

# Review Essay

## Writing the History of Pandemics in the Age of COVID-19

STEPHEN COLBROOK

Peter Baldwin, *Fighting the First Wave: Why the Coronavirus Was Tackled So Differently across the Globe* (Cambridge: Cambridge University Press, 2021, £20.00). Pp. viii + 385. ISBN 978 1 3165 1833 5.

John Fabian Witt, *American Contagions: Epidemics and the Law from Smallpox to COVID-19* (New Haven, CT: Yale University Press, 2020, £12.99). Pp. x + 174. ISBN 978 0 3002 5727 4.

Martin Halliwell, *American Health Crisis: One Hundred Years of Panic, Planning, and Politics* (Oakland: University of California Press, 2021, £27.00). Pp. xiv + 424. ISBN 978 0 5203 7940 4.

Since early 2020, pundits and commentators have scrutinized the history of past pandemics for answers to a series of questions shaped by COVID-19: what strategies have worked in the past to stem the spread of contagion? How long do epidemics typically last? Are vaccines an effective “magic bullet” against infectious diseases? The coronavirus crisis spawned comparisons to diseases as epidemiologically diverse as influenza, the Black Death, cholera, HIV/AIDS, and polio, as people excavated the records of past pandemics to try to make sense of the worst public-health disaster for over a century.<sup>1</sup> Policy prescriptions emerged quickly from these historical analogies. Many public-health experts pointed to the trajectories of epidemics like the 1918–19

Institute of the Americas, University College London. Email: [stephen.colbrook.19@ucl.ac.uk](mailto:stephen.colbrook.19@ucl.ac.uk)

<sup>1</sup> Chris Wilson, “The Eerily Similar Pandemic We Could Have Learned From But Didn’t,” *The Conversation*, 19 May 2020, at <https://theconversation.com/the-eerily-similar-pandemic-we-could-have-learned-from-but-didnt-138072> (accessed 19 Sept. 2021); Jeffrey Kluger, “What the History of Polio Can Teach Us about COVID-19,” *Time*, 5 May 2020, at <https://time.com/5831740/polio-coronavirus-parallels>, (accessed 21 Sept. 2021); Edoardo Campanella, “The Bubonic Plague Killed Feudalism. COVID-19 Will Entrench It,” *Foreign Policy*, 20 Aug. 2020, at <https://foreignpolicy.com/2020/08/20/bubonic-plague-pandemic-covid-19-inequality-feudalism> (accessed 21 Sept. 2021); Alex Knapp, “The Dr. Fauci of the 1918 Spanish Flu,” *Forbes*, 28 April 2020, at [www.forbes.com/sites/alexknapp/2020/04/28/the-dr-fauci-of-the-1918-spanish-flu/?sh=7f689683547](http://www.forbes.com/sites/alexknapp/2020/04/28/the-dr-fauci-of-the-1918-spanish-flu/?sh=7f689683547) (accessed 23 Sept. 2021); and Olivia B. Waxman, “On World AIDS Day, Those Who Fought the 1980s Epidemic Find Striking Differences and Tragic Parallels in COVID-19,” *Time*,

influenza outbreak and SARS to convey the gravity of what would happen if political leaders did not quickly and decisively issue stay-at-home-orders, close schools, and mandate social distancing.<sup>2</sup>

These pervasive analogies between past pandemics and COVID-19 run the risk of flattening change over time and precluding more penetrating insights into the history of infectious diseases. Throughout 2020, in venues ranging from the *Wall Street Journal* to *Vox*, pundits scoured history books for quick soundbites, superficial factoids, and “lessons” learned, skimming expertly researched works of scholarship in search of insights about whatever the latest short-term COVID development happened to be.<sup>3</sup> Take, for instance, journalistic work on the 1918–19 influenza outbreak. A small cottage industry of op-eds, blog posts, and podcasts emerged comparing the pandemic to COVID-19. Newspapers were awash with parallels between the two outbreaks: the history of mask wearing in 1918 featured in dozens of think pieces, while it became something of a cliché to acknowledge the effectiveness of social-distancing measures against influenza.<sup>4</sup> When Donald Trump contracted the coronavirus in the spring of 2020, Woodrow Wilson’s case of the 1918 flu became the subject of opinion pieces in the *Washington Post* and on CNN and NBC.<sup>5</sup>

