Samuel Cohn's voluminous monograph, titled *Epidemics: Hate and Compassion from the Plague of Athens to AIDS*, sets its sights on challenging an almost axiomatic position in the history of epidemics, a position linking the latter to social history, the history of collective behaviour and of mentalities as well as the history of emotions throughout the centuries. Thus, beginning with the fifth century BC and the Plague of Athens described by Thucydides, and going all the way to the twentieth century and AIDS, Cohn seeks to overthrow an established historiographic perception that views the appearance of epidemics as undermining the bonds of solidarity, breeding hate, erasing any feelings of compassion towards the victims of the disease, fanning the embers of hostility and, more importantly, leading to the expulsion of entire population groups. In other words, this book deals with the questioning of the reactions to the epidemic phenomenon by part of the historiography, which projects the experience of the Black Death, and the hate, the expulsions and the violent reactions that took place after its outbreak, onto the epidemic phenomena that followed in later centuries. Similar to this debate, an objection is raised against yet another historiographical “stereotype”: that the ignorance regarding how the disease was transmitted, the ignorance of the nature of the disease itself, as well as a lack of effective medical cures, contributed to the intensity of the waves of suspicion and hostility towards specific groups and population categories.

Cohn's book is based on a myriad of first-hand evidence; after all, it is a practice that the historian follows in most of his works. Cohn himself states in the introduction that, instead of following the well-trodden path, that is, going through the multitude of published studies on the subject, he chose the more difficult and time-consuming process of studying the primary sources. Thus, the journey into the epidemics of antiquity, the Middle Ages and the early modern period was “organised” through works of history, chronicles, medical tracts, while numerous medical journals and mainly newspapers were consulted for the nineteenth and twentieth centuries.

The book is arranged in five parts. The focus of the first part is on the history of epidemics in antiquity and the Middle Ages, while the second deals with syphilis and plague epidemics during the early modern period. Modernity and
epidemics of hate, that is, cholera and smallpox, take pride of place in the third part. Still on the subject of modernity, the fourth part, titled “Plagues of Politics”, focuses on the plagues of the Third Pandemic. Yellow fever and the Great Influenza form the subjects of the fifth and final part. Next come the conclusions and, in lieu of an epilogue, the author chooses to present AIDS/HIV in a chapter titled “A Pandemic of Hate, Compassion, and Politics”.

Thus, using the epidemics of antiquity as a starting point, and based on descriptions of epidemic episodes, Cohn concludes that in the majority of cases there is no reference to the causes of the disease, while its appearance is attributed, to a significant degree, to natural causes. For instance, Thucydides blames the outbreak of the plague on the wet climate of Periclean Athens and the city being overcrowded because of the war, not on the poisoning of the wells of Piraeus by the enemy. While still on the subject of antiquity, Cohn makes the keen observation that, in order to attribute the epidemics to natural causes, some authors occasionally become critical of others seeking an explanation based on moral causes (29). With regard to the hunt for scapegoats, historical reality does not corroborate this dimension; on the contrary, it is ascertained that, even when this happens, it is not the outsiders, those that are different, that are targeted, but figures of authority, whose sacrifice/self-sacrifice ensures the unity of the community (34–35). There is no confirmation of a gloomy atmosphere of expulsions and civil strife until late antiquity and the early Byzantine centuries. On the contrary, state authorities, along with private citizens, are often portrayed as offering practical support to the sick through acts of charity; however, tracing the motives behind these initiatives even deeper would have enriched the text (43).

In the next part, Cohn moves in a field with which he is more than familiar: the Black Death. Here, without downplaying the harshness of the expulsion of Jewish communities or the victimisation of groups and individuals, it is made clear that the expulsions were not the work of the masses of artisans, laborers and peasants, but of the elites who were financially indebted to the Jews and now took advantage of the situation in order to settle accounts in a dramatic fashion. Furthermore, it is stressed that these actions did not take place in every European region, but only in some of them, while in reference to the participation of the entire populace in acts of mass hysteria the central question arises as to whether there was actually mass hysteria in the first place. Against the view that the plague played a key role in the breakdown of society, centred around the dissolution of the bonds of solidarity on the familial level, he argues that this behaviour was not representative of what took place during the equally lethal epidemics that followed, with the latter acting as a unifying factor “across the city walls, factions, class and gender” (67), perhaps because, according to contemporaries, sacrifice and philanthropy were proving more effective in protecting the community than flight and abandonment.

But which were the mechanisms of unity (chapter 4)? To what degree did
the cult of saints and litanies functions as such? After a brief excursus on legislative activities following an epidemic and the institutional interventions of the mechanisms, he goes on to refer to the litanies, arguing that after 1348 these activities united the wider urban community in the European area. Likewise, the collective veneration of plague saints, even though its appearance is much later, also strengthened the bonds between the members of the plague-stricken societies through collective repentance and collective celebrations of thanksgiving (91–92).

