What Pandemic?: Physical Memorilization of the 1918 Pandemic

Carly M. Kauffman
Fort Hays State University, carlysmolcraft@gmail.com

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WHAT PANDEMIC?:

PHYSICAL MEMORIALIZATION

OF THE

1918 PANDEMIC

A Thesis Presented to the Graduate Faculty

of Fort Hays State University in

Partial Fulfillment of the Requirements for

the Degree of Master of Public History

by

Carly Marie Kauffman

Bachelor of Arts in History, Fort Hays State University

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Approved
Major Professor

Approved
Graduate Dean
ABSTRACT

Throughout history there have been many significant events the people find worth remembering. Some of these events are significant enough that people build structures to honor, commemorate, or memorialize them. However, there are some events that are also significant, yet they seem to warrant little or no memorialization. In the United States' historical narrative, it seems that the Influenza Pandemic of 1918 is forgotten among the chaotic period of World War I and the interwar years. The lack of traditional memorials dedicated to the 1918 Pandemic can be attributed to the lack of acknowledgement of the pandemic in terms of the public in both the United States and other countries all over the world and the breakdown of societal norms in the eyes of survivors. Death became a routine part of life and there was little time to memorialize the dead. The casualties of WWI also overshadowed the deaths from the influenza.
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INTRODUCTION

In the narrative of history, historians approach certain events in different ways. For instance, one country may focus on an impactful event, and another country may choose not to discuss that event in the narrative of their history. Different historical narratives focus on other aspects of those histories. However, being selective about what parts historians share in a narrative can have harmful effects on the present because aspects of history are lost. One of these significant moments in history that is lost in the narrative of American history is the Influenza Pandemic of 1918.

In the United States' historical narrative, it seems that the Influenza Pandemic of 1918 is forgotten among the chaotic period of World War I and the interwar years. The lack of traditional memorials dedicated to the 1918 Pandemic can be attributed to the lack of acknowledgment of the pandemic. Death became a routine part of life, and there was little time to memorialize the dead. As a result, the breakdown of societal norms was normalized in the eyes of survivors.

When it comes to the Pandemic of 1918, there are two different views through which we can explain the event: national memory and local memory. The former, as the name suggests, refers to how a nation remembers a certain historical event. The latter refers to how a community remembers the event itself. When it comes to national memory and the way that the United States approached the history of the Influenza Pandemic of 1918, it seems that the public in the United States only recently took an interest in the pandemic, and that is, in part, due to the fact that we recently reached the centennial anniversary, and the world is facing another global pandemic. This is evident in the number of articles and other forms of research on the 1918 Pandemic that are currently appearing in mainstream media. In the United States, there is only a sprinkling of monuments dedicated to victims of the Influenza Pandemic of 1918; many of them are focused on
local memory, and none of them are national monuments. This is interesting considering that the Influenza Pandemic of 1918 is responsible for the death of six-hundred and seventy-five thousand Americans and over fifty million people worldwide.¹ There are accounts of so many people dying that many of them ended up decomposing in their homes because coroners would take a couple of days to come to people’s homes and collect the dead.² There are many examples that explain just how horrific the Pandemic of 1918 was, especially to those who lived through it and either took care of or were victims themselves. Yet, there seems to be little National Memory in the United States. Hence, to understand the memory of the 1918 Pandemic, we need to comprehend where the virus came from and how it spread so quickly.

There are many theories about where and how the influenza pandemic began. At the time, it was believed to have spread from Spain, which explains why it was called the Spanish Flu, or sometimes Spanish Lady. However, this proposed origin has been proven false, and now some argue that the influenza pandemic began in the United States, namely the state of Kansas. It has even been traced to a military camp near Fort Riley called Camp Funston.³ Even though scholars cannot prove that this was ground zero in terms of the outbreak, Camp Funston is where the outbreak had its biggest impact in the first wave of the pandemic. As soldiers deployed from Camp Funston, influenza quickly spread to other military camps across the country. Soldiers not only overseas with them.

There are three well-known episodes of the 1918 Pandemic. The first one started in March of 1918 and lasted until the end of May and early June. This wave caused the least number of deaths and subsided during the summer because the virus could not survive in warmer temperatures. The second and most severe wave of the pandemic took place in the fall of 1918. This was when the most deaths occurred, causing it to be taken more seriously by health commissioners and the public in general. The third and final wave of the pandemic occurred during the spring of 1919. However, a few months after that, the pandemic subsided, and the world returned to normal.4

There had been influenza outbreaks before the 1918 strain, such as the Russian Flu epidemic of 1889, that targeted those with compromised immune systems, children, and the elderly. However, the 1918 strain became terrifying because of who was affected. In addition to the vulnerable populations, young and healthy people from ages twenty to forty were also at high risk. This age group suffered the most in the pandemic and died at an uncommonly high rate. This was rare at the time since medicine had advanced in the early years of the twentieth century. To combat the illness, the government turned to public health experts who encouraged public health practices, some even enforced by law, including isolation, quarantine, improved hygiene, use of disinfectants, and limitations on public gatherings.5

In retrospect, the 1918 pandemic’s death toll surpassed the total number of combat casualties in World War II. It would make sense for it to be considered a major part of the historical narrative.6 Yet, as stated previously, it has been forgotten, at least in terms of National Memory.

4 Barry, The Great Influenza.
However, that does not seem to be the case in terms of Local Memory, at least in the United States. When it comes to memorials that have been put together for victims of the 1918 Influenza Pandemic, in the United States, they are generally small and only dedicated to one or a few victims of the pandemic that are from a specific region or died in that area. Unlike many other countries, there is no national monument or memorial dedicated to the victims of the 1918 Influenza Pandemic. This seems odd given the number of deaths that the United States suffered.⁷

In terms of monuments and memorials, it is interesting to not only look at what a monument or memorial is dedicated to but also how long after the event the monument or memorial is dedicated. The time frame in which a memorial is built needs to be taken into consideration to understand the context of the memorial itself. Many of the monuments and memorials in the United States dedicated to influenza victims are privately owned or on private property in general, and many of them were built recently or at least several years after the pandemic occurred.⁸ At Arlington National Cemetery, there is a memorial dedicated to nurses who served and died during World War I, some of whom reportedly died due to the effects of the Influenza Pandemic of 1918 since they were tasked with taking care of the soldiers who caught influenza. This memorial was commissioned in 1937 and unveiled in 1938.⁹ A memorial dedicated to victims of the 1918 Influenza Pandemic at Camp Funston no longer exists as it was torn down with the rest of the camp in 1922, though there are photographs of the structure.¹⁰ Which again is interesting, as it is

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understandable that the camp itself no longer exists, but to destroy a memorial dedicated to soldiers seems peculiar.

Memorials and monuments exist for two primary reasons: because a major tragedy or war takes place, and the public believes it is important to remember the people as a whole that were involved, or because survivors, and families of survivors, commission them to remember loved ones. The former is why so many Holocaust and World War II monuments and memorials exist all over the world. Memorialization of the Influenza Pandemic of 1918 is an interesting case study because it resembles the latter reason because the memorials were focused on locals or small groups of people from the region. However, as a group or a nation, it is hard to find people who want to band together to memorialize those who died from something as trivial as “the flu.” Journalist Britta Shoot examined why the United States does not have a national influenza memorial, and she concluded that to have died from influenza was not considered heroic, and therefore not worthy of memorialization on a national level. According to Shoot, society, in general, believes that only heroic deaths are worthy of memorialization. However, this begs the question; what constitutes a heroic death? It seems in this case, taking Shoot’s comments into consideration, only war or great tragedies (resulting from war perhaps?) such as the Holocaust, warrant memorials and only then are victims’ deaths seen as heroic.

Alfred W. Crosby is one of the first historians to take a close look at the 1918 Pandemic and the memory of the event and why it is not remembered alongside World War I, especially since so many people died due to the illness. Crosby claims, in his work, that while the vast majority of people may have forgotten the flu, young people at the time certainly did not forget.

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the pandemic that ravaged their country. In his work, *America's Forgotten Pandemic*, he cites many different works of literature and other forms of media, such as movies that reference the pandemic not long after 1918. It certainly made a mark on people’s lives; however, this still did not seem to be enough to warrant memorialization of the pandemic as a separate event from World War I.12 Nancy Bristow also explains the memory of the pandemic in her work *American Pandemic*. She states that another reason the pandemic is not commemorated or remembered in the United States, and perhaps other countries, is because, at the time, people were more focused on the positives of history. The 1918 Pandemic was certainly not considered a positive part of history in the eyes of Americans. This lends support to Shoot’s comment about only memorializing heroic deaths. While people who died heroic deaths still died, their lives are to be celebrated rather than pitied.13

The pandemic warrants examination for many reasons. The fact that the general public has almost forgotten the Influenza Pandemic of 1918 in the narrative of United States History is certainly clear in the second decade of the twenty-first century. Not only are people not learning from past mistakes, but they are also ignoring past successes. This is something that is also applicable to the 1918 Pandemic itself. So, maybe the deaths of those who succumbed to Influenza in 1918 were not deemed brave or heroic, but that does not make them any less important to history.

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HISTORIOGRAPHY

Surprisingly, the historical literature about the pandemic of 1918 is somewhat limited, given the impact that it had on the United States and the world. There are a few prominent books on the subject, one of the first being The Great Influenza: The Epic Story of the Deadliest Pandemic in History, written by John C. Barry and published in 2005. This book looks at the pandemic from a medical view, but not necessarily from firsthand accounts. His thesis is that by knowing what happened in one major pandemic, the human race may be able to fight off another if the need arises. Barry looks at how the Influenza spread and how the impact of the virus, the quarantines, and the various health precautions that many areas had to take, and how the pandemic took a toll on society in general. He goes through the various ordinances that public health officials installed in different places in order to contain the virus and discusses how the virus began and how, from a scientific standpoint, it spread quickly and killed a huge number of people in the United States.14 Barry’s book is one of the most respected sources when looking at the pandemic in general.

Another book that focuses on the pandemic as a whole is Flu: The Story of the Great Influenza Pandemic of 1918 and the Search for the Virus That Caused It, written by Gina Bari Kolata. Much like Barry’s work, Kolata focuses mostly on the history of the pandemic as well as what it did to society and how it spread so quickly. However, Kolata’s book differs from Barry’s because it is more about the history of the pandemic, how it began, and how it spread, despite the author’s background in medical science suggesting a more scientific view on the pandemic. In contrast, Barry is more focused on the effects that the pandemic had on society. Kolata looks at plagues and pandemics in general at the beginning of the book, and this helps the readers to

14 Barry, The Great Influenza.
understand more about the history of medical outbreaks such as the Pandemic of 1918. However, much like Barry, it does not offer much in the way of individual stories to the history of the Pandemic of 1918 as it is more of an overview of the event.15

Alfred W. Crosby’s *America’s Forgotten Pandemic* is one of the more prominent sources used for this work simply because he is one of the first people to look at the pandemic from an analytical standpoint and consider why it is not a common event discussed in history. Barry and Kolata are wonderful sources, but Crosby is one of the first historians to consider the 1918 Pandemic a huge part of history, though he mostly focuses on the perspective of the United States. However, Crosby also discusses the memory of the pandemic, namely why people have not remembered it. Overall, Crosby’s work is important to this research with the insights he gives into the memory of the 1918 Pandemic.16

The last work to discuss is that of Nancy Bristow’s *American Pandemic*. It is another work that goes through the history of the pandemic in an analytical way like Crosby, rather than looking at it from a scientific perspective such as Barry or Kolata. This work also had a huge influence on this research because of its nod to the memory of the pandemic as well as its analysis of the history of the event. Like Crosby, Bristow comments on the memory of the pandemic and why nobody commemorated the victims. Her work is more recent than Crosby’s, but this aspect offers more perspective on how memorialization works in the United States. It is for these reasons that this work is included in the historiography of this research.17