---

1 Dec. 2020, at <https://time.com/5915401/world-aids-day-covid-coronavirus-pandemic> (accessed 23 Sept. 2021).

<sup>2</sup> Christopher Adolph, Kenya Amano, Bree Bang-Jensen, Nancy Fullman, and John Wilkerson, “Pandemic Politics: Timing State-Level Social Distancing Responses to COVID-19,” *Journal of Health Politics, Policy, and Law*, 46, 2 (April 2021), 212–13. Public-health experts looked to the 1918 flu for historical comparisons to COVID-19 because both are high transmissible respiratory illnesses that share many basic epidemiological features. The 1918 pandemic also confirmed the effectiveness of mandatory social distancing, business closures, and other public-health interventions. Recent studies in the field of historical epidemiology have confirmed that states and cities that locked down early in 1918 experienced lower morbidity rates than those that kept their economies open for longer. See Martin C. J. Bootsma and Neil M. Ferguson, “The Effect of Public Health Measures on the 1918 Influenza Pandemic in US Cities,” *Proceedings of the National Academy of Sciences*, 104, 18 (2007), 7588–93; Howard Markel, Harvey B. Lipman, J. Alexander Navarro, Alexandra Sloan, Joseph R. Michalsen, Alexandra Minna Stern, and Martin S. Cetron, “Nonpharmaceutical Interventions Implemented by US Cities during the 1918–1919 Influenza Pandemic,” *JAMA: The Journal of the American Medical Association*, 298, 6 (8 Aug. 2007), 644–54.

<sup>3</sup> Kelsey Piper, “Here’s How Covid-19 Ranks among the Worst Plagues in History,” *Vox*, at [www.vox.com/future-perfect/21539483/covid-19-black-death-plagues-in-history](http://www.vox.com/future-perfect/21539483/covid-19-black-death-plagues-in-history) (accessed 21 Sept. 2021); Niall Ferguson, “How a More Resilient America Beat a Midcentury Pandemic,” *Wall Street Journal*, 30 April 2021, at [www.wsj.com/articles/how-a-more-resilient-america-beat-a-midcentury-pandemic-11619794711](http://www.wsj.com/articles/how-a-more-resilient-america-beat-a-midcentury-pandemic-11619794711) (accessed 21 Sept. 2021).

<sup>4</sup> For just one of the myriad examples of newspaper articles on the history of mask wearing see Christine Hauser, “The Mask Slackers of 1918,” *New York Times*, 3 Aug. 2020, at [www.nytimes.com/2020/08/03/us/mask-protests-1918.html](http://www.nytimes.com/2020/08/03/us/mask-protests-1918.html) (accessed 23 Sept. 2021).

<sup>5</sup> John Barry, “History Tells Us What a Virus Can Do to a President,” *Washington Post*, 4 Oct. 2020, at [www.washingtonpost.com/opinions/2020/10/04/history-tells-us-what-virus-can-do-president](http://www.washingtonpost.com/opinions/2020/10/04/history-tells-us-what-virus-can-do-president/) (accessed 30 Nov. 2021); Faith Karimi, “Before Trump, Another US President Downplayed a Pandemic and Was Infected,” *CNN*, 3 Oct. 2020, at <https://edition.cnn.com/2020/10/03/us/woodrow-wilson-coronavirus-trnd/index.html> (accessed 30 Nov. 2021); Corky Siemaszko, “Trump Not the First President to Be Infected in a Pandemic, Woodrow Wilson Was in the Same Spot a Century Ago,” *NBC News*, 2 Oct.

