Chapter 7

The Nineteenth-Century Context of the Seventh-day Adventist Health Message

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Abstract

Introduction

There is a general perception amongst Seventh-day Adventists that the Adventist health message was revealed to Ellen White in a complete and comprehensive form and that it is thereby both unique and unaffected by the culture and ideas of the surrounding society. Such thinking has been encouraged by the work of Adventist authors who have documented their understanding of God's leading in the church apologetically rather than by critically evaluating Adventist history within its temporal context. While such histories are undoubtedly valuable, and bolster faith, the use of an inadequate historiography means that members of the church have often failed to recognise that theology and practice are inevitably moulded by complex historical and cultural factors.

More-critical studies in Adventist history began to emerge in the 1970s, but these were surrounded by controversy.[1] Ronald Numbers, in his book, *Prophetess of Health*, was the first to examine White's contribution as a health reformer in the context of other nineteenth-century health reformers.[2] Published in 1976, it was written from a purely historical perspective that did not take inspiration into account. Numbers concluded that White's ideas and writings on health were largely borrowed from other health reformers. Predictably, Numbers' book elicited a rapid and aggressive response from both church leadership and the Ellen G. White Estate, both of which perceived the work as destructive to belief in the inspiration of White.[3]

But while recognising the importance of the historical context in which denominational development took place, Adventists need not

neglect the possibility of inspiration.[4] A robust doctrine of inspiration based on the examples of Scripture allows for White's individuality and experience to be integrated into her writings, and even for the use of other sources.[5] Thus this paper begins from a position that accepts the idea that God revealed important information on health to Ellen White but, at the same time, regards examination of the context of the Seventh-day Adventist health message as important for both understanding and application of the content. Accordingly, it will examine first the social and political contexts of the nineteenth century, then the religious and medical contexts, and finally the intersection between religion and health. Because of the broad nature of the subject matter, the discussion will of necessity lack the depth that each area of context deserves. The paper is concluded with a discussion of the manner in which these influences impacted Adventism.

Social and Political Context

Life in nineteenth-century America was characterised by unprecedented levels of change and upheaval that impacted almost every area of life. The population increased at an exponential rate, as streams of immigrants arrived in the land of promise. At the beginning of the century the country's population was a mere five million: just fifty years later it was twenty-five million.[6] While there was plenty of land for new arrivals willing to travel west, the cities were unprepared for the waves of new immigrants. Overcrowding and lack of clean water resulted in many areas being transformed into slums that had major sanitation and health problems.[7]

The increased population fueled the drive to expand the nation's territory, pushing the frontier westward. As a consequence, new states were added to the Union as populations increased in the western and southern reaches of the country.[8] Migration increased even further in the wake of the American victory in the Mexican War (1846–48) and the Californian gold rush of 1849.[9]

In the political arena the election of Andrew Jackson as president in 1828 was particularly important. It signalled not only the beginning of a more democratic government, but also the beginning of the 'era of the common man.'[10] Previous presidents had been wealthy, educated

or aristocratic. Jackson was neither well-born nor well educated.[11] He was a frontiersman and a military hero who considered education and wealth unnecessary for political roles. Rather, he believed that politics and political duties, like everything else, should be simple and easily understood. Thus he vowed to end aristocratic control of the government by properly democratising it.[12] His election sparked the imagination of the ordinary American, leading to optimism, innovation and experimentation.

Changes were not confined to population movement and politics but affected almost every area of life, including the economy. Following the War of 1812, the Union of States pushed to become more economically independent from its trading partners.[13] Pressure towards independence, combined with technical innovations such as steam powered engines and electricity, led to manufacturing processes that allowed the mass production of goods, thus propelling the nation towards a more industrialised future. Dramatically improved transport and communication also offered new opportunities, and businesses flourished.

But while the country benefitted from these advances, there were unintended side effects. The improvements in travel and communication also provided a vehicle for the rapid spread of disease.[14] Furthermore, as people from rural areas flooded into the cities seeking work in the new factories the overcrowding and poor sanitary conditions in the cities deteriorated even more.

The civil war and slavery added to the woes of the country. The ethical issues surrounding slavery were increasingly a topic of discussion. Abolitionists flourished, as did hard-line slavery supporters. Churches and families were divided.[15] Increased manufacturing in the North, made the South even more reliant on the slave trade, in turn subjecting millions of African Americans to injury, poor health, and death. The civil war also cost thousands of lives, not only from face-to-face combat but also from dysentery and other illnesses that ravaged the soldier's camps. Estimates suggest that two out of every three deaths were the result of disease rather than battle wounds.[16]

Religious Context

America had initially been a haven for religious groups who had experienced persecution for their faith. However, by the beginning of the nineteenth century almost every major religious group and subgroup was represented in the country. This diversity was compounded by the upheavals that characterised the period. The prevalent values of liberty and individualism spilled over into religious life, encouraging religious experimentation, challenging traditional religious authority, and threatening the very core of religious and moral life.[17] Denominationalism and sectarianism proliferated.

In spite of the instability and the divisions occurring within North American Christendom, Protestants experienced a time of unprecedented growth and revitalisation, and religious groups that embraced society's interest in the common man grew at a disproportionate rate. One of the main beneficiaries was Methodism, which emphasised simple, practical, and readily understood messages and gave a voice to the ordinary citizens.[18]

The revivalism of the Second Great Awakening which swept the nation in the early to mid-nineteenth century was also a key to the growth of Protestantism.[19] It impacted both the frontier and urban society alike, bringing with it renewed focus on sin and the need to examine one's personal relationship with Christ. The revivalist and social reformer, Charles Finney, is generally considered as the central figure in this movement. Finney was well educated, but he mirrored many of Andrew Jackson's tendencies including the distrust of authority structures and the powerful elite.[20] Finney thus became the symbol of the common man in religion. His revivals emphasised the power of choice, and fitted well with the prevailing optimism in society.[21]

While the ranks of the existing churches swelled as a result of revivalism, new religious communities and sects also emerged. Amongst these groups were the Restorationists, who sought to restore a primitive Christianity by returning to the practices of the New Testament, and the Millerites, who preached the soon coming of Christ.