In the second part, Cohn focuses on early modernity, zeroing in first on syphilis and then on the Spreaders of plague, asking the same questions with regard to collective behaviours, assigning blame and the incrimination of specific groups of the population. As in the previous part, widely held historiographical views are also questioned. Thus, syphilis for the most part is not attributed to the “others”; instead, it is linked to natural causes and the polar of sin and punishment. So, even if the names of the disease could theoretically incriminate other peoples and regions (*mal francese, mal de Naples*), in reality that was not the case. Likewise, it is noted that measures to control sexual activities and transgressions were not meant to marginalise specific groups, such as prostitutes, but were aimed at the entire population (113). In addition, even if it was easier for women to be incriminated through the use of “scientific” arguments, nevertheless they were not targeted as carriers of a disease which seems, according to historiographical approaches, to have been “domesticated” over time, just as had happened in the regions where it had originated.

Yet another dimension of epidemics is linked to the notorious *untori* or *engraisseur* (plague Spreaders). Cohn continues to claim that their expulsions had neither reappeared by 1530 nor were they of long duration (160); while even in the best-known and well-studied case, that of 1630 in Milan, those that had been targeted by an *unspoken alliance* of the poor and the elites were not foreigners or the lowest of plague cleaners, but locals.

The third part introduces the reader to modernity and is dedicated to epidemics of hate, that is, cholera and smallpox. Its basic position is that modernity does not undermine the two parts of the equation of disease, on the one hand, and hate, on the other; instead, it enhances its lethality. Riots stemming from the outbreak of cholera in Britain in the early 1830s and a slump in these reactions by the late 1840s are linked, according to the author, to their “energy” being channelled into the political movements of the time. In any event, the acts of violence sparked by rumours of body snatching, of people being buried alive, etc., were perpetrated by the poor and those on the fringes of society, and aimed at members of the elites and physicians.

It goes without saying that cholera-inspired riots exhibit differences related to the different environments where the disease took hold, as well as the different historical contexts, such as those of the 1830s and 1890s. The author, however, recognises here the existence
of a common pattern running through entire geographic entities, including Europe, as well as America and Asia, a pattern that does not identify the victims of the disease with the victims of social violence. Cohn emphasises the reversal of roles: here it is the socially powerless masses that target the elites, the medical professionals, the health authorities, who are accused of seeking to eliminate the former. This pattern will remain unshaken even after the disease’s “mechanisms of transmission were understood and the bacillus had been cultured” (203). On the contrary, even during the twentieth century, and perhaps since, the appearance of cholera would continue to spark collective behaviours of violence and hate. Within this context, by examining the Italian paradigm of the twentieth century, Cohn notes the analogies between the popular reactions to the disease’s epidemics during the nineteenth century to reach the conclusion that the same conspiracy theories would survive until the last great cholera epidemics in Italy during the 1910s. However, even when they finally receded, this would fail to create a bond of trust “between popolino and the state” (230).

Earlier, however, in the gloomy atmosphere of the epidemic and the violent outbursts of hate, there were still acts of charity and solidarity, either through the initiative of traditional bodies dedicated to philanthropy, like the church, or from members of organisations “tied to the anti-clerical, democratic politics of the new republic” (253), who in 1884, disregarding their own safety, travelled to the afflicted regions and placed their lives in danger in order to render assistance to their southern “fratelli”. Similar collective demonstrations of solidarity, however, failed to materialise during the epidemics of the 1910s.

Moving on to the epidemics of hate in the next chapter of the third part, the author turns his gaze to smallpox; when the latter made its appearance in the New World as “a big, new and mysterious killer”, it did not provoke blame, prejudice or violence. This would happen much later, during the last decades of the eighteenth century in North America, and in fact at a time when “the medical breakthroughs of the ‘laboratory revolution’ were progressing” (282). Contrary to what had taken place with cholera, the victims in this case were not members of the elites, medical staff, the authorities and officials, but blacks, Chinese immigrants, Jews and vagabonds, with wealthy bourgeois and distinguished citizens playing the part of persecutors. Here there were no fears going around that the elites were conspiring to eliminate the poor. Nor were there liberators of imprisoned victims; instead there were attacks on isolation facilities. On the contrary, “smallpox myths […] turned on racism, hatred of foreigners and fears of lower classes” (297). And, of course, instances of altruistic behaviour towards the victims of the disease were very rare; a disease for which the tools to treat it were already in existence. The third part concludes with smallpox violence in Victorian Britain. Here the different reactions to the epidemic in comparison to North America are stressed, as well
as the limited nature of the violence. However, “the British use of the courts as opposed to street violence may in the end have proved more deadly to smallpox victims than the physical cruelty inflicted by individuals or groups in America” (307).