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16 Crosby, *America’s Forgotten Pandemic*.
While looking at the Pandemic, it is also important for this work to look at the idea of memory in a historical sense, or the use of memory in history, and what the advantages and disadvantages of using memory as a source are. Memorials and monuments are one way that humans honor the past, but it is not the only way, and memorials are not always monuments. Anything that memorializes someone can be considered a memorial. There are several works that discuss the idea of memory and how it can be used to research the past. *The Collective Memory Reader*, compiled and edited by Jeffrey K. Olick, Vered Vinitzky-Seroussi, and Daniel Levy, is a collection of secondary sources written on the idea of collective memory. Collective memory is the memory held by a group of people passed from one generation to the next. The study of collective memory and how it relates to history is something rather recent. In “History as a Social Memory,” author Peter Burke explains how the memory of a person can be altered over time as their perspective of the event changes. So, for example, when someone witnesses an event, it is fresh in their minds, and they will remember it better closer to the event. However, if someone is asked to remember something from, say, forty years ago, their perspective of that memory may have changed due to having more context.\(^\text{18}\)

Memorialization can be hard to define, as there are many ways to honor the memory of a person or event. However, Erika Doss in *Memorial Mania* does a wonderful job of discussing different types of memorials as well as what can be considered a memorial. Doss explores the different emotions behind certain types of memorials and offers a better understanding of why people memorialize certain events over others. It is through this work that a definition of memorialization can be found.\(^\text{19}\)


In chapter one of this work, I will discuss general information on the Pandemic of 1918, including how it started and the beliefs and theories on where this particular strain of the virus came from, though no one truly knows the answer to that question. Chapter one will also include the reactions of the public, as well as how different cities, counties, and universities reacted to the pandemic. Chapter two discusses National Memory and how the United States and other countries remember the pandemic, including information on memorials and monuments. Chapter three will discuss Local Memory, focusing on Kansas. In this chapter, I examine how different places took different approaches to the memory of large events such as the Pandemic of 1918 and discuss how smaller communities are more likely to remember events and find ways to memorialize there, where large communities will only memorialize certain events and almost completely forget others. This work will not only add to the historical narrative of the 1918 Pandemic, but it takes a closer look at how something so devastating and so large can be lost in a chaotic time period, only to resurge later when the material becomes more relevant.
CHAPTER ONE: THE HISTORY OF THE 1918 PANDEMIC

To understand the 1918 Pandemic, it is important to define what a pandemic is and discuss the general history of pandemics. In primary sources and earlier secondary sources, the 1918 Pandemic is often referred to as an epidemic instead of a pandemic. An epidemic is when a sudden increase in cases of disease occurs in one community or region; so, as the cases increased greatly during the second wave of the 1918 Pandemic, it was referred to as an epidemic. A pandemic, on the other hand, is when the epidemic spreads over multiple countries or continents. It is important to make this distinction so that the usage of the word epidemic in early sources is understood. While the usage of the word epidemic is correct for the time, looking back on the pandemic later and knowing the context, the 1918 Influenza Pandemic can indeed be labeled as a pandemic because of the spread of influenza on a global scale. It is also important to understand that an outbreak is different than an epidemic, as an outbreak can be labeled as a greater-than-anticipated increase in the number of endemic cases. An outbreak can be a single case in a new area that public health officials try to control quickly. So, while there have been many influenza outbreaks throughout the twentieth and twenty-first centuries, they are not always pandemics or epidemics.20

Throughout history, there have been many pandemics that have been just as serious, if not more serious, than the 1918 Influenza Pandemic. One of the most well-known pandemics to exist in history was the Black Death or the Bubonic Plague. This pandemic occurred between 1346 and 1353, and the death toll rose to two hundred million. The plague ravaged Europe, Asia, and Africa and most likely jumped between continents via fleas on rats that lived on merchant ships.21

In recent history, there have been several flu pandemics, though none of them as serious or as devastating as the 1918 Pandemic. The first influenza pandemic recorded in history killed one million people worldwide between 1889 and 1890 and was called the Asiatic or Russian flu. The spread of the illness was only helped by the growth of cities in the nineteenth century, specifically spreading in urban areas, mostly due to people living close together. The most recent flu pandemic, the Hong Kong Flu, was in 1968, and, like the first flu pandemic, the death toll of this outbreak reached one million. It spread mostly through Asian countries, but in three months, it spread to the Philippines, India, Australia, Europe, and the United States. The 1918 Pandemic had the highest death toll of any of these recent pandemics and had more of a global effect.

THE 1918 PANDEMIC: BASIC HISTORY

It is not clear where influenza came from or how it spread throughout the world so quickly. Though, in both the first occurrence of the disease and the resurgence of it later on, the military training camps played a role in the spread of the virus. The first wave, according to John M. Barry, author of *The Great Influenza*, came from a military training camp called Camp Funston, located near Fort Riley, Kansas. Historians believe that the virus started to spread through the camp in March of 1918, though there are no confirmed answers to where it came from or how it arrived in Camp Funston. It was not long; in fact, it only took three weeks until one thousand and one hundred soldiers were hospitalized because of influenza, and thousands more were receiving treatment for the virus in infirmaries surrounding the camp. Between March and the summer, several outbreaks occurred at the camp, and this coincided with the arrival of large numbers of new recruits. The virus spread to other military training camps due to the movement of the soldiers and further spread by soldiers who were shipped across the sea to Europe to fight in World War I before it began to subside in the summer of 1918. From March to May, 1.2 million men in the United States Army were hospitalized for respiratory illness.23

While the first wave of the Pandemic was certainly terrifying, the second wave was when the virus was really out of control. During the first wave, many people were affected, especially soldiers, but there were not as many deaths as the second wave. The death toll of the second wave went into the millions. There were cases in Europe as early as August, but in September, there was a major increase in cases of influenza in the British Army. The armies in Europe were hit hard with the second wave. The German Army reported the loss of 14,000 soldiers, and in England and

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Wales, the military death toll went to 7,591. In the United States, the second wave of the Pandemic began at yet another United States Army training camp, Camp Devens, just outside of Boston, Massachusetts. Within ten days of the first case, the hospital and regimental infirmaries were overwhelmed with soldiers who had caught the virus. By the end of September, there were over 14,000 reported cases, and about 757 of those cases resulted in death.24

The Influenza Pandemic affected more than twenty-five percent of the United States population, and around six hundred and seventy-five thousand Americans died. To put this number into perspective, if every combat casualty from the American Revolution to the Gulf Wars were totaled, it would still not equal the number of Americans killed by the influenza pandemic. This is remarkable considering that this timeline includes two of the biggest wars in history, World War I and World War II, as well as the Civil War, the bloodiest war fought on American soil; that is a lot of Americans to lose to the flu.25

This Influenza was different from previous outbreaks that had been less severe. Scientists divide influenza into three different types, Type A, Type B, and Type C. The Spanish Flu is a mutation of Type A Influenza, and while the regular strains of the flu targets juveniles, the elderly, and those with compromised immune systems, this mutation was different because it targeted healthy young adults, such as the soldiers in the military training camps. The Spanish Flu also continued to mutate and change throughout the rest of the pandemic, so the early cases that showed up in March of 1918 were far less deadly than the cases that were prominent in the second wave of influenza. The article also states that this strain of the flu would attack the victim’s lungs and

cause pneumonia; in return, the immune system of the young adult would violently attack the pneumonia and cause irreparable damage to the lungs, resulting in death.26

It is also important to look at how society handled the spread of this pandemic because in looking at the public reaction, historians can learn how people were thinking at the time. According to an article on the “Spanish Flu Pandemic Response in Cities,” there were a few different reactions from health officials, and all of them had incredibly different results. Public reaction to the Spanish Influenza mostly took place during the second wave. The initial reaction in a major city began with Philadelphia in September of 1918. While the second outbreak originated in Camp Devens near Boston, Massachusetts, many men returning from World War I carried the disease back from Europe and spread it through New York, Boston, Philadelphia, and San Francisco. Since there was no vaccine or other ways to prevent the disease in general, mayors and health officials in major cities did not know how to respond. When professionals announced the first civilian case, local doctors began to worry about the possibility of an epidemic. However, one Philadelphia health official, Wilmer Krusen, assured people that it would be contained within the naval bases where the disease was more prominent among the ranks of the soldiers and could be contained among civilians by “staying warm, keeping their feet dry, and their bowels open.”27 Even as infections soared among the civilian population, Krusen refused to cancel the upcoming Liberty Loan parade on September 28, despite warnings from infectious disease experts due to the expectation that several hundred thousand would attend. Only seventy-two hours after the parade, all thirty-one of Philadelphia’s hospitals were full of those who had become sick with the Spanish Flu and, by the end of the week, the disease had claimed the lives of two-thousand and six hundred people. Some

26 Leimkuehler et al., “Unknown Enemy: The Spanish Flu Pandemic of 1918-1920.”
27 Crosby, America's Forgotten Pandemic, 73-91.
people denied that anything was wrong at first, thinking that the illness was just the flu and refusing to stop day-to-day operations. By the time people began to worry, it was too late. The result was that the disease spread quickly and killed a huge number of people in a matter of weeks, something that could have been avoided if Krusen had canceled the parade and started to ban public gatherings.28

While Philadelphia had ignored the threat of the Spanish Flu and paid the price for doing so, other cities took a different and more careful approach. San Francisco health officials decided that the gauze mask would be the hero of this pandemic. California Governor William Stephens stated that it was the patriotic duty of every American citizen to wear a mask, and government officials in San Francisco believed in this idea so whole-heartedly that they eventually made it a law. Any citizen caught in public without a mask, or wearing it improperly, was arrested, charged with disturbing the peace and fined five dollars. Officials claimed that the masks were ninety-nine percent effective against influenza; in reality, they were hardly effective at all because most masks were made from gauze at the time, which did not do much to filter respiratory droplets. Despite this, San Francisco did not have high infection rates, and that can probably be attributed to the early closing of schools, campaigns to quarantine all naval installations before the flu arrived, a ban on social gatherings, and closing of all places of public amusement. On November 21, 1918, local government officials gave the signal, in the form of a whistle blast, that finally allowed San Franciscans to take off their masks, thinking the worst of the pandemic was over. Unfortunately, they were incorrect as the third wave of the Spanish Flu struck in January of 1919. Since they firmly believed the gauze mask had been their savior the first time, businesses and theatre owners fought back against bans on public gatherings, and as a result, the city suffered some of the highest

death rates, compared to other cities in the United States, during the pandemic. This reaction to
the pandemic shows the dangers of misinformation. The people of San Francisco believed so
deeply that the masks were what protected them from being afflicted by the disease that when a
third wave hit, they fought against stay-at-home orders and ended up with one of the highest death
tolls of the nation.29

Other countries reacted differently to the pandemic. When the first two waves of the
pandemic hit in 1918, the world was still fighting World War I, which ended on November 11,
1918; this accounts for influenza spreading among other countries so easily. Fighting mostly took
place in Europe, and with men being in close quarters, the virus spread quickly throughout the
ranks. When the first wave of Influenza hit, many European countries attempted to censor the
severity of the illness in newspapers. This is because European nations had been at war since 1914
and the United States had only entered the war after 1917. Censorship such as this was common,
and in turn, people tended to censor themselves out of fear of breaking the law. The reason for this
censorship in Great Britain was due to the passing of the Defense Against the Realm Act, which
suppressed news stories that might be a threat to national morale.30

In Britain, half of the country’s medical professionals were serving in the military, and
hospitals at the time were dedicated to military requirements. Since there was little to offer to
civilians in terms of prevention or cure for influenza besides the standard methods such as isolation
and disinfection, the illness was largely ignored by the general public either because they did not
see it as a threat or government officials did not make it out to be a threat. Sir Arthur Newsholme,
Chief Medical Officer of the Local Government Board, stated that influenza traveled too rapidly

29 Crosby, America's Forgotten Pandemic. 93-119.
30 Becky Little, “As the 1918 Flu Emerged, Cover-Up and Denial Helped It Spread,” May 26, 2020,
to be stopped and could not be controlled. “I know of no public health measure which can resist the progress of the pandemic influenza,” Newsholme stated. As such, he would not issue an official memorandum about influenza and how dangerous it was to civil authorities in the summer of 1918. At this time, there was not yet an actual Ministry of Health, which would have been able to oversee a national prevention strategy. Since it was not a notable disease, there were no legal measures to put quarantine measures in place. It was also Newsholme’s belief that it was the nation’s duty to carry on working for the war effort, and public health measures might hinder that.\textsuperscript{31}