Hudson suggested that the unique elements of revivalist preaching played a significant role in the development of these new groups. Their emphases included the demand for confrontation with God, the need for holiness, and an anticipation of the coming millennium.[22] These ideals would later play a role in the development of a health reform movement. In the context of revival, personal conversion and a turning away from sin was expected to lead to moral action and holiness. This, in combination with millennial hopes, led to renewed emphasis on mission and drove Christians to attempt to transform not only their own lives but also the patterns and habits of their society in preparation for the coming millennial rule of God.[23] As a consequence thousands of ordinary Christians organised and participated in voluntary associations that aimed to change their society. While some voluntary groups embraced overtly evangelistic goals to win their society to Christ, other organisations targeted social reform in order to rid the country of its social ills, such as prostitution, poverty, alcoholism, and slavery. When compared to today's activism, these societies achieved astounding levels of participation. Estimates suggest that in some cities "nearly half of all adult Protestant males" belonged to a church-related voluntary association.[24] Christians believed they could bring about a real change in society and in so doing not only improved the lot of their fellow humans but found satisfaction in actively preparing for the coming millennium.[25] The results of their endeavours were encouraging: Sunday School attendance improved, alcohol consumption decreased, and upward mobility for the poor resulted.[26] Religion was having an impact on the health of society.

Medical Context

Unlike British society, in which physicians had carved out a position as an elite group, the American physicians held limited status in the early nineteenth century. The ideals of individualism and democracy, in the context of the Jacksonian triumph of the common man, meant that nineteenth-century physicians struggled even to enforce professional standards.[27] Indeed, anyone who practised any form of healing, regardless of background and education, was often given the title doctor.

The role of the physician was further limited by the social conditions, which meant most of the population could not afford to use the medical profession. At the same time many of those who could afford a professional were sceptical of the claims of the physicians, whose heroic treatments lacked proof of effectiveness. Consequently, sociologist, Paul Starr suggests that in mid-nineteenth-century America the practice of medicine was shared by three groups who held relatively equal importance: women in the domestic household, regular physicians, and those practising popular medicine.[28]

Domestic Medicine

The social conditions of many Americans meant that considerable medical care was provided in the home, where women were expected to know how to treat common disorders and to have traditional remedies available.[29] Their knowledge and skill were largely dependent on oral tradition and prior experience. However the transformation of politics and religion which gave a voice to the uneducated also led some doctors to write guides to home health care in simple, everyday language. In general they were critical of those who wanted to control medical knowledge, and aimed to provide as much information as possible for those unable to afford professional care.[30] The most popular guide, entitled *Domestic Medicine*, was written by William Buchanan, and went through multiple printings in the 1800s.[31] It emphasised the importance of fresh air, diet, exercise, cleanliness, moderation in diet, and avoidance of spices and strong liquor. Other guides also highlighted similar preventative health measures.

Mainstream or Allopathic Medicine

Physicians in North America really only started emerging as a professional group, separate from lay healers, in the middle of the nineteenth century.[32] Initially, their education was largely gained by apprenticeship, but by 1850 there were forty-two medical schools spread across the states.[33] However, this did not necessarily mean improved education. Most students studied for three to four months and repeated exactly the same classes for three to four months the following year.[34] Practical and laboratory experiences were rare.[35] Even when a medical degree was introduced with set, but very limited, requirements things did not immediately improve. The

requirements were not consistently enforced, and exams were not rigorous since lecturers were only paid if students passed them.[36] The introduction of licensing did not significantly raise the standards of health care since many states did not exclude those without licences from practising medicine.[37]

The heroic and often brutal treatments of physicians included bloodletting, the application of leeches, cupping, purging and vomiting, along with drugs such as nux vomica (strychnine), calomel (a mercury-based laxative), and opium, as discussed in more detail in Chapter 1. The use of these toxic drugs was widespread. One author noted that in 1850, 59% of prescriptions at the Massachusetts General Hospital contained some form of opium or opiate.[38]

But the 1800s also marked the beginning of a more scientific era of medicine.[39] The problem was that while doctors began to recognise that their treatments were not working, they initially had nothing with which to replace them. This led many physicians to embrace ideas of popular medicine, especially those apparently associated with natural laws.[40] It was not until the second half of the century that scientific discoveries started transforming medicine, as discussed in Chapter 4.

Popular Medicine

The third group sharing medical care were the popular medicine advocates. They were given credence by the failure of allopathic medicine and the enthusiasm of the populace for simply understood remedies which were available to all. Although popular medical practitioners were a diverse group they tended to rely on natural remedies, emphasise natural law, and reject the more heroic practices of allopathic medicine. Their popularity, along with their tendency to be well-organised, meant that they quickly became established as rivals to trained physicians in the general community.[41]

One of the most popular alternative medical systems was produced by Samuel Thomson. It was based on the Greek notion of the four elements, and argued that air and fire caused motion and life, whereas anything that lessened heat caused disease.[42] Therefore, treatment of disease entailed restoring heat, whether by steam bath or by botanicals such as lobelia.[43]

Homeopathy also found a place amongst the popular healers. While it was rejected by physicians as illogical, homeopathy appealed to the public, who were tired of remedies which not only failed to cure but also produced unwelcome side effects.[44]

These same concerns gave popularity to health reformers such as Sylvester Graham, William Alcott, and Larkin B Coles, who believed that the cure of illness involved removing offending dietary items or stimulants, then allowing nature to heal the body. Thus they promoted a vegetarian diet, exercise and fresh air, while opposing the use of tea, coffee, alcohol and tobacco, and sexual excesses. Hydrotherapy also captured the public imagination. Developed by Vincent Priessnitz in Europe, water-based treatments were popularised in the United States by Joel Shew, Russel Thrall, and Mary Grove, as described in more detail in Chapter 1.[45]

Thus popular medicine consisted of an eclectic combination of different approaches to health. Those who were attracted to one style of popular medicine were often attracted by others, and it became common for practitioners to combine a number of these elements in their treatment regimes.

