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**'The final reckoning': The 'Spanish influenza'
pandemic and the unspoken contributions of
professional nurses (1918-1920)**

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History MA by Research

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Abstract

The 1918 Spanish influenza pandemic hit every corner of the world with incredible force. There were no vaccines to prevent the spread of infection, and there were very few medicines that could be given to alleviate symptoms. Doctors and surgeons felt useless in the face of the 1918 pandemic, and it was left to the care and dedication of nurses to care for patients when there was no cure. The Spanish influenza provided a historic milestone for the nursing profession as it allowed nurses to start to be seen, heard, and appreciated. This project uses a selection of primary and secondary material and is an ode to how creating a thesis primarily using online sources is possible. Due to Covid19 restrictions, not all archives could be visited, and therefore online archive deposits were used to create a transatlantic study of the nurses that worked during the Spanish influenza. This thesis looks at the methods used by nurses to care for influenza patients, and the importance of their work when other medical professionals felt hopeless. It then looks at why the nursing profession faced a shortage of nurses, and what was done to train and employ more nurses and, in turn, provide more care to those in need. This thesis ends by making comparisons between the 1918 Spanish influenza pandemic and Covid19 and highlights the importance of learning from the past. This research shows the work of nurses across the world during the 1918 influenza pandemic and emphasizes the importance of recognizing the unmatched work done by nurses both in the past and the present.

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Introduction

The year 1918 is remembered as a pivotal point in the history of the world. Over thirty nations were occupied with fighting in the First World War. As the war neared its end, death and mourning had, for many in the world, become a part of everyday life and morale was at an all-time low, as a wave of fear and uncertainty gripped the populace. Soldiers were seen as heroes and nurses were seen as angelic beings that healed those on the front line. However, there was a more deadly enemy on the horizon, the 'final reckoning' that would highlight the 'courage [and] self-sacrifice' of the nursing profession: the Spanish influenza.¹ This thesis will discuss the impact of nurses during the Spanish influenza pandemic, including the array of nursing practices used during the pandemic and their importance in comparison to other medical professionals. The thesis will then highlight the drastic lack of nurses during the pandemic, why this occurred and what measures were taken to combat the issue. Finally, this research will conclude with a comparison to recent events regarding Covid19, and how the actions of nurses during the Spanish influenza have remained as lessons from the past for handling pandemics in the present.

The 1918 pandemic was not the first influenza pandemic, nor was it the only lethal one.² Many famous epidemics have been recorded throughout history, such as the Plague of Justinian, which was the first major outbreak of the plague in 541, the Black Death that swept through Europe in the middle ages, the Great Plague of London that took place in the seventeenth century, and the first Cholera pandemic in the early nineteenth century.³ Influenza pandemics have also been widely recorded across the world, from Africa to Europe, and Asia to America, in 1510, 1580, 1688, and 1699.⁴ From 1847-48, less than 100 years before the 1918 outbreak, London was struck by an influenza pandemic so deadly that

¹ Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85.
<https://docs.google.com/document/d/1DRqBJ1nYuRWwQRHUuTquW27TdaO6Zjozk3i4ewnNfyk/edit>

² Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

³ History.com Editors. (2020, December 21). *Pandemics That Changed History*. History. Retrieved 20 June 2021, from <https://www.history.com/topics/middle-ages/pandemics-timeline>. Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California's RN's*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020

⁴ Beveridge, W. (1977). *Influenza: The Last Great Plague, an Unfinished Story of Discovery*. New York: Prodist Publisher.

it killed more people than the 1832 cholera outbreak. Worldwide influenza also struck in 1889 and 1890.⁵ 'Flu was always there' says Elizabeth Cockayne, a fever nurse in the early twentieth century.⁶ The Victorian Era has been commonly characterised as an 'era of epidemics and infectious diseases' that were 'responsible for the majority of deaths'.⁷ Poor living and working conditions alongside very little understanding of germ theory and sanitisation meant that epidemics such as cholera, smallpox, and influenza 'flourished'.⁸ Yet, nobody was prepared for the criticalness of the 'greatest medical holocaust in history' known as the 1918 Spanish influenza pandemic.⁹

Although the 1918 influenza pandemic was named the 'Spanish influenza', it did not originate in Spain. During 1918, the First World War was still the main thought on everybody's minds, and therefore the leaders of countries involved in the war didn't want to tamper with morale by spreading fear over "just another case of the flu". However, as Spain remained neutral during the war, their press remained uncensored and they became the first country to openly report the deadly spread of influenza, therefore coining the title *Spanish influenza*.¹⁰ The earliest documented case of Spanish influenza was within Camp Funston at Fort Riley in Kansas on the 4th of March 1918. 'Patient zero' was a mess cook named Albert Gitchell, and it is thought that by the time he became seriously ill, he had already 'served food to hundreds of troops', beginning the spread of the deadly virus.¹¹

The Spanish influenza pandemic 'circled the globe' in three distinct waves.¹² Initially, the first wave 'started slowly' in the early spring of 1918.¹³ The virus 'spluttered' across war

⁵ Beveridge, W. (1977). *Influenza: The Last Great Plague, an Unfinished Story of Discovery*. New York: Prodist Publisher.

⁶ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P11. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

⁷ Condrau, F. & Worboys, M. (2007). Second Opinions: Epidemics and Infections in Nineteenth Century Britain. *Social History of Medicine*, 20 (1), 147-158.