The British military took a much different approach to the pandemic. After the illness struck France in the spring of 1918, the Army Medical Service did everything it could to combat the disease. They conducted research and committed time and manpower to investigate the cause of influenza in an effort to create a vaccine. They were determined because they knew that other diseases such as cholera and dysentery had been successfully stopped in the past, and so they hoped influenza would be curtailed by medical professionals as well. Arnold finds that this is normal as war often drives advances in technology and science, including medical science. Despite the high rate of infection, the spread of the illness throughout the military during the spring and summer of 1918 was considered mild. Many of the soldiers who became ill with the disease in both the Allied and German armies recovered. However, some experts were already predicting another wave, and they assumed it would be more deadly than the first one.\textsuperscript{32}

During the later months of the summer of 1918, the pandemic started to spread through Europe. Arnold notes that “…Spanish Flu succeeded where the German army had failed and

\textsuperscript{31} Catharine Arnold, \textit{Pandemic 1918: Eyewitness Accounts from the Greatest Medical Holocaust in Modern History} (New York: St. Martin's Griffin, 2020), 76-87.
\textsuperscript{32} Arnold, \textit{Pandemic 1918}, 76-87.
effortlessly conquered Europe.”33 People abandoned their daily routines as trains were canceled, businesses collapsed, and trials went unheard as legal proceedings were suspended. Even Wilhelm II, the German Kaiser and King of Prussia, fell victim to the Spanish Flu, and his subjects suffered alongside him as at least four hundred thousand Germans died of influenza. In Hamburg, four hundred people per day were dying, and in Paris, one thousand and two hundred people died in a week. Influenza spread from one country to the next, the death toll rising higher and higher. The disease truly did conquer much of the world during the second wave, making it one of the deadliest pandemics since the Bubonic Plague outbreak in the fourteenth century.34

So, while the 1918 Pandemic certainly affected the United States, it was, in fact, a global pandemic that took a heavy toll on the world. When people ignored the virus, they suffered, and everyday life changed drastically. The fact that the disease began its spread right at the end of one of the deadliest wars in history did not help matters. The war effort was deemed too important for people to care about something as simple as the flu, and this negligence contributed to the death toll.

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EXPERIENCES WITH INFLUENZA

Statistics and public handling of the Pandemic of 1918 are important, but this does not paint the full picture of what living and being around the Spanish Flu was like. The most important and more vivid of the first-hand accounts found during this research is that of caregivers, meaning anyone who had the responsibility of caring for those that became ill with influenza. From their stories, we understand just how serious this illness was, even though it was taken lightly or not even considered a threat by some.

*Work of the Sisters During the Epidemic of Influenza, October 1918*, compiled by Francis Edward Tourscher, contains firsthand accounts from nuns who lived in convents in Philadelphia that went to help people that had influenza, whether they had any medical knowledge or not. Tourscher compiled the accounts in 1920, only two years after the pandemic itself. These women saw what the Influenza of 1918 did to people, and they would experience every sensory part of being a caregiver, making these stories incredibly important.35

One of the many constants throughout the stories is the Sisters’ need to convert the dying to Catholicism. It was not difficult as many of the dying were either desperate or delirious. Tourscher describes this as interesting and pathetic because it reveals the motivation behind their kindness. The patient’s delirium near their deaths contributes to the knowledge of what it was like to be severely ill with influenza. In one account, a sixteen-year-old girl whose whole family had died or was close to dying from the illness. The girl frequently talked of seeing angels, and she asked the Sisters to teach her Hail Mary in Latin, “for in Heaven we must pray in Latin as all do.”36

Another account describes a man who came to one of the hospitals coughing up blood. The next morning, they found that he had died in the night of a severe hemorrhage. “The Sisters were keenly disappointed at the loss of the quiet, gentle sufferer, whom they could not prepare for baptism,” Tourscher notes. 37 Even while many of these convents and parishes probably believed they were kind in helping those in need, one of their main motivations was conversion.

Although many accounts describe the patients’ delirium, not all of the stories end in death. For example, one man thought that he was in jail and insisted on his innocence, and another imagined that one of the Sisters was his mother. Patients’ fevers tended to be high, and it is easy to see how they could be so delirious, especially in their final moments. Many of these accounts do not offer much in the way of personal stories, but they do provide such data as to how many patients were at what hospitals, as well as outward symptoms of the virus. For example, there were five hundred and thirty-two influenza patients admitted to St. Agnes’ Hospital in Philadelphia, four hundred and sixty cases to St. Mary’s, and three hundred and three admitted to St. Joseph’s Hospital, totaling more than one thousand cases all in one area.38

The accounts of the Sisters from the Sisters of the Holy Child mention what some of the patients looked and acted like, which paints a picture of just how terrible the illness could be in large, populated areas. Some of these Sisters were tasked with caring for the sick in their private homes. Usually, the priest of the parish requested that the Sisters go to those private homes and take care of the sick and dying families. The Sisters tried to help in any way they could, cleaning the house and caring for those afflicted and the children of the family, if necessary. One sister wrote, “The sights were often dreadful when we look back now. In one very poor little home, there

37 Tourscher, Work of the Sisters, 4.
38 Tourscher, Work of the Sisters, 6-7.
were six victims, father, mother, and four children, in bed in two small rooms. In one of these, a
dead child had lain for three days. It was impossible to get the services of the undertaker.”39

The Sister does not specifically mention the smell of the dead child, or at least the qualities
of that smell, but one can only imagine that if the body of the child had lain in bed for three days,
it would start to smell rather terrible. Another account tells of some Sisters being sent to a hospital
to help care for the sick and how many of the patients had not been bathed for days, and again
while the account does not mention the smell itself, one can only imagine the smell of a room full
of sick and feverish people who have been neglected and unbathed for days. There is also another
story of a neglected dead body as one account explains that a woman begged two sisters to come
to a home where all but the father was sick. When the sisters arrived at the home, they found the
children in an improvised bed in the kitchen as the sister-in-law had come to take care of them but
became ill and died two days after. Her body was lying upstairs, and several more days passed
before her body could be removed.40

In addition to the sight of people delirious with fever, the Sisters use another sense to
describe their experience. One Sister went to a home with two sick children and a sick mother all
in the same bed and three more sick children in another, all together in the same room. The Sister
states that with the windows closed tightly, they felt as if they could “taste the fever,” though she
does not recount what that might taste like. However, it is still a testament to how severe this illness
was, especially when a room full of people were sick with the virus. This story does not really
have an end, but the Sister does tell of how the father and one of the children, a recovering boy at
the age of nine, were the only nurses for this family. The Sisters gave them a break, fed them, and

39 Tourscher, Work of the Sisters, 10-11.
provided medicine for those who were ill, then they cleaned the house and bathed the children and mother. They would return to do this for two more days, hopefully helping the large family recover, though the account does not say whether any patients lived or died.41

These are just some of the accounts from the book, though many of the others are just as, if not more, gruesome, offering a sense of what influenza looked like to caregivers. In another account, Helen Dore Boylston does not mention the influenza until October 24th of 1918, when the illness had already ravaged most of Europe. In her diary, she writes, “The hospital is overrun with the flu. We’ve had it every year, of course, but nothing like this. The boys are dying like flies. Those of us who have been here so long and have had it before aren’t very sick, but the new unit which has just come over is knocked out. We hear, vaguely, that it is spreading all over the world.”42 In the same entry, she mentions a masquerade that is being put together for Halloween, a party she planned on attending despite having a fever that she insists was not the flu. In the next few entries, she continues to write about her symptoms but is still determined to go to the party. By November 6, 1918, she is in the hospital with diphtheria. Like many people, Boylston did not take influenza seriously. While she does note the many deaths caused by influenza, she seems to think that those who had the flu before had a sort of immunity, or at least were not getting as sick. It is also interesting that she states they are “vaguely” hearing that the flu is spreading throughout the world. This indicates that many of the armies might not have had access to regular news sources, that some European countries censored anything that discussed influenza.43 While Boylston’s account is not detailed, long, gruesome like those of the Sisters, it is still important to

41 Tourscher, Work of the Sisters, 21.
43 Boylston, Sister: The War Diary of a Nurse, 168-171.
note. On the one hand, she mentions that many of the men died, but on the other, Boylston seemed more interested in writing about her personal life than her nursing work.

Caregiver accounts provide an insight into what it was like to take care of people who became ill from influenza. However, first-hand accounts from survivors and the memories from the children of survivors also provide information on the time. A documentary called *We Heard the Bells: The Influenza of 1918* by director Lisa Laden offers several first-hand accounts from civilians and children of civilians that lived through the Pandemic of 1918. All the accounts come from different areas all over the United States. In the first few minutes of the film, one of the most prominent accounts comes from Maria Prats Gomez, who states that she was about ten years old in 1918, the oldest child in her family and that her family had just moved from Mexico to El Paso, Texas a few years before that on account of the Mexican Revolution. According to Gomez, out of everyone in her immediate family, her father and her younger sister were the only two who did not get sick with influenza. She remembers that she was sick in one room while two of her brothers were sick in another room in the house and describes how influenza gave them such a high fever that she thought her mother’s hair was a cat and she was afraid of the cat. Gomez also remembers that people were weak and that all the public places and schools were closed for nearly two or three weeks due to influenza.⁴⁴

There are a few other first-hand accounts in this documentary that stand out from the rest. A couple of women discuss how their mothers took care of the sick and the dying; one of them even mentioned that people were dying so fast that many of them did not get proper funerals. This is important to note because often, during a pandemic, society will break down, and that means

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⁴⁴ Lisa Laden, *We Heard the Bells--The Influenza of 1918*, (Fedflix, 2010), (https://www.youtube.com/watch?v=XbEefT_M6xY).
traditions such as funerals will also be put to the side. This was like the mass graves and the burning of bodies during the Bubonic Plague. The documentary also explains that influenza was so terrifying because there was not much knowledge of the virus itself. Many people had no idea what it was or how it was spreading so quickly, and since it was spreading so quickly, there was nothing that people could do to stop the illness.\textsuperscript{45}

It is easy to see that the 1918 influenza had a big impact on the world. As one of the largest pandemics since the Bubonic Plague, it almost seemed to come out of nowhere and take the world by storm. There are reasons why this instance of influenza was so terrifying. By looking at some first-hand accounts as well as the public reaction to this illness, at least in the United States, it was taken seriously by most people. Those who saw the death it caused had a genuine fear, and those who did not understand the scope of the illness seemed to ignore it altogether.

FIRST-HAND ACCOUNTS OF KANSAS

First-hand accounts are important primary sources when working with history because they provide people the perspective of someone who lived through a historical event. There are two types of first-hand accounts, those that are told at the time that the event is happening and those that are told from memory. The first version usually consists of interviews and biographies, while the second usually comes from diaries, letters, or newspaper accounts. The problem with stories told from memory is that they are likely to be changed, exaggerated, or otherwise distorted because of the way that people remember parts of their lives changes as their perceptions of the event changes. Time and a change of perspective can alter the way someone remembers an event. Therefore, having first-hand accounts that come from the period is important. With diaries and letters, the memories are fresh in the person’s mind and most likely more accurate to what occurred from their point of view.46 This section examines first-hand accounts from the point of view of those who lived or worked in Kansas during the time of the 1918 Pandemic.

One of the most often used viewpoints found during research about the pandemic are the letters of Charles L. Johnston, a soldier at Camp Funston who was stationed there during the second outbreak of the pandemic in the fall. Johnston is an interesting case because he writes of influenza as if it is something completely new to him. However, one must keep in mind that if Johnston lived in a rural area during the first outbreak, he might not have heard much about it. Still, Johnston was present for the deadlier wave of influenza, and yet in his letters home to his fiancé, he does not express much fear. There are moments in the letters where he even jokes about some of the sick men in the infirmary. However, one cannot help but wonder if the letters only sounded playful in

order not to scare his fiancé, whom he was writing to at the time. This seems entirely possible, given that, as previously discussed, the military camps were hit hard by the pandemic.