Health and Religion in the Nineteenth Century

Of particular interest in the examination of the health context of the Adventist health message is the intersection between health and religion. In the seventeenth and eighteenth centuries it was common for clergy to combine both medical and religious services for their congregation. Some clergy even wrote on health. For instance, John Wesley, founder of Methodism, wrote the book *Primitive Physic*, subtitled *An Easy and Natural Method of Curing Most Diseases.*[46] In it he promoted a lifestyle of simplicity and prayer, supplemented with plenty of water and exercise, and offered rudimentary cures with various herbs. The link between health and religion was thus well established in the minds of the general population by the nineteenth century.

The public also linked God to the cause of sickness. Many held onto medieval concepts of illness, suggesting that it was caused by God's judgment upon sin. Thus, in response to the cholera epidemics which

ravaged the country in 1832, 1849 and 1866, pastors proclaimed these calamities to be God's attempts to rid the city of those who "contaminate and defile human society."[47] Such rhetoric was not confined to the clergy. Even the Governor of New York saw the epidemic as God's judgement on the sins of man, and suggested that it was appropriate "for the sins of uncleanliness and intemperance."[48] Physicians tended to take a more rational approach to the cause of illness, suggesting God's role was mediated through the laws of physiology in which sin leads to sickness.[49]

Religious Motivations of the Health Reformers

Health reformers followed suit, many suggesting that God often acted through some form of natural law. William Metcalfe, a pastor of the Bible Christian Church in Philadelphia and the first activist for vegetarianism on the North American continent, based his crusade for vegetarianism on the premise that vegetarianism was based on natural laws created by God.[50] He claimed that the Bible advised against flesh consumption, and drew support for his claim from the Genesis account of creation, Isaiah, and Romans 14:21.[51] He even believed that Jesus was a vegetarian, and suggested that passages that mentioned Jesus eating fish were mistranslations.[52] Of course, this was not based on any knowledge of original languages. It was simply a claim that supported his agenda.

He warned society that "there is a desolation wrought in the soul by the sin of flesh-eating more fearful than any outward ghastliness, but which cannot be understood, because of the long and unlimited prevalence of the custom."[53] While he met with some success it appears to have been limited.

Presbyterian minister, temperance lecturer and health reformer, Sylvester Graham, had a more mixed motivation. His years as a sickly child being passed between relatives undoubtedly contributed to his interest in health.[54] As an adult Graham avidly read books on anatomy, physiology and diet, changing his lifestyle to embrace a vegetarian diet which included whole grain breads, vegetables, fruit, and nuts. In the wake of his own improved health, Graham actively campaigned against consumption of flesh foods, dairy products, tea, coffee, alcohol, spices, narcotics and tobacco, while encouraging

vegetarianism, adequate rest and exercise, fresh air, and daily sponge baths.[55]

While Graham had personal reasons for advocating his version of a healthy lifestyle he also had religious motivations. He believed that God had created man to live in a natural state and the more naturally he lived, the healthier he would become.[56] An understanding of the laws of nature was therefore essential, as was recognition that humans have partial control over their health through their lifestyle choices. These laws of nature were to be considered as God's commands, and were "the means which God has ordained for the redemption of the body."[57] Every person therefore had a duty to follow these rules so that the body would work in a way that would glorify God.

In fact, Graham was noted for turning healthy living into a moral crusade. In this thinking, physical health was irrevocably linked to moral purity, a non-negotiable Christian trait,[58] while meat and stimulants were claimed to be largely responsible for lust and sexual passions. Thus if flesh foods, spices, and stimulants such as tea and coffee were excluded from the diet then individuals were more likely to be able to control their sexual urges and live a disciplined life.[59] This was important for two reasons; first because he considered masturbation to be evil, and second because sexual activity of any kind would deplete the human vital force, and therefore must be limited.[60]

William Alcott adopted many of Graham's ideas, and promoted them in some eighty-five books. He founded a reform colony named "Fruitlands" which ran on the principles enunciated by Graham. With the latter he co-founded the American Physiology Society which promoted a wide range of reforms, including fresh air, temperance, clothing reform, regular exercise, sleep, and diet.[61] As a Yale-trained physician he provided respectability for Graham amongst physicians, since Graham himself had little formal education.[62]

Alcott, unlike Metcalfe and Graham, was not a clergyman, but nonetheless he also had clear religious motivations for his involvement in health reform. Writing in his popular work, *Young Man's Guide*, Alcott admonished, "You are bound to fix on a high

standard of action, from the desire of obeying the will of God."[63] Alcott believed that God was the author of natural laws, and therefore maintaining good health was a duty.[64]

Alcott also clearly linked health to millennial hopes. He warned "that the Millennium, the near approach of which is by so many confidently predicted, can never reasonably be expected to arrive, until those laws which God has implanted in the physical nature of man are equally with his moral laws universally known and obeyed."[65] In his thinking one must reject either flesh-eating or the millennium.[66] Having both was not possible.

