Christians' Responses to Plagues: A Glimpse at the History

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The title promises a "glimpse" at how Christians have responded to plagues throughout history, and a brief glimpse is all that can be discovered. There were no scientific surveys of disease outbreaks until quite recent history, and yet we know that disease and devastating local outbreaks were a constant feature of life before modern science gave explanations for transmission and kept track of significant epidemics. There are, however, a few instances that can help us understand how Christians and the church acted in situations of plagues. The first is in the mid-third century, in the midst of civil wars in the Roman Empire as well as serious state-led persecution of Christians. In such a dire situation, we have two bishops—one in Carthage in North Africa and one in Alexandria, Egypt—who give accounts of how things were when "pestilence" added to their already painful situation. In the fourteen century there are sources for knowing something of how Christians behaved in the Great Plague of bubonic fever. In the post-scientific era there are three plague-like events in the twentieth century that are instructive: the "Spanish Flu" pandemic of 1918, the epidemic of polio cases in the mid-1940s, and the beginning of the HIV-AIDS global epidemic late in the century. All of this history can lead us to thoughts about the church in our present pandemic.

Mid-Third Century: When Christians were a Persecuted Minority

Cyprian had only recently been baptized when he was elected bishop of Carthage in 249. Empire-wide persecution of Christians began about 250, and Carthage was seriously affected. Shortly after the persecution began, a serious plague broke out in Carthage. This marked an early point in a pandemic that lasted more than a decade and affected the whole of the Roman Empire. It also was a time of political instability, with emperors assassinated and generals replacing them every few months. Rarely was an emperor ruling for years. Blame was placed on the Christians for the plague, and Cyprian replied to such charges. This time of plague is called "The Plague of Cyprian," not because he was considered responsible for it, but because of all the writings of the time that deal with the pandemic, only his sermon/treatise "On the Mortality" gives an extended description of the effects of the disease on its sufferers. On the basis of this description, modern writers have attempted a diagnosis and generally classify it as some sort of virus that began in animals and crossed over to humans, either of a swine or bird flu variety or a hemorrhagic fever like Ebola. Whatever it was, it was a new disease, spreading rapidly, highly fatal, and with enormous social consequences.

Within the majority pagan population, many relatives of those with the disease evidently abandoned them, leaving them to die outside the house, unattended. This had often happened in epidemics, but now the streets were filled with the dead and dying. It is in such a situation that the Christians displayed a radically different behavior.

In his biography of Cyprian, Pontius, a deacon who had served with him, recalls a sermon that the bishop gave calling the people to help their neighbors, caring for the sick and burying the dead, whether they were Christian or not.

Cyprian also responds to the question of why the Christians are suffering from this disease as much as the pagans are. He says that one does not become a Christian in order to avoid suffering. Christians and non-Christians are all part of one human family, and whatever affects one can affect all. He says, "We are all, good and evil, contained in one household. Whatever happens within the house, we suffer with equal fate."[1] But Christians, though they suffer physically as much as others do, may have their faith strengthened by suffering, whereas others, who suffer without faith, can only complain about their losses. He writes

> that pestilence and plague which seems horrible and deadly, searches out the righteousness of each one, and examines the minds of the human race, to see whether they who are in health tend the sick; whether relations affectionately love their kindred; whether masters pity their languishing servants; . . . whether, when their dear ones perish, the rich, even then bestow anything [on the poor], and give, when they are to die without heirs.[2] (*On the Mortality*, 16)

A decade later, in Alexandria, Bishop Dionysius also wrote about his people surviving the persecutions and the civil wars only to be confronted with the pandemic. His letters are preserved by the fourth century historian Eusebius. Dionysius notes the same contrast between Christian and pagan actions during the plague: that the pagans abandoned their sick and dying whereas Christians showed their love and concern for them. Evidently many people were attracted to the church precisely because of the actions of Christians during this time of pandemic.[3]

Throughout the second and third centuries, the church was creating local structures that would ease the task of helping the poor and the sick. In general, this was the task of deacons, both male and female. It was probably also the task of the orders of widows and virgins. Food, clothing, money for the poor, care for the sick, comfort for the dying: all of this was considered to be essential to what it meant to be the church. The bishop was the leader in this and probably set the tone for how well these ministries were carried out. In Carthage, Cyprian was clearly a model for a graceful response to Christian and non-Christian alike when a situation like the pandemic occurred.