There was one thing missing from much of this commentary on the influenza pandemic, though: an understanding of historical context.<sup>6</sup> Reductive and presentist questions such as “how they flattened the curve in 1918” took precedence over nuanced and sophisticated readings of the Great Influenza, which only mattered insofar as it provided insights for the present.<sup>7</sup> Most journalistic accounts of the 1918 pandemic amounted to straightforward “spot-the-difference” exercises with COVID-19. In the confines of the twenty-four-hour news cycle, there was little acknowledgement that each pandemic follows its own logic and little understanding of one of the most famous sayings in the field of epidemiology: “If you’ve seen one pandemic, you’ve seen one pandemic.”<sup>8</sup>

Three recent books – Peter Baldwin’s *Fighting the First Wave: Why the Coronavirus Was Tackled So Differently across the Globe*, John Fabian Witt’s *American Contagions: Epidemics and the Law from Smallpox to COVID-19*, and Martin Halliwell’s *American Health Crisis: One Hundred Years of Panic, Planning, and Politics* – provide much more nuanced readings of this pivotal moment in the relationship between pandemics, politics, and society. Each is a painstakingly researched monograph that goes beyond superficial analogies and places COVID-19 firmly in the context of the history of public health. Taken as a whole, these volumes serve as an antidote to the impulse to draw overly straightforward comparisons between our own time and previous outbreaks. They all deserve to be widely read, as significant contributions to an emerging body of scholarship on the long history of the coronavirus crisis.

Of the three books, Peter Baldwin’s *Fighting the First Wave* is the only one to focus exclusively on the history of the COVID-19 pandemic itself. Keeping abreast of every COVID-related development has been taxing for even the most seasoned public-health historian; Baldwin’s account provides a compelling and accessible guide to

---

2020, at [www.nbcnews.com/news/us-news/trump-not-first-president-be-infected-pandemic-woodrow-wilson-was-n1241854](http://www.nbcnews.com/news/us-news/trump-not-first-president-be-infected-pandemic-woodrow-wilson-was-n1241854) (accessed 30 Nov. 2021).

<sup>6</sup> The 1918 influenza pandemic did not always serve as a useful template for the coronavirus crisis, primarily because of fundamental virological differences between the two diseases. On the dangers of historical comparisons between influenza and COVID-19 see Mari Webel and Megan Culler Freeman, “Compare the Flu Pandemic of 1918 and COVID-19 with Caution – The Past Is Not a Prediction,” *The Conversation*, 4 June 2020, at <https://theconversation.com/compare-the-flu-pandemic-of-1918-and-covid-19-with-caution-the-past-is-not-a-prediction-138895> (accessed 30 Nov. 2021).

<sup>7</sup> Nina Storchlic and Riley D. Champine, “How They Flattened the Curve during the 1918 Spanish Flu,” *National Geographic*, 27 Mar. 2020, at [www.nationalgeographic.com/history/article/how-cities-flattened-curve-1918-spanish-flu-pandemic-coronavirus](http://www.nationalgeographic.com/history/article/how-cities-flattened-curve-1918-spanish-flu-pandemic-coronavirus) (accessed 23 Aug. 2021).

<sup>8</sup> Alex De Waal, “New Pathogen, Old Politics,” *Boston Review*, 3 April 2020, at <https://bostonreview.net/science-nature/alex-de-waal-new-pathogen-old-politics> (accessed 21 Sept. 2021). Historians have taken contradictory stances on the usefulness of historical analogies to COVID-19. For a sample of the different perspectives see Guillaume Lachenal and Gaëtan Thomas, “COVID-19: When History Has No Lessons,” *History Workshop Online*, 30 March 2020, at [www.historyworkshop.org.uk/covid-19-when-history-has-no-lessons](http://www.historyworkshop.org.uk/covid-19-when-history-has-no-lessons) (accessed 19 Sept. 2021); David S. Jones, “COVID-19, History, and Humility,” *Centaurus*, 62, 2 (2020), 370–80; and Mary E. Fissell, Jeremy A. Greene, Randall M. Packard, and James A. Schafer Jr., “Introduction: Reimagining Epidemics,” *Bulletin of the History of Medicine*, 94, 4 (2020), 543–56.