Millerite preacher and educated physician, Larkin B Coles, promoted a range of health reforms similar to Graham's and Alcott's, including vegetarianism, avoidance of stimulants and tobacco, exercise, and sexual purity.[67] His motivations were also religious. Like Graham and Alcott, Coles saw natural laws as commands from God. However, he went as far as to suggest that "it is truly a sin against heaven, to violate a law of life, as to break one of the Ten Commandments."[68] Indeed, Coles warned that humans will be called to account at the final judgement for their failure to look after the body.[69]

It is thus apparent that many of the nineteenth-century health reformers had religious motivations for their views, which included the association of physical health with God's laws, the need for moral living, and the need to prepare for the coming millennium.

Health and New Religious Groups

The religious motivations for incorporating health tenets into the faith of new religious groups which emerged during the nineteenth century are less clear. In this section I will briefly consider the religious views in relation to health of The Church of Christ, Scientist (today popularly known as Christian Science), The Church of Jesus Christ of Latter-day Saints, and Zion's Watch Tower Tract Society, as a prelude to reviewing the beginnings of the Seventh-day Adventist health message.

Christian Science was founded by Mary Baker Eddy, who integrated ideas from medicine, popular healers, philosophy, and Judaeo-

Christian traditions.[70] Like Graham and Alcott, Eddy believed that God's laws were important to health. She claimed that "there was a law of God which, properly understood, would bring about healing to every sort of physical and moral ill."[71] However, the law Eddy envisaged was quite different from the laws the major health reformers had in mind. For Eddy, it was a law about reality. In her major work, *Science and Health,* Eddy argued that disease and death are illusions which are caused by the mind.[72] In her thinking, the only thing that exists in reality is the Universal and Infinite Mind with its infinite manifestations.[73] There is no physical world, it is merely a persistent illusion. If there is no physical world then there can be no physical body and so diseases and death cannot exist.[74] Consequently, the sick are healed by knowing that there is no sickness.[75]

The Church of Jesus Christ of Latter-day Saints also included statements on health within its doctrine. The health principles were first written by Joseph Smith in 1833. Smith had been reflecting on the use of tobacco in church meetings and enquired of God whether this practice was appropriate. The principles listed in the "Word of Wisdom" are said to be God's response to his enquiry.[76] They advised against the use of wine, strong drinks, tobacco, tea and coffee, while promoting the use of grain, fruit, and the sparing use of meat.[77] Those who obeyed the precepts were promised health and wisdom, but no rationale was provided for these principles, which remained generally disconnected from other doctrine.[78] The principles were initially understood as a revelation of wise action rather than as commands. This meant that many leaders did not feel the need to follow their advice.[79] It was not until the prohibition movement of the 1920s that adherence to many of the health principles contained in the "Word of Wisdom" was seen as necessary for membership in good standing.[80] Other health advice and an additional rationale were added to these original statements in the twentieth century but since these were later additions they are not relevant to the context under discussion in this paper.[81]

Brief mention should also be made of Charles Russell who founded the Zion's Watch Tower Tract Society in 1879. Although this was a precursor movement to the contemporary Jehovah's Witnesses, evidence suggests that Russell did not contribute much to the health

principles currently espoused by the Jehovah's Witnesses.[82] Most of these are much later additions.[83] Charles Russell himself put very little emphasis on health and health reform, although he held a generally negative view of professional medicine.[84] Russell believed that disease was a degenerative process which began with Adam's sinful choice in the Garden of Eden, and that therefore humans had little ongoing control over disease.[85] Health reform thus held little interest. Furthermore, with a strong eschatological emphasis, Witnesses have generally considered time too short to invest in their own health institutions.[86]

Seventh-day Adventists and Health

While Seventh-day Adventist health reform is generally associated specifically with Ellen White, it was Joseph Bates who was the first within the fledgling movement to adopt principles of health reform, doing so even before the Great Disappointment of 1844.[87] It was White, however, who was responsible for establishing the direct connection between Adventism and health. Bates had not called attention to his health principles in case they detracted from the important message of the church.[88] White did not seriously consider health principles until her first health vision of 1848 and even then her attention was primarily focussed on the effects of tobacco, tea and coffee.[89]

Health would be the subject of four of Ellen White's visions between 1848 and 1863, an emphasis that was ultimately reflected in many hundreds of pages of writing.[90] The space limitations of this article do not permit a full exploration of White's views. These included vegetarianism and the specific avoidance of foods which she considered harmful: alcohol, tobacco, tea, coffee, drugs, and other stimulants. She also urged moderation in all things, and emphasised the need for rest, sunshine, good posture, and exercise.[91] These positions were quite similar to those of the other nineteenth-century health reformers. Like Graham, she concluded that it was "a sacred duty to attend to our health."[92]

Accordingly, it might seem difficult to separate the Adventist health message from those of preceding health reformers. However, it is in the motivations for health reform that we begin to see White's

departure from other health reformers around her.[93] The religious motivations of the other health reformers were largely focussed on the importance of obedience, whether it be for perfecting a people in preparation for the millennium or because it was a sacred duty to obey God.

While White also expressed the necessity for obedience to God, her emphasis in relation to health was much more pragmatic and driven by additional concerns which were revealed in her 1863 health vision. Health was not to be seen as an end in itself. [94] White asserted that one's state of health affected relationships, both human and divine. In particular, there was a significant link between health and spiritual experience. Since human minds and bodies form the medium through which God communicates with humans, they are to be kept in the best possible condition so that truth may be accurately discerned.[95] Furthermore, as the temple of God, the body must be kept in its purest state.[96] Good health enabled clearer thought, better choices, and therefore the ability to serve God more effectively.[97] Accomplishing God's purposes both individually and as a church was thus dependent upon good health.

