oxford References:

<http://www.oxfordreference.com/view/10.1093/acref/9780199557141.001.0001/acref-9780199557141> February 2010. Deafness is defined as: ‘n. partial or total loss of hearing in one or both ears. Conductive deafness is due to a defect in the conduction of sound from the external ear to the inner ear. This may be due to perforations of the eardrum, fluid or infection in the middle ear…or disorders of the small bones in the middle ear (ossicles). Sensorineural (or perceptive) deafness may be due to a lesion of the cochlea in the inner ear, the cochlear nerve, or the auditory centres in the brain. It may be present from birth (for example if the mother was affected with German measles during pregnancy). In adults it may be brought on by injury, disease (e.g. Ménière’s disease), or prolonged exposure to loud noise; progressive sensorineural deafness (presbyacusis) is common with advancing age.’

<http://www.oxfordreference.com.idpproxy.reading.ac.uk/view/10.1093/acref/9780199557141.001.0001/acref-9780199557141-e-2469?rskey=7QxynX&result=1>. Whilst mutism is defined as: ‘n[oun]. inability or refusal to speak. Innate speechlessness most commonly occurs in those who have been totally deaf since birth (deaf-mutism). Inability to speak may result from brain damage… It may also be caused by depression, psychosis, or psychological trauma, in which case the patient either does not speak at all or speaks only to particular persons or in particular situations. This latter condition is called selective (or elective) mutism.’

38 O’Neill, Y. Speech and Speech Disorders. p.163, pp.174-5, n.70.
disabilities in the hagiographies, although the Lacununga does suggest a herbal remedy for mutism using pennyroyal:

For a woman suddenly going dumb: Take *pulegium* [pennyroyal], and grind to dust and wrap in wool. Lay it under the woman. Soon she will be better.

*Lacununga*.CLII

The *Alphabet of Galen*, surviving in a vernacular edition from the seventh century and still circulated widely into the thirteenth gives a number of suggestions to assist the cure of more minor, cold-induced, symptoms, many of which would have been easily accessible in twelfth-century England. For example mulberries and blackberries and radishes were noted for their abilities to cure sore throats, whilst drinking raw egg was supposed to alleviate hoarseness and parsley could ease swellings and cramps of the throat. Similarly, the twelfth century abbess, Hildegard of Bingen, refers in her work *Physica* to various cures for deafness using plants, animals, stones and metals:

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Let one who has deaf ears cook Horehound in water...take it from the water and permit its vapour to flow –warm – into his ears.

If the silk is white or green he should put borage juice on it, then smear it on felt, and wrap that around his entire neck...up to his ears, but not covering them. If he does this often, it will stop his ears from ringing.

Hildegard of Bingen. *Physica*^{41}

Natural, non-invasive, remedies seem predominant in the cure of any such ailments especially if these were temporary impairments resulting from illness or injury, although their effectiveness against serious disability must have been limited. Both hagiographical and 'professional' medical sources recognised that there was an issue but neither appears to have been able to offer a definitive answer; and whilst the saints were able to offer a cure the statistics proved these were hardly regular occurrences. Clearly whilst there was a perceived cause, often owing to humoral imbalances, an effective cure was more difficult to prescribe.

Medical sources, and close first-hand observation, would both have indicated that there was a connection between muteness and deafness in those who were congenitally deaf-mute. Whilst those who lost their hearing or ability to speak later in life were, naturally, less likely to suffer from the other impairment having already passed the stages of early childhood in which the sensory skills are developed.^{42} Similarly, if the speech impairment alone was the congenital disability then it can be expected that the development of the child’s hearing would be unhindered; although they might have struggled to make it clear that they understood owing to the mutism. However, if deafness was congenital it would be more difficult for a child to develop their speech as the process of learning to speak requires both the visual stimuli of watching others talk and the aural stimuli of hearing the way sounds, and therefore words, are formed.

Without the latter, the ability to hear, it would not be possible for a child to develop an


^{42} For the stages of childhood development see: Developmental Milestones via Centre for Disease Control and Prevention: <http://www.cdc.gov/ncbddd/actearly/milestones/> March 2014.
articulate use of his or her voice, thus meaning they would lack the skill to linguistically communicate even if they were able to make some sounds.