the critical events of the first wave of the crisis. The core of his analysis is a comparative history of the different approaches to COVID-19 taken by governments across the globe. He synthesizes a huge amount of information to argue that there were three major ways of responding to the pandemic: a “targeted quarantine strategy” characterized by testing, tracing, and isolation orders; a “hands-off mitigation strategy” defined by partial measures designed to achieve broad herd immunity; and a “suppression strategy” characterized by sweeping lockdowns. One of Baldwin’s most important points is that ideology and political systems alone cannot explain the different paths taken by national governments in 2020. Both autocracies and democracies implemented each of the three public-health strategies outlined above.

Writing the history of any event as it unfolds poses methodological challenges. As the historian Adam Tooze recently noted, in the introduction to another early history of the pandemic, “any effort to cast a narrative frame over the tumult we are still living through is bound to be partial and subject to revision.”<sup>9</sup> Baldwin ends his analysis in December 2020, before the vaccine rollout, the Delta and Omicron variants, the assumption of the White House by Joe Biden, and the ruinous third wave. Read in late 2022, some of his analysis already feels outdated. Most glaringly, he seldom includes information about vaccines in his assessment of the different approaches to the coronavirus. Yet many of the countries that underperformed during the first wave have gone on to achieve some of the highest inoculation rates in the world. In many respects, *Fighting the First Wave* is a history that has been overtaken by events.

Baldwin also crams his study of the first wave with a dizzying array of facts, figures, and case studies that do not always combine into a compelling structure or narrative. There are endless historical anecdotes, side notes, and digressions. Despite this wealth of detail, the book rarely pays attention to the disproportionate impact of COVID-19 on racial minorities, the role of the virus in exacerbating socioeconomic fault lines, or the overlapping nature of the crises that beset the US in 2020. Baldwin mentions the brutal murder of George Floyd – an event that sparked protests not just in the US but across the globe – only twice in nearly three hundred pages of comparative analysis. Readers will wait in vain for any acknowledgement of the intersection and interaction between the coronavirus crisis and the mobilization around Black Lives Matter after Floyd’s killing.<sup>10</sup> One comes away having learned many new startling facts about the pandemic but without a deeper understanding of some of the central forces that shaped our collective experience of 2020.

These criticisms notwithstanding, *Fighting the First Wave* is a well-researched and valuable study. The breadth of coverage is remarkable: the author ranges across topics as diverse as the history of public health and civil liberties, the role of geography in shaping epidemiology, and the growing rejection of mainstream science in the early twenty-first century. A luminary of the field of medical history, Baldwin is especially attentive to how long-standing legal and political arrangements shaped the different

<sup>9</sup> Adam Tooze, *Shutdown: How Covid Shook the World’s Economy* (New York: Viking, 2021), 23.

<sup>10</sup> On the convergence between COVID-19 and the mobilization around Black Lives Matter see Reza Nakhaie and F. S. Nakhaie, “Black Lives Matter Movement Finds New Urgency and Allies Because of COVID-19,” *The Conversation*, 5 July 2020, at <https://theconversation.com/black-lives-matter-movement-finds-new-urgency-and-allies-because-of-covid-19-141500> (accessed 20 Sept. 2021).

approaches to pandemic disease. With his lucid prose style and keen attention to historical context, he provides perhaps the most detailed and readable account of the first wave published to date. *Fighting the First Wave* will be required reading for future scholars of COVID-19, providing the raw material from which historians can piece together a more comprehensive picture of the pandemic's global ramifications.