In addition to the sacred duty of caring for one's own health, White also believed it was a sacred duty to help others understand the importance of good health. It was crucial to speak against intemperance of every kind whether it was "intemperance in working, in eating, in drinking," or "in drugging."[98] Thus was born the foundation of a health program that would span the world.

Ellen White saw the need to invest in programs and institutions in order to accomplish man's sacred duties in relation to health. She also endorsed the importance of medical education for gaining a better understanding of health principles and of the best way to disseminate them. It was she and her husband James who sponsored John Harvey Kellogg to attend medical school in the mid-1870s. As the first trained physician of the denomination, Kellogg helped not only to bring credibility to the denomination's health message, but also to make the vision of White tangible.[99] Kellogg believed strongly in the health principles outlined by White, so much so that he tended see them as the major component of the Adventist message, even labelling ministers who did not embrace the health message as backsliders.[100]

However, Kellogg was also a trained physician who made a point of keeping up with medical developments, which he implemented and dutifully reported to White.[101] By the time of the removal of Kellogg's church membership in 1907 the denomination had moved a considerable distance towards a scientifically informed health message and had sufficient numbers of trained medical personnel to maintain a small network of health institutions.

Conclusion

The nineteenth-century context provides a backdrop against which emerges a clearer picture of the beginnings of the Seventh-day Adventist health message. The prevalence of appalling health conditions particularly in the cities, along with the failure of heroic health measures used to cure illness, meant that the public were open to alternative forms of medical care. This openness was enhanced by the chaotic state of professional medicine, with its inconsistent training and licensing, and by the availability of popular remedies.

The validity of a health message arising from religious perspectives may seem doubtful to the twenty-first century mind. However, health messages arising from religious and other non-professional sources appealed to the mid-nineteenth-century American mind because of the prevailing attitudes and values of that time and place. These included the longstanding association between religion and health in the public mind, and the social, political, religious, and medical orientation towards the common man. These factors resulted in a rejection by the populace of the control of medical information and a willingness to give a voice to all who wished to be heard on the topic.

The choice to send Kellogg for formal medical training occurred at the time when medical schools were significantly increasing their profile on the North American continent and suggests that there was a recognition on the part of leaders of the Adventist Church that religious health claims would increasingly need to be backed by professional authority. Furthermore, Kellogg's subsequent push towards a more scientific practice of medicine matched the changing attitude of the country, which gradually moved from an anti-scientific mindset in the first half of the century to a strongly scientific one in the latter half of the nineteenth century.

It is undeniable that the majority of the simple health counsel presented by the Seventh-day Adventist Church was neither new nor unique. The ideals of fresh air, exercise, water, rest, and a vegetarian diet, along with the avoidance of stimulants, alcohol and tobacco were common to both earlier and contemporary health reformers. Given the widespread dissemination of these ideas through many channels it is most likely that Ellen White was aware of them even if she did not recognise their importance prior to her visions.

Although much of the instruction contained in the Seventh-day Adventist health message was not unique, the motivation provided for White's health message included aspects which were not held by any other reformers. The church's eschatological understandings precluded buying into the millennial thinking of the other health reformers, but did not negate the association of health with God's laws. Furthermore, it was White's linking of health to relationships, and our ability to think, witness, serve, and hear God which ensured that the health message would be of continuing relevance.

Notes and References

[1] See Gary Land, "From Apologetics to History: The Professionalization of Adventist Historians, *Spectrum,* 4: 10 (1980): 89–100.

[2] References in this paper will be taken from the third edition of Numbers' controversial work. Ronald L. Numbers, *Prophetess of Health: A Study of Ellen G. White*, 3rd ed. (Grand Rapids, MI: Eerdmans, 1992).

[3] See for instance, Ellen G. White Estate, *A Critique of the Book Prophetess of Health* (Washington, DC: Ellen G. White Estate, 1976). In spite of this response the value of Numbers' work has been widely acknowledged by church historians.

[4] The analysis of White's health teachings along with those of contemporary health reformers has led physician Don McMahon to conclude that "When the knowledge of the mid-19th century is taken into consideration, it is impossible to exclude inspiration from Ellen White's writings." Don S. McMahon, *Acquired or Inspired? Exploring the Origins of the Adventist Lifestyle* (Warburton, Victoria: Signs Publishing, 2005), 142.

[5] The Old Testament historical books appear to use other sources, while Luke specifically acknowledges his use of sources in the production of his gospel (Luke 1:1–4).

[6] John Mayfield, *The New Nation: 1800–1845* (New York: Hill & Wang, 1982), 6.

[7] J. C. Waller, *Health and Wellness in 19th-Century America* (Santa Barbara, CA: Greenwood an imprint of ABC-CLIO, 2014), 1.

[8] Fifteen states were added to the Union between 1800 and 1850. See David S.Reynolds, *Waking Giant: America in the Age of Jackson* (Sydney, Australia: HarperCollins, 2008), location 24–25, Kindle edition.

[9] Holliday and Swain note that in 1848 California attracted just 400 settlers, but after the discovery of gold, new migrants increased to over 90,000 in 1849 alone. See J. S. Holliday and William Swain, *The World Rushed In: The California Gold Rush Experience* (Norman, OK: University of Oklahoma Press, 2002), 26.

[10] I have retained the word man instead of a more gender-neutral word because the historical literature uses this phrase, and because Jackson's reforms mainly benefited white males at the expense of other groups. For more information on Jackson and Jacksonian America see Edward Pessen, *Jacksonian America: Society, Personality, and Politics* (Urbana and Chicago, IL: University of Illinois Press, 1978); Daniel Feller, *The Jacksonian Promise: America, 1815–1840* (Baltimore, MD: John Hopkins University Press, 1995).