Therefore it is no surprise that, despite the rarity of deaf-mute cases, in the two instances from the eight hagiographies in which this double affliction occurs the disabilities were present in the sufferer from early on. The previously mentioned case from Swithun’s miracles states that the boy was a deaf-mute from birth, and the account from Æbbe’s miracles notes that the affliction was present ‘from boyhood’, ‘a puericia’. What is different about the latter case, intriguingly, is that there appears to be a very clear reason for this disability; and it was not congenital. Considering the fact that disability is not always apparent at birth these afflictions might well be picked up only during the early stages of development however, in this instance, it would appear that an early trauma, during this developmental stage, caused the onset of this double disability:

a poor young man…had been deprived of the power of speech for eighteen years, from boyhood. He incurred the affliction while he was pasturing sheep in a remote place, from a phantasmal demon who appeared to him in the likeness of a little black boy, because he disdained to consent to the games he suggested to him… he was deaf and dumb from earliest boyhood, he received his hearing from the glorious martyr and archbishop Thomas of Canterbury, and, travelling around the holy shrines of other saints seeking recovery of his tongue, by the Lord’s mercy he at last came here to St Abb’s Head, where he was to receive a draught of healing from the antidote of such famous sanctity…his mouth was straightway opened and the bond of his tongue released and he spoke

MÆ.4.vii

43MÆ.4.vii.

44 ‘Quidam adolescentulus…decem et octo a puericia annis officio lingue destitutus. Hanc et ipse doloris uicissitudinem cum oves in deserto pasceret, demonis illusion qui ei in similitudine nigri pueruli apparuit, incurrit, qui ludis quos ei offerebat assentire contemptis…a primis adolescencia sue temporibus surdus esset et mutus, auditam et glotioso Cantuarensis martire ac pontifice Thoma receipt sacrisque aliorum sanctorum liminibus ob salute lingue perluxistris, ad hanc demum urbem Coludi, Domino miserante, peruenit, quatimus ibi
It is worth noting that the emphasis is placed on the youth’s inability to speak rather than his deafness. As with the general trend in the eight hagiographical sources to promote speech over hearing, here too it is the ability to vocally communicate which is seen to be more important. It would appear undeniable that the sources, and perhaps the saints themselves, were more attentive towards the cure of speech impairments. All that is given at the beginning of this account is the reference to his mutism, with his inability to hear only appearing to be of secondary importance further in to the account. Likewise, come the cure, the focus is on the ‘loosening’ of his tongue with no direct mention being made of his hearing. However, one reason for emphasising the cure for mutism here is that this was the impairment cured by Æbbe. As with MaS.52, the restoration of hearing occurred prior to the ability to speak and, what is more in this instance, this first cure was not achieved by Æbbe but by Thomas Becket at his shrine in Canterbury. No reason is given as to why Becket did not cure both afflictions or how the partial cure had been perceived by the youth; although, presumably, he was not completely satisfied as he continued to seek out a saintly remedy for his mutism.

It should not be overlooked that even being half-healed was seen as miraculous, and reasons as to why the saints did not produce uniform results are easy to find within the hagiographies. The account of Ulf and Ælred’s cures from mutism in LE.2.cxxx stated that whilst the men were similarly both mute from birth, and Æthelthryth could have easily cured both from their afflictions, she chose to cure them by two different methods, letting one learn to speak by himself. Thus, whilst Ulf is the recipient of a full cure, Æthelthryth wanted Ælred to succeed through the ‘human educative process’.45 Nevertheless, Ælred’s cure is still seen as miraculous, and at the close of the account the hagiographer comments that Æthelthryth could, obviously, have granted an immediate cure, but that she was following the example set by Christ, in John 9:1-11, in which Christ’s instructions, that the man should wash in the pool of Siloam to receive his sight, rather than his physical actions brought about the cure.46