Whereas Baldwin has produced a narrow chronological study of the COVID-19 pandemic, John Fabian Witt's *American Contagions* examines the intersection between law and epidemics across the broad expanse of US history. The book is slim in size – 142 pages of text, eighteen of notes – but ambitious in interpretive scope and historiographical reach. Its stated aim is to provide “a citizen’s guide to the ways in which American law has shaped and responded to the experience of contagion” (2). Undergirding much of Witt’s analysis is a theoretical distinction between two kinds of response to epidemics: sanitationism and quarantineism. The former refers to a liberal, community-oriented approach to disease prevention that aims to eradicate pestilence by improving living conditions; the latter encapsulates a broad set of illiberal and authoritarian policies that impose strict restrictions on individual liberties. American law has consistently adopted both approaches simultaneously, employing one or the other largely according to the socioeconomic status and political clout of the people and groups involved. “For middle-class white people and elites,” Witt argues, “public health policies typically reflected liberal sanitationist values” (9). By contrast, racial minorities, immigrants, and the poor have borne the brunt of draconian prevention strategies, often with disastrous consequences for civil liberties and civil rights. While ostensibly race- and class-neutral, the public-health strategies of quarantine, documentation, and surveillance have typically exacerbated preexisting inequalities.

The heart of *American Contagions* lies in the first three chapters, which outline the tensions between quarantineist and sanitationist public-health strategies in the nineteenth and early twentieth centuries. In the early national period, American constitutional law granted public-health authorities extensive power to curb individual liberties to protect the people from infectious disease. State and local governments were the principal actors during disease outbreaks, marshalling their police power – the common-law authority to promote the public welfare – to implement quarantine orders, vaccine mandates, and other public-health statutes. For the most part, courts at the federal and state levels sanctioned the coercive powers of the states in the sphere of public health, even when health officials implemented measures that severely restricted civil liberties. In his fourth chapter, Witt brings his narrative forward into the late twentieth century, when the AIDS crisis created a new sanitationist synthesis between civil liberties and public health. As the epidemic came into clear focus, an unlikely coalition of activists and public-health experts argued that coercive prevention measures would add to the stigma associated with the disease and prompt those at risk of infection to avoid health officials altogether and shun testing and treatment. Instead of promoting quarantine orders or mandatory testing, these new sanitationists championed voluntary techniques like prevention education and patient-initiated testing, advocating for a fundamental rethinking of the ideological foundations of public health.

What are the implications of all of this for our understanding of the legal response to COVID-19? In his fifth and final chapter, Witt reveals how several long-standing patterns in the history of American pandemics reemerged in 2020. Like previous epidemics, state and local authorities were at the vanguard of the public-health response

to the novel coronavirus, crafting their own widely divergent set of policies to mitigate the disease's spread. The extensive fragmentation of public-health authority in the US served as a barrier to coordinated and effective national action against the pandemic. Focussing on the disease's rampant spread in the nation's vast prison archipelago, Witt also shows how the distribution of COVID-19 cases reflected enduring fault lines of inequality in the American legal system. As the pandemic unfolded, it posed an outsized threat to the health and well-being of the millions of people locked inside America's jails, prisons, and immigration detention centres. Many of the measures necessary to protect against infection – such as social distancing and interacting with others outdoors – proved impossible to implement in overcrowded prisons. While municipalities across the country took modest steps in early 2020 to reduce the size of their incarcerated populations, these efforts proved insufficient to prevent community transmission among people in custody. By the summer, the infection rate in state and federal prisons was nearly six times higher than the national average.<sup>11</sup> The majority of those confined in the nation's carceral facilities are African American or Latinx, so mass incarceration significantly contributed to the pandemic's disproportionate impact on communities of color. As Witt explains, “the vastly oversized American prison system ... meant that far too many people were subjected to [a] new dystopian quarantine” (124).