The first of Johnston’s letters is dated September 29, 1918, as influenza began to reemerge. In this letter, he mentions being quarantined and how it is because the “… ‘influenza,’ or some such name, is in the camp,” and continues on to say that “they,” one can only assume he means either doctors or commanding officers, seem to think it is pretty bad, even putting quotations around the words “pretty bad.” Here it is easy to see that Johnston seems to have no knowledge of the previous outbreak or of what influenza even means. The letter continues to describe how Johnston is annoyed that they will not be getting their passes home now because of the quarantine and how he has finished gas school.47 The next letter is dated October 6, 1918, and describes how he is writing at three in the morning and the “poor old boys” are resting well; one can only assume he means the patients with influenza because he goes on to call himself a nurse and describe how fifteen of the men in the hospital were deemed fit enough to return to work, but he knew their beds would be filled by the next day. He also mentions that there are between six and seven thousand cases in the camp and wishes they would get well, but only so that he can go home. Then he goes on to describe that another man ended up catching influenza while at home, so he was given a prolonged visit at home. Johnston then contemplates trying this himself so that he can stay home. He also states that almost every camp in the United States has this “influenza dope,” yet he feels perfectly fine. There is also mention of others dying of influenza as he says that he does not know any of the men that died that she, his wife, mentioned in her letters to him.48 This again shows his

willingness to joke about a sickness that was currently killing millions of people. It is interesting that Johnston simply does not seem affected by this illness.

There are a few more of the Johnston letters, but they are much of the same. In one undated letter, her refers to the sick as the “fluzy boys” and in another, he jokes about how the other men refer to him as a “dry nurse,” or a male nurse, as he explains. In many of the letters, he complains of boredom and wanting to go home, but his letters do provide a timeline for how quickly the hospital at Funston received patients. In the first letter, Johnston does not provide a number, but he does say that there are “so many” cases, enough to permit a quarantine at least. However, with Johnston working in the hospital, he soon begins to provide actual numbers. In the undated letter, he states that there are only about seventy-five cases where he is working, and in the October 6th letter, he says there are between six and seven thousand cases in the camp. In a letter dated October 8, 1918, he discusses how the beds stayed full of new patients even after doctors sent some patients home, too ill for duty, and others had died due to that same illness. It is easy to see that there are moments where he seems to take the pandemic rather seriously, but then he will go right back into joking about it and complaining about how bored he is despite having twenty patients to take care of on a regular basis. His reaction could just be resilience and a need to deny that anything is really wrong even though people around him are dying. Johnston’s point of view of the 1918 Influenza is certainly much different from another firsthand account, the account of a

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52 Johnston, October 8, 1918.
53 Johnston, October 6, 2018.
sixteen-year-old girl who worked at Fort Riley when the second wave of the pandemic hit the United States.

Jessie Lee Brown Foveaux worked as a laundry attendant at Fort Riley during the second wave of the pandemic. She does not offer much information on her experiences. However, it should be noted that, like Johnston, she seemed to be unaware that there was even a first wave of this terrible virus. A quote from Foveaux’s autobiography, *Any Given Day: The Life and Times of Jessie Lee Brown Foveaux*, she wrote: “Fall passed into winter, and the terrible flu broke out all over Ft. Riley. What a dreadful time that was! People were dying so fast. One day you would be working with a friend, the next day, they didn’t come to work, and the next report said they were dead.” It went on and on. The soldiers were dying so fast that caskets weren’t available for them. We heard that the bodies were being kept in a warehouse until it was arrangements to send them home for burial. “We were all so frightened, wondering who would be next.”

There is a little more to her story than that. Foveaux goes on to describe how her sister ended up catching influenza, and she and her brother were given strict instructions to stay away by the doctors that took care of her. She also describes how she followed the health rules as best as she could and continued to worry about her own health and the health of her family. According to Foveaux, influenza touched her life in other ways. The entire family who lived in the house she lived in while writing her autobiography was entirely wiped out by the Influenza of 1918 before she moved in, though she did not know that when she moved into the house. In her final words on

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influenza, she states that the “…flu left, as fast as it had come. We could come and go again without fear of it.”

Foveaux and Johnston’s views of the Pandemic of 1918 were starkly different. Johnston did not seem to take influenza seriously despite being in the thick of things, so to speak. Though there were some moments in his letters where he seemed to sober up on the subject a little, however, there is more joking about the sickness rather than concern for his fellow soldiers. Now, one part of this that is unknown is the motivation behind Johnston’s attitude. It is possible that he discussed influenza in this way in an attempt to have a more positive outlook on the pandemic and to possibly not scare his wife at the time.

On the other hand, Foveaux views the pandemic in a completely different light. For her, the number of deaths and how quickly the virus spread was frightening. She took the precautions necessary to prevent spread and became even more worried when a family member had fallen ill. However, Foveaux, unlike Johnston, was not in the middle of the sickness as she worked in the laundry rooms and only heard about the deaths of others rather than seeing them firsthand. It should also be noted that Foveaux told her story at a much later time, as the autobiography encompasses her entire life and was published in 1997. Johnston’s accounts of working with those are firsthand rather than written from memory. It is also notable that Johnston is a soldier serving at Camp Funston and Foveaux is a civilian working in the laundry rooms at Fort Riley, and thus have two different perspectives. When it comes to these first-hand accounts, it seems that opinions and thoughts on the pandemic depend on perspective.

KANSAS PUBLIC HEALTH REACTION

When a crisis as big as the 1918 Pandemic hits, the main people that the public will look to are public health officials. One of the most well-known public health officials in Kansas at the time was Samuel Crumbine. He wrote about his experiences with the pandemic and other public health crises in *Frontier Doctor: The Autobiography of a Pioneer on the Frontier of Public Health*. Before going deeply into the life of Crumbine and discussing his life and the accounts from his autobiography, it should be noted that along with Crumbine’s discussion on the 1918 Pandemic, there is also a chapter from the graduate thesis of Ben Peeler, “Best of All Possible Care: An Examination of Scientifically Progressive Medicine in Hays from 1867 to 1918,” that discusses how officials handled public health in the City of Hays during the pandemic. Peeler discusses several of the measures that were taken by the city to help stop the spread of influenza. Mostly he discusses the emergency hospital and how the hospital allocated a floor to influenza victims. He also mentioned that there were school closings until November and the local paper attempted to educate the public about flu prevention. He also discusses Crumbine and the measure he took to prevent the spread of the illness at the Public Health level.56

Dr. Samuel Crumbine worked on the Kansas State Board of Health from 1899 and retired in 1936. Crumbine, himself from Cincinnati, Ohio, operated a drugstore in Spearville, Kansas, before earning his medical degree from the Cincinnati College of Medicine and Surgery in 1888. After graduating, he began his medical practice in Dodge City, Kansas in 1890 and became the inspiration for the character “Doc Adams,” played by Milburn Stone, on the television show

56 Ben Peeler, "Best of All Possible Care: An Examination of Scientifically Progressive Medicine in Hays from 1867 to 1918" (2008), Master's Theses, (https://scholars.fhsu.edu/theses/2209.), 96-112.
Gunsmoke. Crumbine would eventually leave his practice in 1907 and become completely devoted to public health in Kansas. In fact, he was so devoted to public health that he adapted a device called a fly bat into what is now known as the flyswatter to combat insect spread of disease. Two of his campaigns while running for the Kansas State Board of Health dealt heavily with public health and encouraged people to use disposable materials such as paper towels and paper cups. He would also warn against misleading labels on food and drugs. In fact, so great was Crumbine’s dedication to public health that after his death, the Crumbine Award, established in 1955, was created in his memory by the Food and Drug Association to encourage public health. Looking at Crumbine’s life, it is evident that he devoted most of his life to the importance of public health and truly pioneered policies and ideas that are still followed in public health today.

In his book, Crumbine details his experiences in public health with the 1918 Pandemic in two short chapters. At the beginning of the twenty-sixth chapter, titled “Our Greatest Epidemic,” Crumbine describes the pandemic and explains that one of the reasons that this pandemic terrified the masses was because it afflicted younger people, which was uncommon with other strands of influenza at the time. Another reason it was so scary was because of how the United States was vastly unprepared to handle a pandemic. This not only had to do with the fact that the United States had never handled a pandemic on this scale before, but it also had to do with World War I. At this time, many doctors and nurses had been called away to war, which meant that not many doctors and nurses stayed stateside. This unfortunate timing of these two major events meant hospitals were left overcrowded and understaffed. Crumbine himself recounts, “I shall never forget the pleading calls for help that came by telephone and telegraph, from towns and communities where

neither medical nor nursing service was available.” A paragraph later, he adds, “In this connection I recall a typical story that one of our nurses related. On receiving a telephone call from the neighbor of a ranchman, a neighbor who was sick himself, she hurried out to the ranch to find the entire family, including the father, mother, two children and the hired man, desperately ill with influenza.” According to Crumbine, this case is similar to hundreds, and perhaps thousands, of other cases in Kansas. He also notes that, unfortunately, the deaths from Kansas army camps alone reached the thousands.59

Crumbine goes on to describe what he did to combat this crisis. At the time, while he also worked with the Kansas State Board of Health, he held the position of dean at the University of Kansas Medical school. He states that in Kansas, there were four points that had a high concentration of “young people,” and it was at these points that influenza hit the hardest. These points were Fort Leavenworth, Camp Funston, Fort Riley, and the University of Kansas. At one point in time, the deaths from influenza and complications from influenza reached a total of eighty-six a day in Fort Riley and Camp Funston, and according to Crumbine, the fatality rate was the same at Fort Leavenworth. He reports that at the time, the University of Kansas itself did not have hospital facilities. A group of barracks was being erected at the university at the time for soldiers in military training, but only one had a roof and floor covering; there were no walls. The city hospital was already overflowing with influenza cases, so there was nothing to do with ill students except put them on cots in the half-finished building. So, as previously mentioned, the University of Kansas was vastly underequipped to handle a pandemic.60

60 Crumbine, Frontier Doctor, 243.
To acquire the help that Crumbine needed for the University, he made a few calls. One of these calls went to the General at Camp Funston, General Leonard Wood, asking for supplies from the camp if they could spare any. However, his request was denied by the General because it defied a specific military law. Again, Crumbine would call, asking the General for supplies, and the General relented and had supplies sent, stating that he would request permission from headquarters in Chicago, but the supplies would be sent right away. The next day, Crumbine received a call from the General telling him that Chicago had denied the request due to the violation of the military law and that Crumbine needed to have “…all my facts in readiness…” if court-martial proceedings began. However, Crumbine acted quickly, first calling Governor Capper and then-Senator Curtis in Washington. It was the senator who took the case from there, and by the afternoon on that same day, Curtis pushed a joint resolution through the Senate, which was passed by the house the next day, legalizing General Woods action.61 This story is just fascinating because it shows that in the worst of times, the United States government did attempt to get people the help they needed when they needed it, though they still tried to follow the laws that were in place. It also shows the Crumbine was more than willing to do anything he could to help people, even if it meant helping them out of situations that he had gotten them into.

Crumbine’s autobiography does not mention what public health ordinances were enacted to combat influenza. However, one article from The Topeka Capital Journal states that he would enforce the same ordinances that other public health officials enforced, such as quarantine and shutting down public places.62 In the twenty-seventh chapter of his autobiography, Crumbine goes on to talk about the Pandemic and the aftermath. The title of the chapter perfectly describes his

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61 Crumbine, Frontier Doctor, 243-246.
feelings on the pandemic and the reaction of public health officials, “Are We Doing All We Can?” On the first page of this chapter, Crumbine claims that epidemics tend to follow wars and that he is afraid that the same will hold at the end of World War II, and that there are two “ancient enemies” that still plague humanity; tuberculosis and syphilis. He wondered if the increase of tuberculosis cases in 1946 and 1947 were a sign of what is to come. Even though Crumbine does not go into details about the ordinances or imposing quarantines, the stories he does paint a picture of just how dangerous this pandemic was and how government and military officials were willing to break the rules and push congressional acts to help people. This is important to this thesis not just because it is a first-hand account, but in writing his autobiography and including his experiences with the pandemic, Crumbine was enforcing the idea that this event in history is important and needs to be remembered and learned from.