45 LE.2.cxxx.
46 ‘And as Jesus passed by, he saw a man which was blind from his birth. And his disciples asked him, saying ‘Master, who did sin, this man, or his parents, that he was born blind?’ Jesus answered, ‘Neither hath this man sinned, nor his parents: but that the works of God should be made manifest in him. I must work the works of him that sent me, while it is day: the night commeth when no man can work. As long as I am in the world, I am the light of the world.’ When he had thus spoken, he spat on the ground and made clay of the spittle, and he anointed the eyes of the blind-man with the clay. And said unto him, ‘Go wash in the pool of Siloam.’ He
half-cure Thomas of Monmouth explained: that ‘he [St William] has reserved his relics for another occasion’ suggesting that some saints, at least, would pick and choose whether to assist a cure-seeker or whether to preserve their powers for future requirements.\footnote{WoN.3.xiii.}

Regardless of the manner in which the saint chose to bestow a miracle cure to alleviate muteness or deafness, or both, it is still not possible to explain why so few cases of these afflictions have found their way into the hagiographic sources. One question therefore remains when considering these unusual accounts: what can be understood of these afflictions because of a lack of representation within hagiography?

It is important to acknowledge that this present work only considers evidence from eight hagiographies and other \textit{miracula} might well record larger numbers of these disabilities. However, given the evidence produced by the eight sources it can be suggested that the holy healing of speech and hearing impairments was not particularly common in twelfth century England. What is more, the ability to speak, and perhaps to a lesser extent to hear, is recognised by the hagiographies as important thus it cannot be concluded that the hagiographers would have purposefully by-passed such miraculous reports when creating the \textit{miracula}. Therefore, can it be taken as assumed that fewer mute or deaf people were successfully finding a cure from the saints?

Although communication was important either disability would not have affected the individual’s ability to be a fully-functioning member of society in any other way; the boy cured by Swithun, for example, appears to have been begging quite capably, with the use of signs and gestures, before being taken in by the Almoner; whilst the man from Worcester who spoke inwardly to God was able to prove his humility through visual if not vocal acts of piety, as did Ulf and Ælred when praying to Æthelthryth ‘by means of emotions rather than speech’.\footnote{MaS.52, MO.7, LE.2.cxxx.} Evidently there were ways to be heard by God, the saints, and the community even if lacking the power of speech. Therefore, if some form of communication was possible, albeit not ideal, there was surely a less pressing need to

\begin{quote}
went his way therefore, and washed, and came seeing. The neighbours therefore, and they which before had seen him that he was blind said, ‘Is not this he that sat and begged?’ Some said, ‘This is he’: others said, ‘He is like him’: but he said, ‘I am he’. Therefore they said unto him, ‘How were thine eyes opened?’ He answered and said, ‘A man that is called Jesus made clay, and anointed mine eyes, and said unto me, Go to the pool of Siloam, and wash: and I went and washed, and I received sight.’ John 9:1-11.
\end{quote}

\begin{thebibliography}{9}
\bibitem{WoN.3.xiii} WoN.3.xiii.
\bibitem{MaS.52, MO.7, LE.2.cxxx} MaS.52, MO.7, LE.2.cxxx.
\end{thebibliography}
seek out saintly salvation; hence, fewer accounts of this nature. It was not that these
disabilities were wanted, or that a cure was not desired, but they were manageable and
did not require immediate attention.

Further study would be required before it would be possible to arrive at any definitive
conclusions, however it is important to acknowledge that both mutism and deafness
were as problematic for medieval sufferers as any other disabilities. Although these
might not have been afflictions which were as limiting as blindness or paralysis they
would have impacted upon the lives of those who suffered from them. Moreover, not
only were there social implications owing to the difficult faced in communicating but, it
appears, little success could be found from either medicine or miracles when searching
for a cure. In closing then, if all else fails, it might be worth remembering one of the
more unusual remedies given in *Physica* by Hildegard of Bingen:

If someone is deaf, cut off a lion’s right ear. Another person
should hold it on the ear of the deaf person, until the inside
of his ear warms up from the ear of the lion, and no longer.
He should say, “Hear adimacus, by the living God, and by the
sharpness of the lion’s strong hearing.” Do this often and he
will recover his hearing.
Hildegard of Bingen. *Physica*49

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Internet Resources