Perhaps inevitably, *American Contagions* raises many questions about the US law of epidemics that Witt does not have the space to address fully in such a small study. Why did the states remain at the vanguard of responding to pandemics in the latter half of the twentieth century, when the power of the federal government grew exponentially in so many other policy spheres? What are the implications of this history for our understanding of modern US state development? How does the history of American law and epidemics look different if we shift our focus to the country's overseas possessions, where the central government has typically had jurisdiction? We are also left wanting to know more about the legal responses to specific epidemics: the 1918–19 influenza outbreak, for example, is mentioned only in passing, even though it loomed large in public discourse about COVID-19. It is a testament to the book's many merits that these criticisms essentially amount to asking for more of the same. *American Contagions* is eminently accessible, deftly argued, and elegantly written, and it provides a highly original theoretical framework for understanding US reactions to pandemics over the last two centuries. Ultimately, it will enable popular and scholarly audiences alike to understand the prehistory of the decentralized and chaotic legal response to COVID-19.

Of the three books reviewed here, Martin Halliwell's *American Health Crisis* devotes the least space to the COVID-19 crisis. Emerging from a research project that began before the novel coronavirus swept across the globe in 2020, the book contains only a brief postscript on the pandemic and its broader implications for the history of public health. Nonetheless, Halliwell's account enriches the emerging scholarly conversation about COVID-19 and stakes out an important place for historians in it.

<sup>11</sup> Statistic taken from Sharon Dolovich, “Mass Incarceration, Meet COVID-19,” *University of Chicago Law Review Online*, 16 Nov. 2020, at <https://lawreviewblog.uchicago.edu/2020/11/16/covid-dolovich> (accessed 26 Nov. 2021).



Exhaustively mining presidential libraries, regional archives, and the holdings of the National Library of Medicine, Halliwell traces the history of government responses to public-health crises across the twentieth century, and his central theme is that federal action on epidemics has largely retained an ad hoc character. With alarming frequency, diseases flared up, the central government directed resources towards public health, the immediate crisis subsided, and spending spiralled back down again. In successive thematic chapters, Halliwell shows that this cycle of crisis and complacency has continuously hampered efforts to build a more robust public-health infrastructure. To be sure, the federal government's role in responding to infectious diseases has waxed and waned, with the 1960s representing a particularly proactive period of public-health policymaking. Great Society legislative victories transformed the American health landscape and dramatically expanded the scale and scope of public-health agencies like the Centres for Disease Control. In the 1970s, however, the Nixon administration immediately threatened many of these gains as it pared back spending on public health and dismantled key components of Johnson's legislative legacy. In the latter decades of the twentieth century, the federal government continued to make public-health policy on the hoof: the subject only became politically salient once an epidemic struck, at which point lawmakers would enact a series of temporary, spur-of-the-moment initiatives to tackle the ongoing crisis. If Witt points to the continued importance of state governments in responding to epidemics, Halliwell does an excellent job of revealing the short-termism and complacency at the heart of federal pandemic policymaking.

Although Halliwell does not dwell on COVID-19 for very long, his account has important implications for our understanding of the long history of the pandemic, challenging the Trump exceptionalism that has suffused much commentary on the events of 2020. A common refrain has been to lay most, if not all, of the blame for the incoherent and chaotic federal response to the crisis on the Trump presidency. Such an assumption peppered news stories in 2020 with headlines like "This Is Trump's Plague Now," "He Could Have Seen What Was Coming: Behind Trump's Failure on the Virus," and "The Inside Story of How Trump's Denial, Mismanagement and Magical Thinking Led to the Pandemic's Dark Winter."<sup>12</sup> Without always explicitly saying so, Halliwell's account reveals that the Trump administration's bumbling response to COVID-19 fits into a much longer history of chaos and dysfunction at the heart of the American public-health system. As much as Trump gleefully shattered many well-established political and legal norms, and as much as his rhetoric and theatrics broke the presidential mould, his approach to public health was neither new nor particularly surprising. For much of the previous century, federal action on pandemic preparedness had retained a primarily ad hoc