63 Crumbine, *Frontier Doctor*, 247-249.
CHAPTER TWO: TYPES OF MEMORIALIZATION

While the Pandemic of 1918 was, in fact, a significant world event, there is not much dedicated to its memory in terms of formal memorialization. When I began the research for this project, I believed that other countries had memorials dedicated to the pandemic; however, in my research, I discovered this is not the case. Since most European countries censored the information about the pandemic, it makes sense that they did not erect memorials. It does not make sense, however, that the United States, which was open with the people and what was happening, that there is little memory dedicated to the victims of the 1918 Pandemic. Before diving into why there are not many memorials dedicated to the victims of the 1918 Pandemic, we must understand what is considered a memorial. Defining memorialization is something that is hard to do, as there are many ways to remember an event or a person. As such, there are different types of memorialization that occur. A memorial can be a physical structure, something permanent that cannot only stand as a reminder of an event, especially one full of tragedy, but also a way to honor victims. Then there are many other non-traditional forms of memorialization, usually temporary. The types of memorialization focused on for this research are physical and permanent memorials; however, non-traditional forms of memorialization and ephemeral memorialization are two other types of memorialization that should also be discussed.

According to Erika Doss in *Memorial Mania*, many types of memorialization also connect to different emotions. The main emotions that Doss discusses are grief, fear, gratitude, shame, and anger. The two that are connected to this research are grief and gratitude.\(^6\) Memorials that center around grief focus on the victims of the event, so in this context, that would mean the many people

\(^6\) Doss, *Memorial Mania*, 13-16.
who died during the 1918 Pandemic. Doss also connects grief memorials with ephemeral, or temporary, memorials. These types of memorials are important because they express what ordinary people find important when it comes to memorialization. Gratitude is also important to this research because many of the memorials discussed are, in fact, WWI memorials, which are often dedicated to soldiers in gratitude for their service.65

65 Doss, *Memorial Mania*, 13-16.
PERMANENT FORMS OF MEMORIALIZATION

Permanent forms of memorialization simply refer to contemporary memorials that are intended as timeless national fixtures. Many of these memorials are dedicated to tragic events, otherwise known as grief memorials, usually where there are massive losses of human life or when the event is particularly tragic. Another form of memorialization that does not have to include tragedy, though it often does, is the memorialization of a particular individual. This individual is often someone who made a significant impact on the world, such as the previously mentioned Lincoln Memorial. These are often memorials dedicated in gratitude. These are the memorials that people often think of when the word “memorial” is mentioned, though there are many ways that someone or a historical event can be memorialized.66

The third chapter of this work will focus on physical and permanent memorials specifically dedicated to the victims of the 1918 Pandemic. In this chapter, the focus will be on a few examples of physical memorials, some of them dedicated to victims of past plagues and pandemics. A paper titled “Plaque Churches, Monuments and Memorials” by Dr. Harold Avery discusses the Trinity Columns, sometimes also called Plaque Columns. There are several of these columns all throughout Europe. One of the more well-known versions of these columns is in Vienna, known as The Pestsäule of Vienna. Originally the column was just a simple wooden column with angels at the base, and it was built by the Brotherhood of the Holy Trinity. However, later the wooden structure was replaced by Emperor Leopold I in 1687 with a more ornate stone structure to commemorate the end of the epidemic that broke out in Vienna in 1679. The organization the built

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66 Doss, Memorial Mania, 19-20.
the column was founded in Austria in 1652 to minister the sick and plague-stricken, and they are responsible for many of the other plague columns found throughout Europe as well.67

Trinity Columns, often used as votives and thank-offerings, were built throughout the emperor’s dominions; more commonly, they are found in Austria. Many of the Plague Columns have different designs, with the one in Vienna being considered the most ornate. Avery also discusses other memorials that exist that have connections to the plague. In Cologne, Germany, a pair of stone horse heads can be seen protruding from a window of an ancient house in the Neumarkt of Cologne. According to Avery, not many people are aware of the connection that these horses have to the plague. The story states that in 1357 Cologne, the wife of the Knight Mengis von Adocht, Richmondis von Lyskirchen, had fallen into a death-like sleep, having fallen ill due to the plague, and was interred in the Apostles’ Church where she was awakened by a gravedigger in his attempt steal her ring. After this, she returned home, and her husband stated that “…he would sooner believe his horses could ascend to the loft of his house than that of his departed spouse…” and after he spoke those words, horses’ hooves were heard on the stairs and their heads were seen looking out of a window in the upper story of the house. The stone heads now in the window of the home in Neumarkt are now a memorial of this story.68

According to Avery, some churches also serve as memorials to plague, such as the Church of II Redenorte. This church is the most important building on the island of the Giudecca. During the Great Plaque of 1575, the Doge Mocenigo and the Patriarch Trevisano vowed to build a church, hoping to appease the divine wrath. When the plaque came to an end, they believed their prayers were answered, and they built a church dedicated to ‘The Redeemer,’ an unnamed saint. This

church is now the object of an annual festival that is held on the third Sunday in July, called the
Sagra, or Festa del Redentore, Festival of the Redeemer. So instead of this being a memorial of
grief, it is more of a memorial of gratitude as the people of the island believed at the time that they
were saved by their prayers and promised to build a church. Doss also mentions a few buildings
that can be considered memorials in her work; though none are plague-related, they still warrant
mention because they also serve as grief memorials. One example is the National September 11
Memorial and Museum at the World Trade Center. Another personal example is the United States
Holocaust Memorial Museum in Washington, D.C.

70 Doss, Memorial Mania, 19-20.
EPHEMERAL MEMORIALS

Unlike permanent memorials, ephemeral or temporary memorials are not made to last. However, even with their short lives, they are rather important as they show what ordinary people find worth memorializing. According to Doss, these types of memorials are growing in number because traditional forms of mourning no longer meet the needs of today’s public. When tragedy strikes, these memorials not only come from grief, but they serve as warnings and to draw attention to important issues in contemporary society. Ephemeral memorials are usually physical in some way, though they do not have to be, and they are usually set at the site where the tragedy took place. Doss often refers to school shootings as a common example of ephemeral memorials, such as the Columbine shooting, or acts of terrorism such as the Oklahoma City bombing, though more permanent structures exist to commemorate these events now. Whatever the tragedy, ephemeral memorials are an important form of memorialization that helps people to grieve and deal with loss in the event of a tragedy.\footnote{Doss, \textit{Memorial Mania}, 64-70.}

When it comes to the 1918 Pandemic, not much could be found on temporary memorials, and one can assume this is because they might not have been recorded, or as will be discussed later, death was so common that people did not have time to mourn. However, there are a few small examples of ephemeral memorialization. The first example comes from the previously mentioned documentary on the 1918 pandemic, \textit{We Heard the Bells}. In fact, the example comes from the title itself. Priscilla Reyna Jojola recounts how her mother and father told stories of the 1918 pandemic, her mother describing how everyday bells from the church would ring every day, notifying people of someone’s death. This is a common practice in smaller villages and
towns, and since many people could not hold funerals for their loved ones, these bells served as ephemeral memorials.72

Long and well-written obituaries are commonplace in modern times, but in 1918 they were no more than a few sentences. This had to do with the fact that people had to pay, usually by the word, to put articles in the newspaper. Therefore, it makes sense that many people went without obituaries or only had short mentions of a family member’s death. In fact, many of these death notices were not even published by family members, and they were published by funeral homes. They would simply state that a person had died, when they had died, and what was the cause of death. This was also only common for adults; children and infants died so frequently that they often did not have death notices printed in the paper, and if they did, they were much shorter than that of the adults. It was not until the 1930s and 1940s that the modern obituary takes shape.73 However, even with their brief nature, these death notices serve as their own ephemeral memorials. They are a small memorial to someone who passed as well as a way to make the community aware of a person’s death, and many of them appeared daily in newspapers during the 1918 pandemic.

72 Laden, We Heard the Bells.
NON-TRADITIONAL FORMS OF MEMORIALIZATION

While not all memorials are permanent structures, some historians would say that a memorial requires a “material form,” such as Erika Doss in the book *Memorial Mania*, but these examples memorialize the 1918 Pandemic in their own way.74 One of these ways that could be considered a form of memorialization is through literature. Part of my goal with this research is to look at how soon people began to remember the 1918 Pandemic. In Crosby’s book, he mentions that even in the nineteen fifties, there was not much in terms of memory.75 However, there are a few books here and there that memorialize people who were caretakers during the pandemic, as well as victims, that were published not too long after the pandemic took place.

It could be argued that if one book about the 1918 Pandemic is included in this list, then surely every book that discusses the 1918 Pandemic at all is a form of memorialization, a way to remember the past. However, that is not exactly the case. Many works of history on the 1918 Pandemic do not memorialize healthcare workers, volunteer workers, or victims but simply analyze the period in hopes of understanding what it was like to live at the time. Histories such as John Barry’s *The Great Influenza*, Gina Kolata’s *Flu*, and Alfred Crosby’s *Forgotten Pandemic* are works of analysis rather than memorials. They do not discuss the victims or survivors or share personal stories; they examine the pandemic as an event.

Some works memorialize healthcare providers and volunteers who put their lives at risk to take care of the sick some are by victims of the virus themselves. Tourscher’s *The Work of the Sisters* contains first-hand accounts from women who were caretakers during the 1918 Pandemic. As Tourscher explains, “Facts unrecorded are quickly lost in the new interests of changing time.

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75 Crosby, *America's Forgotten Pandemic*, 298-311.
Incidents of personal experience, even most touching and pathetic, die generally with the memory of those immediately concerned.” He goes on to discuss how his goal was to assemble facts while they were still in the living memory of the nuns who agreed to work with him and tell their stories. He also states that the accounts that he recorded he attempted to leave as untouched as possible in order to preserve the Sisters’ memory of working during the outbreak while it was still fresh. These accounts are mostly on experiences in Philadelphia, which was one of the hardest-hit cities. Each Sister had different experiences while taking care of the sick and dying. Some of them had some nursing knowledge, while others had none at all. Some went to homes, and others were assigned to established hospitals as well as temporary ones. This work is crucial to not just knowledge of the pandemic but experience with the pandemic. It is also a crucial piece of primary sources. However, the whole purpose of the work is to preserve the memory of the 1918 Pandemic in the freshest state possible.

Tourscher’s work is not only important in terms of what it does for the memorialization of the 1918 Pandemic, but it is also one of the earliest, as it was published in 1919, immediately after the deadliest waves of the pandemic. Catherine Arnold’s *Pandemic 1918* is a twenty-first-century collection of first-hand accounts that memorializes victims and medical workers who lived through the 1918 Pandemic by telling their stories. Beginning with “the short but unremarkable” life of Pvt. Harry Underdown, Arnold asserts that he may have been one of the first victims of complications from influenza in France. Underwood was a British soldier who died in February of 1917. Arnold also puts forth different information about the origin of influenza. Arnold does point out that Underwood was not the only person who had died from complications of influenza.

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In fact, according to Arnold, he was the twentieth fatal case of what was officially called ‘widespread bronchial pneumonia.’ Pneumonia was a major complication that arose from having influenza. Because Underwood was the twentieth case, it sparked an investigation from some of the military medical professionals. Unfortunately, it seems as though they did not figure out what was going on in time to prevent the massive number of deaths that were to come. Now, it is true that Arnold’s book does read more like an analysis of the history of the pandemic. However, the fact that she used personal experiences from individuals and took the time to look into the lives of the victims that she does mention makes this a work that leans slightly more towards memorialization than analysis.