[11] Winthrop S. Hudson, "A Time of Religious Ferment," in *The Rise of Adventism: Religion and Society in Mid-Nineteenth-Century America*, ed. Edwin S. Gaustad, 1–17 (New York: Harper & Row, 1974), 4.

[12] David Reynolds, *Waking Giant: America in the Age of Jackson* (Sydney, Australia: Harper Collins, 2008), Kindle edition, 87.

[13] Ty M. Reece, "Industrial Revolution 1780s–1840s," in *The American Economy: A Historical Encyclopedia,* ed. Cynthia C. Northrup (Santa Barbara, CA: ABC-CLIO, 2011), 1:239. Retrieved from https://books.google.com.au/books?isbn=159884461X (15 March, 2015).

[14] Waller, *Health and Wellness in the 19th Century*, 2. The diseases were not confined to the immigrants. Indigenous populations suffered heavily from the infectious diseases such as smallpox and cholera which were carried by

the migrants. Many tribes were decimated by these diseases to which they had no immunity.

[15] Several major denominations divided due to disagreement about the morality of slavery. Foremost among these groups were the Methodists and the Baptists. Others, such as the Roman Catholics, the Episcopalians and the Lutherans, suggested slavery was a secular matter not to be determined by the church. See John R. McKivigan, and Mitchell Snay, *Religion and the Antebellum Debate Over Slavery* (Athens, GA: University of Georgia Press, 1998), 343–346.

[16] Richard F. Selcer, *Civil War America: 1850 to 1875* (New York: Infobase Publishing, 2006), 395. See Table 18.6 Casualties of War, 1861–1865.

[17] This is one of the premises of Hatch's celebrated volume on Christianity in America. Nathan O. Hatch, *The Democratization of American Christianity* (New Haven, CT: Yale University Press, 1989).

[18] David, Hempton, *Methodism: Empire of the Spirit* (New Haven, CT: Yale University Press, 2005), 206.

[19] Collectively the many revivals that marked the American nation in the first half of the nineteenth century are referred to as the Second Great Awakening. While the precise dates assigned to these revivals vary between historians there is general agreement that this group of revivals was of unprecedented length and geographic scope. Iain H. Murray, *Revival and Revivalism: The Making and Marring of American Evangelicalism 1750–1858* (Edinburgh: Banner of Truth Trust, 1994), 116. In contrast to the First Great Awakening which was strongly Calvinist in its outlook, and emphasized the sinful nature of man and his inability to turn towards God, the Second Great Awakening was marked by the possibility of, and confidence in, the power of human choice. See L. T. Hall, *Religions in America* (New York: Infobase, 2007), 144.

[20] Hudson, "A Time of Religious Ferment," 4.

[21] Hall, *Religions in America*, 145. Nathan Hatch suggests that the revivals and the subsequent involvement of Christians in voluntary societies played an important part in the democratisation of American Religion. See Nathan O. Hatch, *Democratization of American Christianity* (New Haven, CT: Yale University Press, 1989).

[22] Hudson, "A Time of Religious Ferment," 9.

[23] The Great Awakening has therefore been visualized as "an organizing process that helped to give meaning and direction to people suffering in various degrees from social strains of a nation on the move into new political, economic and geographical areas." See Donald Mathews, "The Second Great Awakening as an Organizing Process, 1780–1830: An Hypothesis," in *Religion in America: Interpretive Essays*, eds. John M. Mulder and John F. Wilson (Englewood Cliffs, NJ: Prentice-Hall, 1978), 203.

[24] John G. West, "Nineteenth Century America" in *Building a Healthy Culture: Strategies for an American Renaissance,* ed. Don Eberly (Grand Rapids, MI: Eerdmans, 2001), 181–199. The chapter is also available online as a pdf with the title "Evangelical Reform in Early Nineteenth Century America" at http://www.discovery.org/f/5221.

[25] Timothy L. Smith, "Social Reform: Some Reflections on Causation and Consequence," in *The Rise of Adventism: Religion and Society in Mid Nineteenth-Century America*, ed. Edwin S. Gaustad (Harper and Row: New York, 1974), 19.

[26] West, "Nineteenth Century America," 183–185.

[27] Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books, 1982), Kindle edition, Location 1060.

[28] *Ibid.*, Location 944.

[29] Starr, *The Social Transformation of American Medicine,* location 949.

[30] Blake, "Health Reform," 31.

[31] *Ibid.*, 31–32.

[32] *Ibid.*, Location 1102.

[33] Jeremy Agnew, *Medicine in the Old West: A History, 1850–1900* (Jefferson, NC: McFarland, 2010), 20. Retrieved from https://books.google.com.au/books?Isbn =0786456035 (12 March, 2015).

[34] *Ibid.*

[35] *Ibid.*

[36] Starr, *The Social Transformation of American Medicine*, Location 1185–1191.

[37] *Ibid.*, Location 1206.

[38] Leonard I. Sweet, *Health and Medicine in the Evangelical Tradition* (Valley Forge, PA: Trinity Press International, 1994), 146.

[39] Agnew presents a helpful timeline of some key medical developments between 1796 and 1945. See Agnew, *Medicine in the Old West*, ix–xi.

[40] John Blake, "Health Reform," in *The Rise of Adventism: Religion and Society in Mid-Nineteenth Century America*, ed. Edwin S Gaustad (New York: Harper and Row, 1974), 35.

[41] Starr, *The Social Transformation of American Medicine*, locations 1269, 1347.

[42] Blake, "Health Reform," 33.

[43] *Ibid*. Lobelia is also known as Indian tobacco. It was used by the American Indians for asthma, and by nineteenth-century physicians to induce vomiting.

[44] Blake, "Health Reform," 34.

[45] Numbers, *Prophetess of Health*, 113–114.

