The Course of God's Providence: Religion, Health, and the Body in Early America. By Philippa Koch. New York: New York University Press, 2021. 263 pp.

During the 1793 yellow fever epidemic in Philadelphia, St. Michael's and Zion Lutheran Church, then the largest Lutheran parish in the American colonies, continued to gather for worship each Sunday, despite much criticism from those who thought it unsafe. Pastor Heinrich Helmut defended their decision, noting that the congregation practiced what we would today call "social distancing," kept the windows open, and shortened the service to mitigate potential spread of the contagion. The services, he argued, helped address the "hurtful fear" (129) that had engulfed the city.

This anecdote is one of many enlightening glimpses offered by Koch in her study of religion and health in the eighteenth-century trans-Atlantic world. The book was conceived and begun before we had heard of COVID-19, but its timely release in the midst of the ongoing pandemic offers an opportunity to learn from our forebears how to think religiously about sickness and death in the context of God's Providence.

Koch examines a variety of sources, including "sickness narratives," in which Christians wrote accounts of their own illnesses or those of their loved ones, and Christian tracts offering medical advice, such as John Wesley's oft-reprinted *Primitive Physic*. It goes without saying that eighteenth-century people lived in much more immediate contact with sickness and death than we do—one reason the coronavirus has been such a disruptive force in society and church. Listening, then, to how our ancestors tried to make sense of sickness can help us reconceptualize our own pandemic experiences.

Not that epidemics are Koch's primary focus; the Philadelphia yellow fever outbreak is one chapter, but there is much more. She shows us how Christians understood more mundane illness, maternal mortality, and infant and child death. Cotton Mather, she tells us, was widowed three times and fathered fifteen children, only two of whom survived him, and his reflections are sobering. One of the strengths of Koch's work is that she gets beyond the too common reliance on Puritan writings in trying to understand Protestant

views. Mather is a major source for her, but so are the Lutheran Salz-burgers in Georgia and the evangelicals influenced by Wesley. She reveals the sometimes unexpected mutual influences among these individuals and groups, and she argues persuasively that there was a common Protestant approach to sickness and health, albeit with some different nuances among Calvinists, Lutherans, and Arminians.

That common approach was rooted in a robust sense of God's Providence. Koch rightly demonstrates that even among the Calvinists, this must not be viewed as simple fatalism. While these Protestants wrestled every bit as much as we do with the question of why a gracious God would allow suffering and death, they seldom doubted God's steadfast benevolence. The Christian's task, they believed, is to submit, yes, but also to struggle to make sense of it. The way to do this was through retrospection—a faithful and honest examination of one's past life and present suffering with the goal of finding the transcendent meaning in these experiences. To the extent that one can believe their accounts, they often got there.

Many pastors and others have faced the same struggle intensely these past two years. In that context, this book may have a wider usefulness than just an interesting study of one minor topic in American religious history. The perceptive reader will be moved by surprising insights into how eighteenth-century Christians faced sickness and death with confident assurance—lessons, we are discovering, we still need to learn.

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