The Fourth Century and Beyond: When the church is the dominant religion

The worst persecution came as the new century began. And it ended abruptly after about a decade. The emperor who ended it was Constantine, and he not only stopped the persecution, but he also made clear that all religious groups were to be permitted as long as they did not break the laws of the empire. Christians, Jews, pagans all were equally to be tolerated. But even as this declaration was issued, the emperor made clear that he himself was greatly supporting the Christians. By 325, Christians alone had tax exemption on their property; their clergy were exempt from serving in the military; their bishops had access to the imperial post—the only mail service available. It became obvious to everyone that Christians were more than first among equals. The emperor and his mother built huge churches. As a result, there

was a rush to join this favored group, and within seventy-five years, the Christian Church went from being a persecuted minority to being the established religion of the Roman Empire. Jews were tolerated but not supported, and the old pagan religions could not hold public ceremonies.

This new situation gave rise to both problems and opportunities. In terms of health care, it meant that the church could now carry out even more extensive work. Within the fourth century, the first true hospitals were formed, and, in association with the newly developing monastic movement, there were people trained to care for the sick. This was especially true in the Eastern half of the empire, where the great urban centers were located. In the West, the structure of the empire itself collapsed in the fifth century, and, with so many constant invasions by various Germanic groups, there were few urban centers. Even Rome dwindled from a million inhabitants at its height in the early second century C.E. to about sixty thousand at the end of the sixth century. The loss of maintenance of water systems and swamp clearance led to disease, and the ancient supply chains for food had also been destroyed. Urban centers could really no longer be supported. So the West was largely rural, with a far smaller population than the East. Monasticism developed later in the West, not really growing rapidly until Benedict in the sixth century. But then it really did grow, and with it, a system of health care centered on the monastery, where there could be charitable work for the poor in the area as well as probably the work of the infirmarian in the monastery who was probably the only trained medical person in the area. The infirmarian grew the herbs, made the medicines, and could be consulted by those in need outside of the monastery itself. This remained the situation for centuries in the West until the twelfth century, when the crusade led to the development of hospital monastic orders. After that, in the high Middle Ages, the study of medicine was a concern of the emerging universities, all still under the general rule of the church.

And yet, it was just after the great high point of the Middle Ages in the thirteenth century that there was the most dramatic health problem in a thousand years: the outbreak of bubonic plague, the Black Death, the Great Plague of the fourteenth century. The century began with a strange climate change we now call "the Little Ice Age." Harvests failed because of freezes, too much rain, crops rotting in the fields, and the result was famine and malnutrition for more than a generation. Then came the brown rat, the result of increased trade from East to West. This rat carried a flea that took the bubonic bacterium from the rat and gave it to humans. In the West, families were accustomed to living close to animals, especially in the northern areas where the heat from the house helped to keep animals warm by barns attached to the houses. Fleas had a good situation. The plague killed more than twenty-five million people in Europe, about one-third of the population.

How did the church—how did Christians—respond? It is a very mixed report from the evidence of the time. There are comments that priests abandoned their flocks, which would mean refusing the sacrament of the dying—extreme unction. And yet, the mortality rate for priests and religious leaders is higher than that of the general public. So some were very faithful in their work and others were not. The same would be true of the church members: some did abandon their families when disease broke out. Others acted lovingly. We have to remember that in the third century, in the midst of persecution, those who identified themselves as Christians were willing to be martyrs, and that was a clear possibility. Cyprian himself says that in the

midst of the pandemic, it probably would be easier to risk dying of the disease than facing torture in the persecution. The distinction between the behavior of Christians and that of pagans was dramatic, because the ethic of the Christians was new to the wider society. In constrast, the wider society acted in what was a traditional way. But when the whole society is Christian, and there is no cost for being part of the church—in fact, there would probably be a cost for refusing to be—then we should not be surprised that the ethics of the church may not be ingrained in everyone, but the actions of some would be based on self-interest rather than love of neighbor, and there was a reaction. The church's message was that it was the sin of the people that caused God to send the plague. Such a message could easily lead to the retort that some of the sin was also the institutional church's, since the plague occurred in the midst of the Avignon Papacy, which laid bare the political involvement of official church life. The aftermath of the plague was followed by the Great Western Schism, with a pope in Avignon and another in Rome, causing even greater loss of authority for the church.