[46] John Wesley, *Primitive Physic: or an Easy and Natural Method or Curing Most Diseases*, new edition (Edinburgh: Thornton & Collie, 1846). Retrieved from http://www.archive.org/details/primitivephysico00wesl (5 March, 2015).

[47] Cited in J. C. Waller, *Health and Wellness in 19th-Century America* (Santa Barbara, CA: Greenwood, 2014), 53.

[48] For the full statement, see the *Journal of the Senate of the State of New York*, Fifty-fifth session, Second Meeting, Thursday 21 June, 1832, 411–412. Retrieved from https://books.google.com.au/books?id=c-VKAAAAMAAJ (5 March, 2015).

[49] J. C. Waller, *Health and Wellness in 19th-Century America*, 52.

[50] Karen Iacobbo and Michael Iacobbo, *Vegetarian America: A History* (Westport, CT: Greenwood Publishing Group, 2004), 12; William Metcalfe, *Bible Testimony, on Abstinence from the Flesh of Animals as Food* (Philadelphia, PA: J. Metcalfe & Co, 1840), 6. Retrieved from http://www.archive.org/details/bibletestimonyon11metc (12 March, 2015).

[51] Rod Preece, *Sins of the Flesh: A History of Ethical Vegetarian Thought* (Vancouver, BC: University of British Columbia Press, 2008), 316.

[52] Iacobbo and Iacobbao, *Vegetarian America: A History*, 12.

[53] *Ibid*.

[54] Blake, "Health Reform," 36.

[55] Numbers, *Prophetess of Health*, 99–101. Graham argued that if meat was eaten it should be from clean, healthy animals. He rejected pork not because it was biblically unclean, but because it was a fatty meat.

[56] Sylvester Graham, *Lectures on the Science of Human Life: Containing Three Lectures — Eighth, The Organs and Their Uses; Thirteenth, Man's Physical Nature and the Structure of His Teeth; Fourteenth, the Dietetic Character of Man* (Battle Creek, MI: The Office of the Health Reformers, 1872), 71–72.

[57] J. C. Whorton, *Nature Cures: The History of Alternative Medicine in America* (New York: Oxford University Press, 2004), 87.

[58] *Ibid*, 88.

[59] Numbers, *Prophetess of Health*, 101–102.

[60] Waller, *Health and Wellness in 19th-Century America*, 55–56. Graham believed sexual activity more than once a month was excessive.

[61] Numbers, *Prophetess of Health*, 105.

[62] Blake, "Health Reform," 41.

[63] William Andrus Alcott, *Young Man's Guide, 2nd ed.* (Boston, MA: Lilly, Wait, Colman, and Holden, 1834), 24.

[64] Waller, *Health and Wellness in 19th-Century America*, 53.

[65] Blake, "Health Reform," 43.

[66] William Andrus Alcott, *Vegetable Diet as Sanctioned by Medical Men and by Experience in All Ages, 2nd ed.* (New York: Fowler and Wells, 1859), 285.

[67] Numbers, *Prophetess of Health*, 109.

[68] *Ibid*.

[69] Coles, *Philosophy of Health*, 214.

[70] While the foundation of Christian Science is generally attributed to Mary Baker Eddy, critics suggest that the true father of Christian Science is Phineas Quimby, a mental healer who treated Eddy. He combined

mesmerism with religion and psychology. Martin for instance notes that Eddy's textbook *Science and Health* was largely composed of plagiarised excerpts from Quimby's manuscript entitled *The Science of Man*. See for instance Walter R Martin and Norman H. Klann, *The Christian Science Myth* (Grand Rapids, MI: Zondervan, 1955), 14.

[71] Christian Science Publishing Society, *A Century of Christian Science Healing* (Boston, MA: Christian Publishing Society, 1966), 4.

[72] Mary Baker Eddy, *Science and Health* (Boston, MA: A. V. Stewart, 1913), 447.

[73] *Ibid*., 468.

[74] *Ibid*., 575.

[75] *Ibid*., 447.

[76] Terryl Givens, *The Latter-day Saint Experience in America* (Westport, CT: Greenwood, 2004), 122. Retrieved from https://books.google.com.au/books? isbn=0313327505 (12 March, 2015). For discussion of the Word of Wisdom in relation to nineteenth-century health practices, see Lester E. Bush, Jr. "The Word of Wisdom in Early Nineteenth-Century Perspective". *Dialogue* 14 (Autumn, 1981): 47–65.

[77] Joseph Smith, Jr, and the Church of Jesus Christ of Latter-day Saints, *The Doctrines and Covenants of Church of Jesus Christ of Latter-day Saints* (Salt Lake City, UT: Intellectual Reserve, 2013), 89:1–21.

[78] *Ibid*., 89:16.

[79] Givens, *The Latter-day Saint Experience in America*, 123.

[80] *Ibid*.

[81] While the principles relating to alcohol, tobacco, tea and coffee had received increased attention, the recommendations on the sparing use of meat are largely ignored. The association of health with Paul's concept of the body as the temple of God, and with spirituality were later additions.

[82] This was a precursor movement to the current Jehovah's Witnesses, but many Jehovah's Witnesses do not regard him as a founder of their church, since some changes in philosophy occurred. The name "Jehovah's Witnesses" was adopted in 1931 by those who wanted to distance themselves from this heritage. For a chronology, see George D. Chryssides,

Historical Dictionary of Jehovah's Witnesses (Lanham, MD: Scarecrow Press, 2008), xxi–xxvi.