*We Heard the Bells: The Influenza of 1918,* a documentary by director Lisa Laden focuses on firsthand accounts of survivors and children of survivors of the 1918 Pandemic. Even in just the first few minutes of this piece, the testimonies are abundant and come from many different places all over the United States. Since it is more recent, having been produced in 2010, the stories were problematic because they come from memory or from people telling the viewers what their parents or grandparents told them about what it was like to live through influenza. Many of the stories consist of survivors discussing how they had friends who died, family members who got sick, and caretakers who were either in their family or who came to take care of their families while sick. They also talk about quarantine and seeing the cities and streets basically empty due to everyone being sick or public health measures that were put in place by officials to prevent the spread. This work is important to memorialization because of these survivor stories. They are

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78 Arnold, *Pandemic 1918,* 18-23.
79 Laden, *We Heard the Bells.*
problematic because they remembered so far after the event or may rely on second-hand knowledge, but that does not make them any less significant.

Another way of memorializing the 1918 Pandemic can be through museums or museum exhibits. As stated previously, Philadelphia was one of the places in the United States that had one of the higher death rates, this mostly being due to the fact that the city did not put in place public health measures to prevent spread, or people blatantly ignored the ones that were put in place. The Mutter Museum of the College of Physicians of Philadelphia has a virtual exhibit called *Spit Spreads Death: The Influenza Pandemic of 1918 in Philadelphia*. This 2019 exhibit explored how neighborhoods in Philadelphia were impacted by the virus, how the disease spread, and what could happen in future pandemics. This exhibit also commemorated the one-hundred-year anniversary of the 1918 Pandemic, which is something that seems to be common with these types of exhibits. In order to celebrate the opening of the exhibit, on September 28, 2019, an internationally renowned artist group called Blast Theory and the local community health organization invited the community and supporters of the museum to participate in a parade that memorialized Philadelphia victims of the 1918 Pandemic. This is ironic given that many people believe that the Liberty Parade in Philadelphia, a parade organized in 1918 to celebrate the end of World War I, is what caused a majority of the spread of influenza. On the museum’s website, the virtual exhibit is available and explores the spread through the neighborhoods of Philadelphia, and it also offers virtual tours through videos. People exploring the exhibit can even search for names of families or businesses to see what their experiences were throughout the pandemic. The exhibit presents interviews and
newspaper clippings with obituaries. This exhibit memorializes victims and provides survivor stories, making sure that the experiences of the 1918 Pandemic in Philadelphia are remembered.

The National Museum of Health and Medicine created an exhibit titled *Closing in on a Killer: Scientists Unlock Clues to the Spanish Influenza Virus*. This exhibit originated from a 1997 exhibit that the museum had on the 1918 Pandemic. It provides useful historical background and goes step-by-step through Dr. Jeffrey Taubenberger and his team’s attempt to reconstruct the 1918 Influenza virus in 2005. This exhibit focuses more on the science of the illness and memorializes doctors who worked to try and find a cure or prevention measures for influenza at the time. One part of the exhibit even shows a preserved lung from someone who was infected with the disease and contracted bronchopneumonia because of the illness. Like Arnold’s work, this exhibit also explores some cases that were reported in 1917 rather than just focusing on major waves of the pandemic, as many other works tend to do.

Virtual exhibits and museums are wonderful because of how accessible they are. There is no need to physically travel to the museum in question, and temporary exhibits can become permanent on the museum’s website. However, there is something about visiting the museum and seeing the exhibits on display. It is really a testament to how hard museum workers and archivists work to preserve the past. In a short article on the North Carolina Division of Public Health’s website, a physical exhibit in Raleigh, North Carolina’s City of Raleigh Museum commemorates the hundredth anniversary of the 1918 Pandemic. However, like the exhibit from the museum in

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Philadelphia, this exhibit memorializes the pandemic and its victims in the minds of the community and offers a greater understanding of the pandemic in general.\textsuperscript{82}

The exhibits coincided with the hundred-year anniversary of the 1918 Pandemic. Commemorations of a one-hundred-year anniversary are actually quite common. After one hundred years, people have more context, and the history is not as personal, so it can be looked at more objectively. It also takes that long to gather a cohesive history and allows for the narrative of the event to be more complete. Further, the one-hundred-year mark is a good time to make connections to the past.

DEATH TRADITIONS AND HOW THEY BREAK DOWN

One part of a pandemic that we should remember is how traditions surrounding death broke down. However, to look more closely into this phenomenon, it is important to understand where those traditions came from in the first place. Many civilizations and cultures have always had traditions surrounding death, such as Egyptians with mummification and Greeks with funeral pyres, though that is a tradition seen in many civilizations. However, in the modern world, there is a certain expectation that comes along with death. Society expects most people to have a memorial or funeral and to have some sort of marker such as a grave or if the person is cremated, a container to hold their ashes. Again, this is something seen in early cultures as well, but mainly for those that could afford such luxuries. Common people were not as lucky and were usually buried in shallow graves without any markers. Other traditions surrounding death often include obituaries or something to alert the public that a person has died, usually offering a short description of their life and information on how they died and where their funeral or memorial service is being held. While all of these are common practices that we see every day, the question remains; Where did these practices come from?

These practices started to become more commonplace in the fifteenth century. Death was on the minds of many people as the Black Death, or the Bubonic Plague had made its way through Europe, leaving the population devastated. However, it was still less common for those with little to no money to memorialize their loved ones in the fashion that is common today. Those who could afford graves and headstones had them, but peasants were still buried in shallow graves. All of this began, according to the author, with the publication of *Ars moriendi*, or *The Art of Dying*. This work is essentially a ‘how-to’ guide to death, offering consoling thoughts of salvation as well as how the dying might prepare themselves for their upcoming judgment. There were many
publications of the work, making it wildly popular. However, it also offered a major concession of the church, giving families spiritual stewardship over their loved ones. Yet, this is still mainly a practice only for those that can afford it. It is not even until the sixteenth century that prominent villagers even get their own graves and markers, and people of wealth are buried inside the church. However, the author of the book argues that death, during this time, does become more communal. It seems that villages stay as tight-knit communities even in their graves as they are all often buried or entombed in or near the village church. Soon enough, funerals started to become more and more commonplace as well.83

The English would take their traditions concerning death to the American colonies. People experienced death as a communal event. When someone died in a village or town, the church bells would toll, nine times for a man, six times for a woman, and three for a child, and then the bell would toll for each year of the person’s life. It is not until the early nineteenth century that professionals began to take care of funeral services, including cleaning up the body so that it could be shown to the public, and even then, this was still only available in cities.84

Long-held and cherished traditions can break down in times of crisis. Even before headstones and grave markers became more commonplace, people still had their own separate graves. One of the most common parts of a pandemic is that people die so quickly that mass graves become practically normalized. By the time another bubonic plague hit England in 1665, churches and graveyards were already full due to the massive population increase. However,

84 Kerrigan, *The History of Death*, 139-165.
even though mass graves were often used during the plague, they could hardly be dug quickly enough.\textsuperscript{85}

There is much more that is covered on the traditions of death, but the point here is to explain how a crisis can change tradition. In many of the first-hand accounts looked at for this research, there is a lot of description of how the dead are treated, buried in mass graves, or burned. Funerals are practically banned to prevent the spread of the illness. These traditions described in this section are so clearly commonplace before the 1918 Pandemic, and even in a more modern society, they still break down in the face of fear and disease. This might also account for the lack of memorials as people did not even have time to bury their dead.

When it comes to discussing memorialization in connection with the 1918 pandemic, there are many non-traditional memorials to the victims of the pandemic. Unfortunately, they are more difficult to trace due to their ephemeral nature. However, there are a few forms of physical and permanent memorialization, which will be explored in the next chapter. These forms of memorialization are the focus of this research due to them being easier to trace than ephemeral or non-traditional forms of memorialization.

\textsuperscript{85} Kerrigan, \textit{The History of Death}, 139-165.
CHAPTER THREE: PERMANENT MONUMENTS AND MEMORIALS TO THE 1918 PANDEMIC

Permanent and physical forms of memorialization are considered contemporary or traditional forms of memorialization. As stated in the previous chapter, these are usually created to commemorate tragedies in history, usually where there is a massive loss of life or people who had a huge impact on history. The 1918 pandemic did indeed have a massive loss of life, which is why it is surprising to not find many physical memorials commemorating the event. There are few physical memorials commemorating victims of the 1918 Pandemic. In New Zealand, the Pukeahu National War Memorial Park features a plaque with a graphic representation of the scale of the pandemic’s impact across New Zealand regions from north to south. Its zinc coloring recalls the sulphate inhalation sprayers used to treat the illness. Much like in the United States, the pandemic hit military camps hard, two-thousand and five hundred Maori, the indigenous Polynesian people who live on the mainland of New Zealand. The country itself lost around nine thousand people. According to the article, no other event has wiped out as many New Zealanders in such a short amount of time. The plaque remembers both those who lost their lives as well as the health professionals and volunteers who took care of the sick. Meant to recognize how this tragedy helped shape modern approaches to infectious disease management and surveillance, it sits in front of the Queen Elizabeth II Pukeahu Education center and the location chosen for the pandemic’s association with the first world war. The plaque was officially unveiled in November of 2019; it is a recent memorial and only around fifty people attended the unveiling.86

Another memorial dedicated to the Maori victims of the Pandemic of 1918 was erected at Te Koura marae and was designed and carved by indigenous artist Tene Waitere of Ngati Tarawhia. A carved wooden cenotaph, it features an intricate column with a man standing on top, his hand to his chest. A photograph indicates that this memorial pre-date 1920, so it can be estimated to have been erected not long after the pandemic itself. This fact alone makes it particularly interesting as the Maori are described as rural people, and they were quick to memorialize their victims. This supports the idea that national history may take a significant time to be memorialized while local events are more quickly remembered.87

Another New Zealand memorial erected soon after the 1918 Pandemic overtook a large number of New Zealand’s population. Located in Auckland’s Waikumete Cemetery and erected in 1988, it reads, “This memorial marks the final resting place of the 1,128 men, women, and children of Auckland who died as a result of New Zealand’s worst epidemic which peaked in November of 1918, killing a total of 8,573 New Zealanders. Particular respect is paid to doctors, nurses, and citizen volunteers whose selfless efforts to aid the sick resulted in their own untimely deaths.”88 While this monument is specific to Auckland, it does also mention the entirety of New Zealand in terms of how many died. It is not a national memorial in the way that the first New Zealand memorial mentioned is, but it still serves as a way to honor those who suffered and died during this tragic event.

Another article by Britta Shoot in the City Metric describes the difficulties of building a pandemic memorial. This article describes how people have found the Plague Column to be a

logical place to gather to memorialize people who have become victims to the current COVID-19 Pandemic that the world is facing today. While the article does not specify whether or not people gathered there during the 1918 Pandemic, the understanding is that if one wants to remember those who died due to pandemics or plagues, this is the place to go. The article goes on to discuss why it is that pandemics have little in terms of memorialization, a subject that will be explored more at the end of this chapter.89

Few monuments to the 1918 pandemic were erected in the United States. At the former site of Camp Merritt in Bergan County, New Jersey, a monument still exists today, and outwardly a World War I memorial, most of the names on the monument are of soldiers who never even made it to Europe because they died of influenza. The monument is an obelisk that stands in the center of a traffic circle. On the North face of the monument is a low-relief sculpture of a “doughboy” in a pose reminiscent of a Greek warrior with an eagle at his back. At the base is a relief map of the camp streets and buildings. The names on the monument include fifteen officers, five hundred and fifty-eight enlisted men, four nurses, and one civilian. On the Southern face, the inscription reads, “In memory of those who gave their lives for their country while on duty in Camp Merritt. This monument marks the center of the camp and faces the highway over which more than a million American soldiers passed on their way to and from the World War, 1917-19. Erected by the state of New Jersey, County of Bergan, Bergan County Historical Society, officers and men of Camp Merritt, many patriotic citizens, and the Camp Merritt Memorial Association.” While there are

many other memorials in New Jersey that are dedicated to those who died in World War I, this one is the largest in the state.\textsuperscript{90}

The Camp Merritt memorial is technically a World War I monument; however, it is important to include this as a Pandemic of 1918 memorial due to the number of the names that are listed on the monument who died of influenza. According to an article written by David M. Zimmer, less than half of the names on the monument belong to war-wounded soldiers who returned from combat overseas. Most of the names belong to victims of 1918 Influenza. According to the article, the camp had a late reaction to the pandemic, which caused more deaths than necessary. A total of three hundred and ninety-six people died due to influenza, according to army medical records.\textsuperscript{91} There might be more memorials to influenza victims in the world, but it would take careful research to distinguish between those who died in combat and those who died of influenza.