There is an interesting contrast between what the church claimed in response to the Great Plague and Cyprian's statements earlier that Christians and pagans are both part of one humanity and suffer all the ills of the world together. Of course Cyprian believed God's Providence ruled the world, but there was always a distance between particular events and God's actions. Cyprian did not blame God for the pandemic, nor did he hold that God was directly punishing any particular group by means of the plague. Both good and evil are suffering; both Christian and pagan are suffering. There was solid and good theological writing and preaching at the time. The same cannot be said for the mid and late fourteenth century. Both clergy and laity directly blamed God for the plague and sought to find explanations as to what particular humans were to blame. Jews, witches, and others were found as targets. Theology was reaching its low point in the late medieval era and had little to say that was helpful.

Though many of the local parish priests acted heroically—and almost half of the local clergy were lost to the plague—their replacements were not of the same order. That is, if the church lost half of its clergy and the population itself lost probably at least thirty percent, how would the church replace the losses? It appointed many who were far less qualified than the ones they replaced. The church was losing its authority among the people because its easy explanations of why such a disaster could occur or what it meant was unsatisfactory. The hierarchy provided far less competent local representatives than before, all the while being compromised at the highest level of its organization.[4]

The Protestant Reformation

The success of the Reformation—that is, the fact that so many nations followed it and that the separation from the Roman Catholic Church actually succeeded—cannot be imagined without the serious loss of authority and relevance to their lives that Europeans in the late fourteenth and the fifteenth century felt for the Catholic Church. Protestant areas as much as Catholic ones retained a single church monopoly, a state church form of Christianity. Therefore, in Protestant areas, there were no more monasteries or convents with whatever medical services they had offered. Nor did the Protestants have their own orders to replace them. But people had come to expect the church to provide such services. In many areas it became the state that was re-

sponsible for this task, though it was often carried out at the local area by the parish church. The universities were also providing trained doctors who could also replace the earlier monastic infirmarians.

In Geneva, it was expected that pastors would know all of their parishioners and visit them in their homes. This also extended to pastors visiting local jails and hospitals. When plague struck in 1542, a plague hospital was set up outside the city, separating plague victims from both the well and those sick from other causes. It was very difficult to find a pastor willing to visit this hospital. Twice there were volunteers who visited but eventually died of the plague. Finally it was decided that all pastors had the duty to visit their parishioners who were in the plague hospital. For Calvin, it was clear that though laity could flee from the plague, as long as such a flight was consistent with their duties to their families, pastors were shepherds who could not flee when the sheep were most in need of their ministrations.

It is interesting that there were pastors at the time, in other cities, who believed that plague was sent from God to punish the wicked, and therefore it was not legitimate to take precautions against the disease. Theodore Beza, Calvin's successor in Geneva, replied that God works though secondary causes and has given us knowledge that can help us avoid the plague. It is right for us to use these, including flight, as long as this does not go against other duties that we have. We must always deal charitably with neighbors, walk piously with God, and fulfill the vocation God has given us. God may have sent the plague, but God has also given us reason to discover ways to avoid it or to deal with it.[5]

Twentieth Century

It is a long jump from the sixteenth to the twentieth century, but the past century had within it three significant outbreaks of pandemics or epidemics. One of these was the outbreak of "Spanish Flu" just at the end of the First World War, a form of swine flu that began possibly in a pig farm in the United States. It was named "Spanish" not because it originated in that country, but Spain, a neutral country in the First World War, gave out the statistics of the disease ravaging its population. Other countries involved in the war, though suffering equally, did not let it be known, for fear it could encourage the enemy. That delay probably gave the virus an advantage. When the war ended, returning troops brought the virus with them, increasing the problem in this country and many others. That epidemic had great parallels with the pandemic of today, yet it occurred before there was an awareness of viruses (as opposed to bacteria).

The second epidemic was an outbreak of polio at the close of the Second World War, which intensified into the early 1950s, attacking young children particularly. In both cases, perhaps because of the unifying effect of the wars on the public in this country, there was a readiness to obey government directives in terms of quarantines and limiting exposure to groups. But the fear of these diseases cannot be overestimated. At least the polio epidemic ended quickly with the successful development of a vaccine and its inexpensive and wide distribution. Where its use has been universal, the disease has been wiped out.

The other pandemic in the last century was HIV-AIDS. (WHO prefers the term "global epidemic.") The death toll worldwide for this disease is far higher than that of influenza in the early part of the twentieth century. It is estimated that the death

toll in the three years of that flu pandemic was between twenty and fifty million. Since 1980, the death toll from AIDS has been about eighty million, and though the number of deaths every year is declining, it is still very high. There is a high death toll if there is little testing or if medication is not available. For those who do have access to these things, the death toll has been greatly reduced.