<sup>12</sup> David Frum, "This Is Trump's Plague Now," *The Atlantic*, 29 June 2020, at [www.theatlantic.com/ideas/archive/2020/06/this-is-trumps-plague-now/613633](http://www.theatlantic.com/ideas/archive/2020/06/this-is-trumps-plague-now/613633) (accessed 4 Nov. 2021); Eric Lipton, David E. Sanger, Maggie Haberman, Michael D. Shear, Mark Mazzetti, and Julian E. Barnes, "He Could Have Seen What Was Coming: Behind Trump's Failure on the Virus," *New York Times*, 11 April 2020, at [www.nytimes.com/2020/04/11/us/politics/coronavirus-trump-response.html](http://www.nytimes.com/2020/04/11/us/politics/coronavirus-trump-response.html) (accessed 4 Nov. 2021); and Yasmeen Abutaleb, Ashley Parker, Josh Dawsey, and Philip Rucker, "The Inside Story of How Trump's Denial, Mismanagement and Magical Thinking Led to the Pandemic's Dark Winter," *Washington Post*, 19 Dec. 2020, at [www.washingtonpost.com/graphics/2020/politics/trump-covid-pandemic-dark-winter](http://www.washingtonpost.com/graphics/2020/politics/trump-covid-pandemic-dark-winter) (accessed 4 Nov. 2021).

character, with Congress and the White House only mobilizing government resources once a disease had already struck. COVID-19 emerged after decades of dysfunction and chaos in the American public-health system that long pre-dated the Trump administration. The events of 2020–21 reflected forces beyond the personality, flaws, and incompetence of a single man.

*American Health Crisis* is an impressive feat of scholarship. Halliwell takes a sweeping approach, covering public-health crises as diverse as the 1918 influenza pandemic, the 1927 Great Mississippi Flood, the 1972 Buffalo Creek Flood, and the AIDS epidemic. He peppers his analysis of these specific episodes with extensive examinations of biopolitics, medical citizenship, and the history of regional and racial health care disparities. While many of these events and topics are often covered, they have rarely been brought together into a synthetic and archive-based history of American health disasters. No one has yet written as ambitious and comprehensive a history of federal public-health politics in the twentieth century.

From the moment COVID-19 swept through every part of the world in 2020, books and articles on the pandemic appeared at a dizzying pace. This trend shows no signs of slowing down, with recent books and articles on the crisis from prominent scholars and writers like Merlin Chowkwanyun, Mike Davis, and Polly J. Price.<sup>13</sup> These authors cover topics ranging from the malignant incompetency of the Trump White House in the early months of COVID-19 to the longer history of the intersection between pandemics and US state development. As historians add to the pile of books trying to make sense of the coronavirus crisis, their task is not simply to find out more about what happened during the first, second, and third waves or to provide straightforward comparisons between the present moment and previous outbreaks of infectious diseases. Instead, it is to connect what we already know about COVID-19 to deeper historical forces and structures. This approach may, at times, involve decentering the specific events of 2020–21, but it will also enable us to locate the coronavirus crisis more firmly within its longer historical context. Alongside the work of many others, these three volumes provide an important step towards understanding COVID-19 within the broader sweep of American and global history.

<sup>13</sup> Merlin Chowkwanyun, “The 60/40 Problem: Trump, Culpability, and COVID-19,” in Julian E. Zelizer, ed., *The Presidency of Donald J. Trump: A First Historical Assessment* (Princeton, NJ: Princeton University Press, 2022), 315–34; Mike Davis, *The Monster Enters: COVID-19, Avian Flu, and the Plagues of Capitalism* (New York: Verso, 2022); and Polly J. Price, *Plagues in the Nation: How Epidemics Shaped America* (New York: Beacon Press, 2022). See also Stephen Colbrook, “Why Pandemics Matter to the History of U.S. State Development,” *Modern American History*, 4, 3 (Nov. 2021).