The idea that many monuments that include influenza victims are, in fact, World War I monuments dedicated to soldiers and those who served in the army contradicts the idea of the “heroic” death. It indicates that everyone who served in the military should be considered “heroic.” While World War II seems to tower over World War I in terms of memory and commemoration, World War I was still important in history, but it has been neglected to the role of contributing to World War II. There are countless American monuments and memorials across the United States dedicated to the Civil War, World War II, Holocaust victims, and the Civil Rights movement, yet

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there are very few World War I memorials. It is not surprising that these events are commemorated because they were horrific and deserve to be remembered. Many people suffered through these events, and they are important to American history and resulted in changes to American society. However, much like the 1918 Pandemic itself, World War I is not the focus of much attention historically when it comes to monuments and memorials. Of course, it is discussed, but usually in terms of how it sets up World War II, as previously mentioned. However, this war was huge in so many ways. Many people died all over the world, it caused major tensions between different countries, and most of the major countries in the world were involved in the war at one point or another, and that should be worth remembering. According to author Lisa M. Budreau the reason that World War I was forgotten in terms of memorialization stems from a rather simple explanation. Many countries were unprepared for this massive war, including the United States, and many such countries were simply unprepared to memorialize it, especially the United States. This was one of the biggest wars in history, and many of the countries involved did not expect the war to escalate as quickly as it did. The United States was mostly unprepared because up until 1917, the United States stayed as neutral as possible and did not plan to get involved in the war at all.92

This is not to say that people did not want to remember those who bravely fought in World War I; in fact, there were several people who thought that monuments should be erected to remember the fallen. In the past, soldiers were often buried in historical cemeteries near the battlefields where they died, the cemetery serving as its own memorial. Though, it should be noted that this is mostly true in cases where battles were fought on United States soil, such as the battles

fought during the Civil War or Revolutionary War; otherwise, the soldier’s body was sent home to be buried. However, given that the soldiers in World War I died overseas, that was almost impossible because they died overseas. There actually were some memorials and markers built overseas; however, historians often question the accuracy of these markers in terms of their proximity to the battlefield in which United States Soldiers died. So, since there was not much in terms of preparation for the war, there is not much in terms of memorialization for those who died in it due to the uncertainty of where battlefields actually were. This is why there are not many World War I memorials. This explanation sheds a little light on why not many memorials dedicated to the 1918 Pandemic exist or are not built until much later because there is so much uncertainty surrounding their deaths and interment. People died so quickly, and the pandemic came and went so fast that the United States, and possibly other countries, were simply unprepared, much like they were when it came to World War I.

There is one more memorial that is meant to memorialize influenza victims themselves. However, like the first New Zealand memorial mentioned, it is an incredibly recent memorial. In a *New York Times* article titled, “Why Are There Almost No Memorials to the Flu of 1918?” the author identifies a memorial at Hope Cemetery in Barre, Vermont, in the shape of a five-ton granite bench that is five feet tall and three feet deep sits on a triangle of grass. It reads, “1918 Spanish Flu Memorial” on the front and on the back, “Over 50 million deaths worldwide” is inscribed. The article states that the memorial was installed in 2018, one hundred years after the worldwide pandemic. This actually is a common occurrence when it comes to big historical events. People

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93 Budreau, *Bodies of War*, 107-110.
often decide to commemorate events after one hundred years has passed or somewhere close to one hundred years.\(^{94}\)

The Hope Cemetery memorial has a second meaning to it; Brian Zecchinelli and his wife Karen underwrote it as not only a memorial to the 1918 Pandemic but also as a monument to the Wayside Restaurant they own that has been open since 1918, though this is mentioned nowhere on the memorial itself. The reason for the family’s interest in the pandemic is not only that the restaurant they now run opened a few months before the pandemic hit Barre but also because Zecchinelli’s grandfather, Germinio Zecchinelli, was also a victim of the virus. Germinio, according to the article, was an Italian immigrant who worked as a craftsman in the local granite factory. The article goes on to describe how, even though Zecchinelli only knew a modest amount about his grandfather’s life, he quickly became fascinated with his death and why there were no memorials dedicated to the victims of the 1918 Pandemic.\(^{95}\)

Only two known standing memorials to victims of the pandemic exist; a general pandemic memorial and another is included, even though it is technically a World War I memorial but included due to the number of people listed on the memorial having died from influenza.

Why are there so few memorials to victims and survivors of the 1918 Pandemic, despite the number of other memorials in the United States alone? It seems like every town in the country has at least one monument or memorial dedicated to soldiers or other men and women who served their country in some way. As stated previously, there are many memorials dedicated to World

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\(^{95}\) Segal, “Why Are There Almost No Memorials to the Flu of 1918?”
War II and the Holocaust, but with the lack of memorials dedicated to the 1918 Pandemic, there is also a lack of memorials dedicated to World War I.

Historian Alfred W. Crosby also wonders what happened to the memory of the 1918 Pandemic. Crosby was one of the first historians to look at the pandemic comprehensively, and his book, *Epidemic, and Peace* was published in 1976 and is highly regarded for its detail and its all-around analysis of the pandemic. Crosby, later on, reissued this work in 2003 as *The Forgotten Pandemic*. In the afterward of this later edition, Crosby discusses the memory of the pandemic, or at least why it is not remembered as much as other events in history.96

Crosby begins this chapter with a sentence that resonates heavily with this research, “Studying the record of the American people in 1918 and 1919 is like standing on a high hill and watching a fleet of many vessels sailing across a current of terrible power to which sailors pay little attention.” According to Crosby, the reason that the 1918 Pandemic hardly exists in American memory is that it simply was not as acknowledged as it could have been by contemporaries. Yes, there was more acknowledgment in the United States than there was in other countries; however, that does not mean that much of that acknowledgment was taken seriously by the general public. Crosby even states that the average college graduate born since 1918 knows more about the Black Death of the fourteenth century than they do the Pandemic of 1918. He also states that of the bestselling college texts and history books in the United States, only one so much as mentions the pandemic, and that mention is Thomas A. Baily’s *The American Pageant*, and the mention is only one sentence. Crosby also points out that there is not much in American literature from the time that mentions the pandemic, the exceptions to that rule being Katherine Ann Porter and Thomas

96 Crosby, *America's Forgotten Pandemic*. 

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Wolfe as influenza struck too close to home for them to ignore. Wolfe’s brother became a victim of complications from the illness, and Porter fell ill to influenza herself along with a young army lieutenant with whom she was in love. She survived; the lieutenant did not. So, for the most part, Crosby believes that the pandemic was simply forgotten because of how little attention the public paid to it in the first place. There was so much focus on World War I. Even the United States, which did not enter the war until the final years, focused more on the war effort than they did the global pandemic, making the influenza pandemic simply just a chapter in the story of the war.97

The breakdown in societal structure and tradition contributed to the lack of 1918 pandemic memorials. For example, during the Black Death of the fourteenth century, burial traditions were no longer held as bodies were burned, usually outside city limits, to prevent the spread of the illness.98 In 1918 in Philadelphia, seven-hundred and fifty-nine people died from influenza in one day and had to be buried in mass graves without funerals. Streets and cities were deserted to prevent the spread of the illness, and entire villages were wiped off the planet due to the pandemic.99 First-hand accounts recall mass graves and how dead bodies would lay in homes for days until a coroner could come and pick them up.100

This breakdown of tradition is important, especially regarding memory, because it changes the perception of those who survived the experience. Mass graves left no opportunity to honor the dead. Many of the first-hand accounts came from people who were very young at the time of the pandemic, so this otherwise shocking breakdown may have seemed normal to them until years

97 Crosby, America’s Forgotten Pandemic. 298-311.
98 Kerrigan, The History of Death, 139-165.
100 Tourscher, Work of the Sisters, p.10-11.
later. Thus, the lack of traditional memorials dedicated to victims of the 1918 Pandemic can be attributed to the lack of acknowledgment of the pandemic in terms of the public in both the United States and other countries all over the world, and the breakdown of societal norms seeming normalized in the eyes of survivors, death was a routine part of life, and there was little time to memorialize the dead.
MEMORIALS AND MONUMENTS TO INFLUENZA VICTIMS IN KANSAS

Memorials and monuments are usually permanent structures, especially if they are structures built to memorialize several people. However, that is not the case with one of the 1918 Pandemic memorials in Kansas. There is not enough evidence to directly pinpoint where the 1918 Influenza Pandemic began. In the past, it was called the Spanish Flu, as many believed that the illness came from overseas with soldiers who were returning from World War I. Over time, other theories have developed about the pandemic and where it came from, and one of those theories involves one of the areas of Kansas that had the highest number of cases, Camp Funston. Some theories suggest that since many of the cases erupted from the military training camp and then spread to other military training camps, that the illness started at the camp. It is a strong theory, but there is still not enough evidence to call it anything more than a theory. Unfortunately, the camp itself no longer exists because it was common for military training camps to be taken down after training was complete. Camp Funston itself was erected twice, once for World War I and then again for World War II, and each time it was taken down shortly after the war. As far as memorials go, there are two memorials that commemorate the camp; one that was specifically dedicated to influenza victims that no longer exists because it was disassembled with the camp, and another dedicated to the camp itself that mentions the pandemic.101

The monument that was dedicated by Harry H. Hardy to the influenza victims no longer exists. This one photograph and written documentation on who erected it and where are all that remains. Harry H. Hardy designed the monument to remember the 10th Sanitary Train soldiers who died during the pandemic. The photograph itself shows the designer standing in front of the

monument, a tall pyramid-like structure that appears to be limestone. On the grass in front of the monument is a list of names, which are assumed to be the names of those who died. Since this structure no longer exists, there is not much information about it, but it can firmly be stated that it is solely dedicated to soldiers who were victims of influenza because they were soldiers.

A more permanent structure is dedicated to Camp Funston itself. This monument is located near Fort Riley in Geary County, Kansas, and was erected in 1998 by the Fort Riley Historical and Archaeological Society. A sign at the base of the stairs leading up to the monuments reads, “Camp Funston, World War I Headquarters of Maj. Gen. Leonard Wood,” and the stairs lead up to a stone structure. An inscription reads: “Camp Funston was established as one of sixteen Divisional Cantonment Training Camps during World War I. Construction of the 2,000-acre camp began during the summer of 1917 and eventually encompassed approximately 1,400 buildings. Major General Leonard Wood commanded the camp. During World War I, nearly 50,000 recruits from the Great Plains trained here. They became part of the 89th Division that deployed to France in the spring of 1918. In addition, the 10th Division and black soldiers assigned to the 92nd Division received their basic training at Camp Funston. The first recorded cases of what came to be the worldwide influenza epidemic were first reported here in March 1918.” While it is not a monument that specifically memorializes victims of Influenza, it does acknowledge the pandemic and that the first of the many cases began at Camp Funston.

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The final wave of the Pandemic of 1918 took place in late December of 1918 and lasted until the beginning of February 1919. However, this wave was much milder than the previous waves. The second wave that began in September of 1918 and ended in November of 1918 took the most lives in the United States and worldwide. When it came to Kansas, the death total added up to 2,639 by the end of 1918 and 2,300 in Kansas City alone. The other 339 deaths being elsewhere in the state.\(^\text{104}\) While that number does not seem incredibly large compared to the 675,000 Americans who lost their lives, it must be remembered that the bulk of those deaths happened during the second wave of the pandemic, within the span of a couple of months, most of those people being young and able-bodied people. At the least, this virus was shocking. So, it could be concluded that something that contributed to such a huge loss of life would warrant a memorial to the victims, especially since, for most of those victims, their lives were cut short. Yet, even in a more concentrated area such as Kansas, or focusing on communities, this is not the case. There are a few memorials to influenza victims scattered throughout Kansas, but one must remember that many World War I memorials also included victims of influenza.