The churches' responses to HIV-AIDS requires nuanced comments. If we consider only this country, our perception of how the various churches reacted may be limited to how they associated the disease with homosexuality. Many Christians initially assumed this was only a disease of gay men, and some declared that it was God's judgment on such behavior. At the time, in the early 1980s, homosexuality was a very difficult topic for churches to discuss. When drug users became the next identifiable group to suffer from the disease, condemnation was again easy, with a false sense that church members do not fall into these categories. There were calls for compassion rather than condemnation, but the association with homosexuality and drug use made it a difficult topic of discussion for many Christians.

Worldwide, however, the disease was associated with heterosexual men and women and present at birth to infants born to infected mothers. In Sub-Saharan Africa, the death rate for parents from HIV-AIDS has led to enormous numbers of orphaned children. The Roman Catholic Church in this country seemed to be known only for its rejection of the use of condoms, which is a major form of protection against the AIDS virus. In spite of this, worldwide the Roman Catholic Church provides at least a quarter of all medical treatment for AIDS victims, particularly through its medical missions in Africa and other countries.[6] Among both Protestant and Catholic churches, there often is a disconnect between official declarations of the institutional church and the actual activity at the local level. A denomination may issue support for HIV-AIDS victims, and yet local congregation feel otherwise; or a denomination may condemn the victims, and yet on the ground many congregations and church organizations actually do provide health care. This may be local congregations that develop ministries to AIDS victims or drug addicts.

Today

We are now in the midst of another pandemic: COVID-19. What we can see from this brief history is, first of all, that there is a great human tendency to want to find guilty parties that can be blamed for the outbreak. We have seen that in almost all epidemics. The church may be both the harborer of such opinions and the major opposition to them. This is particularly true at the congregational level. We need to remember Cyprian's words, that Christians are part of the same human family with all people and suffer the same ills. He thought in terms of the whole community rather than the church in opposition to the world around it. The ancient church believed that the health of the congregation and the society was part of its ministry, and they provided structures to carry it out. What that would mean today is an interesting and necessary question. It is also clear that the church fares better in its response to pandemics when its leadership and pastors share a solid theology. The resort to easy blame is no substitute for careful theology.

As the population of the world increases and the movement of peoples grows, it is clear that many of the modern outbreaks of new diseases come from the interaction of animals and humans. The 1918 flu, Ebola, HIV-AIDS, and COVID-19 all have

as their suspected origin the leap from an animal virus—swine, birds, chimpanzees, bats—to a transmissible human virus. This means that the human food chain needs to be improved and made more secure. Even in this country, the supply chain for processed pork and chicken has proven susceptible to rapid spread of disease among those who process our meat.

The food chain is in danger and is a danger for the creation and spread of new viruses, apparently in increasing frequency. Christians, as part of the one human family that depends upon the current food supply chains, need to work on this issue. The Bible is concerned about food and about how it is processed. Christians sometimes seemed to think that once the Jewish dietary laws could legitimately be considered unnecessary, anything else the Hebrew Scriptures said about food could be forgotten. We need to work on the theological issues bearing on food, its production and distribution, and, with the rest of the human family, create strategies for amendment. The church's response is always mixed. Greater education in discipleship and its impact on society would help. The church may reflect the all-too-common prejudices of the society, but it may also be the seedbed of invention in care and cure. Which of these responses has greater effect and publicity in the wider world is a critical issue.

Notes

1 *"An Address to Demetrianus*, 19, T*he Ante-Nicene Fathers* (Grand Rapids: Wm. B. Eerdmans Publishing Company, 1957), V.457.

2 *On The Mortality*, 16, Ibid.,473.

3 Eusebius, *Church History*, VII.xxii, 7-10, Nicene and Post-Nicene Fathers (Grand Rapids: Wm. B. Eerdmans, 1952), I, 307.

4 Philip Zeigler, *The Black Death* (Dover, NH: Alan Sutton, 1993) pp. 211-13.

5 Scott M. Manetsch, *Calvin's Company of Pastors: Pastoral Care and the Emerging Reformed Church, 1536-1609* (New York: Oxford University Press, 2013), pp. 285-289.

6 https://www.catholicsforchoice.org/issues_publications/the-lesser-evil/ Accessed July 10, 2020.