The fourth part of the book is devoted to plague and the Third Pandemic, the *plagues of politics*, as they are called, centred around India, where 63 out of 111 violent incidents during the epidemic took place, China, and cities like Honolulu and San Francisco. In India in particular, as the author stresses, reactions and violent clashes did not stem from conspiracy theories; they were documented protests against the abuses of officials and European soldiers who knew little about indigenous languages, culture and customs, resulting in reactions on the part of the indigenous populations. Even in China, however, conspiracy theories targeting foreigners were essentially politically coloured reactions against the excesses and ineffectiveness of the measures taken to contain the plague, which discriminated against the locals. The Third Pandemic was undoubtedly marked by acts of hate, suspicion and blame assignment that targeted different social and ethnic groups. It is also certain that some of these acts were bloody; however, as it is stressed, these were not the rule. On the contrary, two points of particular interest are touched on. The first relates to the social identity of the protests and riots within which social subjects and groups spanning the entire social spectrum, laborers, merchants, whites and people of colour, intellectuals, in some cases joined forces against state abuses, colonial administration and the contempt shown towards local culture and customs. The second is linked to the shape and form of the protests, peaceful assemblies at first, petitions and letters to the officials in charge and protests sparked by economic and social conditions and realities.

In the fifth and final part of his book, Cohn moves from epidemics of hate and the plague of politics to the plagues of compassion: yellow fever and the Great Influenza, also known as the Spanish influenza, Spanish flu, *la Spagnola*, etc. As he observes, despite the fact that the name linked the latter to a specific nation, this resulted in neither the incrimination nor the expulsion of the Spanish element because of the outbreak; the same thing, after all, had taken place centuries earlier in the case of syphilis and its various names. I believe that the key question the author poses in this part, whether the fear and panic caused by an epidemic can evolve into hate and collective manifestations of violence, is answered throughout the fifth part. Instead of sparking social violence, the deadliest (in demographic and other terms) epidemic led to compassion and acts of social solidarity. Within this framework, when under the weight of the political and military circumstances it was rumoured that the Germans had developed the disease as a biological weapon, these theories were treated with scepticism and promptly deconstructed. But even the imposition of draconian safety measures to stave off danger, measures which in some instances, as in the United States, violated the boundaries of privacy and would have
been expected to cause reactions, instead failed to undermine the civic consensus, while noteworthy acts of charity were not rare. In fact, while on the subject of the US, emphasis is placed not only on cross-border charity, but on cross-gender volunteerism as well. Indeed, the data presented by Cohn makes it clear that it was then, for the first time in history, that the media promoted women’s participation, which appeared to be on a massive scale. Was it propaganda for assistance or personal and psychological reasons, as it arises from historical research, that lay behind women’s mobilisation in the US? These are questions in need of an answer, much like those regarding the role of men behind the actions of women in other historical examples (508). Similar questions are put forth by the comparative study of the yellow fever epidemic, where, in spite of the mostly minor differences in the way countries in the same or different continents responded and reacted, there is a repetition of the basic pattern: a lack of manifestations of hate, expulsions and violent reactions, despite the often harsh measures taken by the authorities to face the emergency, measures which could have sparked these kinds of reactions.

Cohn’s work ends with a chapter, in lieu of an epilogue, on AIDS, the epidemic which, as he argues, turned historians’ attention to the socio-psychological effects of past epidemics (540). Here he refers to limited episodes of violence and small-scale conspiracy theories, and he discusses the stigmatisation of patients and carriers, as well as the acts of compassion under the weight of the threat.

In this monograph, which moves along a chronological arc that is objectively difficult to access for many reasons, mainly methodological ones, an arc spanning antiquity to the modern era in a global context, the author, as we have already mentioned, approaches structural facets of epidemics through the citation of copious amounts of primary sources and, in some cases, a re-reading of them, arguing through his work in favour of the historians’ raison d’être. In this opus, Cohn offers a vast canvas to research and to historians to colour it with their answers to the pivotal questions—questions which he articulates with clarity from the start and are mainly concerned with the notions of compassion and solidarity during the various epidemics and their content in relation to the picture painted by historiography for decades. Of course, the truth is that all those who have dealt with the subject of epidemics have come across, somewhere inside the pages of their sources, instances of people who acted differently, like old Nick Bill (270), who did not refuse help and solidarity to the sick even in extremely harsh circumstances. After all, one of the charms of history is the flexibility of the schemata and the awkwardness that this causes to every historian-researcher who is prepared to grasp it.

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