Memorials specifically dedicated to influenza victims are more likely to occur in smaller communities. Hays, Kansas, was founded in 1867 and is one of these relatively small communities. While Fort Hays State University makes up about half of the population of Hays in 1918, the permanent residents are a small community when compared to places such as Kansas City or Wichita. Yet, there are a couple of unconventional memorials dedicated to influenza victims.

A grave can be considered a memorial because it is a way of memorializing a family member or loved one, but graves of people who have absolutely no connection to the town are

even more curious. This is the case with the second grave in Hays’ Historical Mt. Allen Cemetery. The grave itself is not anything special; it is a simple slab of stone that reads “Baby Alma, Age 17 yrs.” and nothing more. However, it is the story behind this grave that makes it a memorial to a victim of the flu for the people of Hays.\textsuperscript{105}

The story of Baby Alma is fascinating and a little sad. The reason she is connected to the 1918 Pandemic is that locals believed that she was patient zero for Hays. However, after further research, I discovered that she was not the first person in Hays with influenza, but she was the first one known to die from the virus. According to the City of Hays website, there are no records of Baby Alma’s real name; she was only known as “Baby Alma,” though she was not a baby. In reality, Alma was a circus performer, and that was the reason that she came to Hays in the first place. She came as part of a traveling circus and was marketed as the “Fat Lady” in one of the circus sideshows. One morning, Alma woke up in her tent, which was located near Big Creek, with the “sniffles.” In a few hours, someone concluded that she had the flu and was taken, again it is unknown who, to the Red Cross temporary hospital at City Hall, this was the site of the hospital’s overflow of influenza patients because the hospital itself was full. Due to her large size, she had to have a special bed made so that she could be comfortable, as she weighed about six hundred pounds. The website mentions a newspaper article stating that Baby Alma was a “nurse hater” and that even at her weakest state, she would “…lie in bed and scream forth the most blood curdling string of cuss words imaginable.” There are also reports that she did not like the medicine and would hold it in her cheeks and then spray it out of her mouth onto the nurses, so she was not a great patient. The nurses learned that if they denied her water until she behaved better, her attitude

would improve. They speculated that since she was labeled as the “Fat Lady” at the circus, that people were mean to her, so she was simply mean to them.\textsuperscript{106}

When Alma died, it was due to pneumonia, a complication from the flu that many other would also fall victim to. According to the City of Hays website, her parents in California were contacted, but they refused to do anything for the young girl, and the circus manager also refused to do anything for Alma’s burial. The wife of the local undertaker, Mrs. Gus Havemann, stated that the circus manager “wouldn’t even buy her a respectable casket.” The Havemann’s put together a rough wooden box for the circus performer, as they were the furniture and coffin makers in town at the time, that accommodated her large size. Mrs. Havemann is quoted again as saying, “She made a lot of money for him, but dead she was no use to him so he wouldn’t bother.” Her grave is in block five of Mount Allen Cemetery, and she was buried without much of a funeral.\textsuperscript{107} Not just because she was this stranger who died in the city of Hays, but because of the way she died, Baby Alma became a local legend to the town.

In an article for \textit{Tiger Media Network} in May 2020, journalist Dawne Leiker told the story of how a friend of hers and her husband, Janet and Dean Stramel, and his family have left flowers by Baby Alma’s grave every Memorial Day since her death. According to Stramel, her husband’s grandfather, Theodore Gosser, born 1902, remembered Alma every year since her death simply because “No one else ever did.” Leiker believes that Alma’s death is a tragedy simply because she was in the wrong place at the wrong time. It is interesting that given the reports of how Alma treated people, there are still people who find her death tragic. Though, it must be remembered

that Alma was a teenage girl that most likely lived a rough life due to her weight and role with the circus; when she died, not even her own parents wanted anything to do with her body. Yet, in death, she became a legend, and one man, Theodore Gosser, decided that she did not deserve to be alone, even in death.\footnote{Dawne Leiker, “Baby Alma and the Spanish Flu,” Tiger Media Network, May 26, 2020, (https://tigermedianet.com/?p=55513).} These two articles were the only ones available in regards to information about Baby Alma except for an article in the October 31, 1999 edition of The Hays Daily News, the article mentioned in Leiker’s article, describing the same story of Baby Alma that is described on the City of Hays website, the article is titled “The News in 1918.” It can only be assumed that the source of this article comes from the firsthand account that Leiker mentions in her own article from a woman named Ada Schwaller, though the article itself does not mention the name of the person who provided the story.\footnote{“The News in 1918,” The Hays Daily News, (October 31, 1999).}

There is another memorial to an influenza victim in Hays, Kansas. The Middlekauff family is a part of the history of Hays, Kansas, the family, led by Dr. Joseph Henry Middlekauff, having settled in the area in the early days of the city. So, when Henry’s son, Casper Joseph Middlekauff, died overseas during World War I, it is not surprising that his parents and his peers found ways to memorialize him. However, Middlekauff did not die in battle, and he died from influenza.\footnote{“26 Dec 1918, 1 - Ellis County News at Newspapers.com,” Newspapers.com, accessed September 21, 2020, (https://kansashistoricalsociety.newspapers.com/image/387645637/?terms=Casper+Middlekauff), 1.} One of these ways included more men than Middlekauff, who died overseas, but as far as this research could find, none of the other men mentioned died from influenza. At the time of his death, Middlekauff had previously been attending Fort Hays Normal School, and so were the other men mentioned in this same memorial. The yearbook for the school, titled The Reveille, printed a victory edition of the book in 1919, and on the second page, a statue is shown with the names of
the fallen men printed on the front. The quote on the page reads: “In order that right which is more precious than peace might live these men have died. To them, the Victory Edition of “The Reveille is dedicated. Their Name Liveth For Evermore.” 111 This memorial only adds to the idea that the Pandemic of 1918 was considered part of the narrative of World War I in the eyes of those who live through this chaotic time.

Another form of memorial dedicated to Middlekauff is an actual structure known as a “Memorial Plaza” in Mount Ellen Cemetery. Again, much like the dedication in The Reveille, this monument serves as a memorial to all who died during their service in the army. The inscription on the memorial reads, “In Memory of Our War Dead, Dedicated May 30, 1949. Casper J. Middlekauff. Post No 173, The American Legion.”112 There is another memorial similar to this, dedicated to those who served in the war in Hays, Kansas, and it sits in front of the courthouse and is a set of granite stone spires that sit on either side of a flagpole, and the spires have the names of those who died in the line of service. In the center is another granite structure that reads, “In Memory Of All, Who Served Their Country, In Time of Need. Dedicated May 30, 1988.”113 Further research into these two memorials revealed that the first monument mentioned, while not a monument only dedicated to Middlekauff, was dedicated by the American Legion Post 173, which bears the name Casper J. Middlekauff, and that in itself is a memorial to the young soldier.114 In looking at the memorials dedicated to Middlekauff, it is possible to conclude that some people did not consider the Pandemic of 1918 a separate event from World War I.

Since historians believe that the pandemic began in Kansas as some of the first cases were reported at Camp Funston, there are a few exhibits that have explored the subject. One of these exhibits is a temporary exhibit that was at the Johnson County Museum titled “The Turbulent Twenties.” It was compiled on October 29, 2018, marking the centennial of the 1918 Influenza Pandemic. The exhibit explored local and regional implications of the pandemic, revealed the severity of cases in metropolitan Kansas City, and discussed a quarantine that temporarily shuttered Merriam Grade School. The exhibit also showcased local stories of the pandemic. An article from *The Missourian* describes an exhibit on the 1918 Influenza Pandemic in 2009. That exhibit was also temporary, but it was created during another influenza scare. The museum that put the exhibit together was the National Archives and displayed an enormous photo of a sickroom at Fort Riley, Kansas. According to the article, the timing of the exhibit was pure coincidence, but it gave many people perspective. Looking at these two exhibits and the few others that have come and gone in the state of Kansas, they seem to only appear in Kansas due to the belief that influenza began in Kansas at Camp Funston. This does make sense; if there is a belief that something big or important in history has a connection to a certain area, locals tend to latch on to that piece of history.

So, when it comes to the 1918 Influenza Pandemic, the people of Kansas do try to memorialize the victims more than the pandemic is memorialized at the national level. There are mentions of people who died of Influenza in some local histories, the Kansas State Board of Health had a huge advocate of Public Health as one of its members, and though most are temporary,

exhibits about the 1918 Pandemic and its connection to Kansas are put together at different museums in the state from time to time. Many of the memorials exist due to the Pandemic’s connection with World War I. Even Crumbine mentions that epidemics tend to follow wars, and this Pandemic took the United States and the world by surprise. It is hard to see how big of an impact the 1918 Pandemic would have on Kansas. After all, Kansas is famous for being a state where towns are far apart, so it is hard to imagine that the illness would spread so quickly, yet it did, and people took it seriously.
CONCLUSION

Throughout the world’s history, tragic events have been memorialized in many ways. Some are useful to explain just how memorialization works and how the act of memorialization can keep an event in the minds of people for generations to come. Why did the 1918 Pandemic not seem to warrant memorialization in national or even in local memory? Even smaller communities did not seem to find the pandemic worthy of memorialization, despite many of these communities suffering losses and having their lives being interrupted by the illness. These memorials simply do not exist or because it would take deeper research to find out who died in combat during the war and who died because of influenza. Another reason why this could be is that the war consumed society, though as the evidence shows, this was not the case in the United States; it might have been elsewhere. Other theories put forth the idea that the pandemic simply was not memorable to enough people, yet today it is being recognized more and more for the tragedy that it was, though this may have more to do with the current climate of the world with a new global pandemic sweeping across countries and continents. It may also be due to the fact that in the three waves of influenza, there were many who just believed it to be the seasonal flu, and the second wave happened too quickly for anyone to really understand what was happening.

For the answers as to why this pandemic may have gone almost unnoticed in the eyes of history, there must be a review of the history of the pandemic itself. In the United States, while it might not have been taken seriously, at the very least, influenza was not ignored. There were some public health measures put in place in many parts of the country in order to keep citizens safe. Cities that did not put these measures into place suffered the consequences in the form of massive loss of life. City officials shut down public gatherings, some cities had masks mandates, and people who disobeyed laws were fined and put in jail for the night. However, overseas it was a much
different story. In many places, the pandemic was simply ignored by the public in other countries at the time. There was a war going on, and political figures wanted to keep the citizens' minds on the war effort and not something as trivial as the flu. Yet, in the army, soldiers were dying because of influenza in large numbers, and army doctors were more likely to take the illness seriously. Unfortunately, many of their requests for public health measures to be put in place in order to protect citizens went ignored.

First-hand accounts tell of how horrible influenza could really be and how it killed faster than the bodies could be taken care of, and mass graves had to be made. While it may not seem as though people took the pandemic seriously, judging by the stories from people who lived through this tragedy, it was definitely much more than the seasonal flu that everyone thought it might be during the first wave. Simply put, the pandemic was terrifying, and people remember it being terrifying, yet the victims seem to go unrecognized, especially at the national level.
BIBLIOGRAPHY


“Kansas City Exhibit Looks at 1918 Flu Pandemic.” Columbia Missourian, May 1, 2009.


https://www.kansasmemory.org/item/218276.


Peeler, Ben, "Best of All Possible Care: An Examination of Scientifically Progressive Medicine in Hays from 1867 to 1918" (2008). Master's Theses. 2209.
https://scholars.fhsu.edu/theses/2209.

https://scholars.fhsu.edu/yearbooks/5.


“Spit Spreads Death: The Influenza Pandemic of 1918-19 in Philadelphia.” Exhibits | Mütter

Thurston, Jack. “Memorial to Victims of Spanish Flu Taking Shape in Vermont.” NECN.

Tourscher, Francis E. Work of the Sisters during the Epidemic of Influenza, October, 1918.


“We Heard the Bells--The Influenza of 1918. Fedflix, 2010.
https://www.youtube.com/watch?v=XbEefT_M6xY.
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