[83] While warnings about tobacco appeared in the 1890s, prohibition of smoking was applied progressively in the twentieth century, first to church leaders and, subsequently, to all members in 1973. The early reasoning for the prohibition is based on the observation that tobacco created an appetite for "impure and filthy things." See "Everything for the Issue," *The Watchtower* (1 July, 1942): 205–6; *The Watchtower* (1 June, 1973): 340. The topic of vaccination underwent vigorous discussion at the beginning of 1923. For the most part, correspondents appear to be negative about its potential to prevent disease, and suggested that it was fraudulent. See for instance, Mrs Andrew J. Holmes, "The Vaccination Fraud," *The Golden Age* (2 January, 1923), 211–214. The topic again attracted attention in the midst of the smallpox vaccinations of 1935. For the most part the tenor of discussion was generally negative. Some argued that it was against God's law since the injection of animal material into the blood stream violated blood laws. Despite this negative attitude toward vaccines, it is unclear if there has ever been a direct prohibition of the practice. Vaccination gained wider acceptability amongst members in 1952. See "True Christian in Court," *The Golden Age* (24 April, 1935), 471; See also "Questions from Readers," *The Watchtower* (15 September, 1958): 575. Blood transfusions were rejected in 1945, and became an offence worthy of disfellowship in 1961. See "Immovable for the Right to Worship," *The Watchtower*, (1 July, 1945): 195–204; "Questions from Readers," *The Watchtower* (15 January, 1961): 63.

[84] Russell did not share the concerns of contemporary Jehovah's Witnesses about blood transfusion. The first mention of any issues related to blood occurred until 1892 in the context of the advice of the Jerusalem Council of Acts 15. Russell appeared to believe this was a temporary measure which was no longer applicable. See http://ajwrb.org/the-historical-perspective/the-modern-historical-perspective. Current Jehovah's Witnesses can also be disfellowshipped and shunned for gluttony and smoking.

[85] Edwin R. DuBose and James M Penton, *The Jehovah's Witness Tradition: Religious Beliefs and Healthcare Decisions.* (Park Ridge, IL: Park Ridge Center for the Study of Health, Faith, and Ethics, 2002), 2. Retrieved from http://www.che.org/members/ ethics/docs/1266/Jehovahs%20Witness.pdf (5 March, 2015).

[86] *Ibid*., 2.

[87] Bates had rejected alcohol and stimulants such as tea and coffee and had embraced dietary reform prior to the Great Disappointment in 1844. George Knight, *Joseph Bates: The Real Founder of Seventh-day Adventism* (Hagerstown, ND: Review and Herald, 2004), 200.

[88] *Ibid.*

[89] Dores E. Robinson, *The Story of Our Health Message* (Nashville, TN: Southern Publishing, 1943), 65–70.

[90] The first two visions were limited in scope. In the first vision, in the autumn of 1848, White was shown the effects of tobacco, tea and coffee, while in the second vision on February 12, 1854, she was directed to health related issues such as bodily cleanliness and the control of appetite. The vision in Otsego on June 6, 1863, is considered the most comprehensive of White's health visions. It included a wider variety of health suggestions, including vegetarianism, avoidance of overwork, the avoidance of stimulating drinks, tobacco, and spice and the importance of rest. The most important contribution of this vision, however, was not the principles of health it contained, but rather the consideration of how health relates to spirituality. See John Skrzypaszek, "The Heart of the Seventh-day Adventist Health Message," *Ministry,* 86:12 (December, 2014): 6–8. The material which was written in White's manuscripts immediately after the visions lacks the amount of detail that would characterise her later descriptions of the vision in the book *Spiritual Gifts*, and raises the possibility of the addition of material from other reformers in her later descriptions. The fourth health-related vision occurred in Rochester New York on December 25, 1863. It contained no new health advice, but rather an instruction for Adventists to work with the sick and to teach preventative medicine.

[91] For information on White's views of health see for instance Ellen G. White, *Spiritual Gifts* (Battle Creek, MI: Seventh-day Adventist Publishing Association, 1863), 4:120–151; Ellen G. White, *Ministry of Healing* (Mountain View, CA: Pacific Press, 1942). The previous writings retain their original contexts and are to be preferred over Ellen G. White, *Counsels on Diet and Foods* (Mountain View, CA: Pacific Press, 1938); and Ellen G. White, *Counsels on Health* (Mountain View, CA: Pacific Press, 1923) which are compilations of quotes without their original contexts.

[92] Ellen G. White, MS1, 6 June, 1863. Ellen G. White Research Centre at Avondale College of Higher Education.

[93] The motivations for a denominational health message should be distinguished from the causal explanations for specific practices which form part of Don McMahon's studies on Ellen White. McMahon concluded that White's causal explanations for practices often had little support from modern science and medicine, whereas her advice about which health practices should be followed were largely supported by modern medicine. See McMahon, *Acquired or Inspired? Exploring the Origins of the Adventist Lifestyle.*

[94] Ellen G. White, *Testimonies for the Church* (Mountain View, CA: Pacific Press, 1948) 9:159.

[95] White, *Ministry of Healing*, 130.

[96] *Ibid.*

[97] Ellen G. White, MS 6a, 27 June, 1886. Ellen G. White Research Centre at Avondale College of Higher Education.

[98] Ellen G. White, MS 1, 6 June, 1863. Ellen G. White Research Centre at Avondale College of Higher Education.

[99] However, Kellogg's legacy is mixed. In addition to the positive image of Adventist health maintained through the Battle Creek Sanitarium, and Kellogg's association with other Adventist health institutions, Kellogg is also remembered for his controversial views on eugenics and on racial segregation. For more information on Kellogg, the following biography is recommended: Richard Schwarz, *John Harvey Kellogg, MD: Pioneering Health Reformer* (Hagerstown, MD: Review and Herald, 2006).

[100] Richard W. Schwarz, "The Kellogg Schism: The Hidden Issues," *Spectrum*, 4:4 (1972): 25.

[101] Numbers, *Prophetess of Health*, 238.