⁸ Condrau, F. & Worboys, M. (2007). Second Opinions: Epidemics and Infections in Nineteenth Century Britain. *Social History of Medicine*, 20 (1), 147-158.

⁹ Taylor, T (2018). *The 1918 influenza pandemic affected the whole world, could it happen again?* Retrieved from <http://www.abc.net.au/news/health>

¹⁰ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

¹¹ Kennedy, J. (2020) Spanish Influenza and Scotland. *Scottish Local History*, 105. P3-6.

¹² Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>

¹³ Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

trenches, as it went 'largely unnoticed' everywhere except in military training camps.¹⁴ Infection spreading in the trenches was not an uncommon occurrence as soldier's immune systems were already weakened due to malnourishment and bad hygiene, so the rumours of sick soldiers did not initially worry those at home, especially as, at first, the deathrate of the Spanish influenza was 'comparable' to that of a 'typical seasonal influenza'.¹⁵ As the war came to an end, with a toll of six to nine million people dead and wounded, the Spanish influenza seemed to be 'the fourth horseman of the apocalypse' that the general population did not see coming.¹⁶ In autumn 1918, the second wave 'burst with explosive force and great mortality'.¹⁷ As troops returned home to their families in the cities, the second wave of influenza was given the opportunity to spread among the masses and was 'astonishingly deadly', accounting for the majority of the death toll.¹⁸ The mass usage of steamships and 'railroad networks that spanned continents' meant that the virus was transmitted with 'unprecedented efficiency'.¹⁹ Media coverage regarding the outbreak 'wavered' as reporters 'framed the flu as a human-interest story'.²⁰ This meant that the general public were stripped of weeks of preparation time as they did not realise the seriousness of the virus until it was too late.²¹ By the 3rd of August 1918, the United States military received an intelligence report comparing the severity of the influenza pandemic to the Black Death.²²

¹⁴ Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

¹⁵ Chandra, S., & Christensen, J. (2017). Preparing for Pandemic Influenza: The Global 1918 Influenza Pandemic and the Role of World Historical Information. *Journal of World Historical Information*, 4(1), 20-30. Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>. Alexander, R. M. (2019). The Spanish Flu and the Sanitary Dictatorship: Mexico's Response to the 1918 Influenza Pandemic. *The Americas*, 76(3), 443-465.

¹⁶ MacDougall, H. (2007). Toronto's Health Department in Action: Influenza in 1918 and SARS in 2003. *Journal of the History of Medicine and Allied Sciences*, 62(1), 56-89.

¹⁷ Maclean, F.S. (1964). *A Challenge for Health: A History of Public Health in New Zealand*. Wellington: Government Printer. 387.

¹⁸ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>. Dicke, T. (2014). Waiting for the Flu: Cognitive Inertia and the Spanish Influenza Pandemic of 1918-19. *Journal of the History of Medicine and Allied Sciences*, 70 (2), 195-217. Chandra, S., & Christensen, J. (2017). Preparing for Pandemic Influenza: The Global 1918 Influenza Pandemic and the Role of World Historical Information. *Journal of World Historical Information*, 4(1), 20-30.

¹⁹ Patterson, D. K., & Pyle, G. F. (1991). The Geography and Mortality of the 1918 Influenza Pandemic. *Bulletin of the History of Medicine*, 65(1), 4-21.

²⁰ Dicke, T. (2014). Waiting for the Flu: Cognitive Inertia and the Spanish Influenza Pandemic of 1918-19. *Journal of the History of Medicine and Allied Sciences*, 70 (2), 195-217.

²¹ Dicke, T. (2014). Waiting for the Flu: Cognitive Inertia and the Spanish Influenza Pandemic of 1918-19. *Journal of the History of Medicine and Allied Sciences*, 70 (2), 195-217.

²² Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

The third and final wave came in the winter of 1918-19 and extended in some places, such as Australia, into 1920.²³

Unlike other flu pandemics that killed approximately one person per thousand infected, the Spanish influenza killed roughly twenty-five per thousand infected.²⁴ The exact number of those killed by the influenza is highly debated due to the lack of accurate records kept, however it is thought that at least 300 million people were infected, and that there were at least 50 million deaths worldwide, some suggest upwards of 100 million – between 3 to 6 percent of the entire global population.²⁵ Unlike many past pandemics such as the Plague of Justinian and the Black Death, the Spanish influenza was seen globally and ‘affected every inhabited continent in the world’.²⁶ America suggested that over 675,000 Americans died from the flu in 1918 and 1919 – ‘far more than the 53,402 who died in combat’ during the First World War.²⁷ In India, upwards of twelve million, with the possibility of eighteen million, died from the Spanish influenza or secondary complications. In the Central Provinces of India ‘as many people died in one Indian province ... as in the whole of Britain and the United States combined’.²⁸ Although some nations avoided the spread of influenza for longer than others, such as Scotland, who didn’t have any reported cases until May 1918, and Australia, who managed to avoid the virus until January 1919, it seemed that there was ‘no place on the planet’ that remained safe from the virus.²⁹ James Kennedy, a historian who focusses on Scottish public history, stated that ‘rurality did not afford any

²³ Humphries, M.O. (2014). Paths of Infection: The First World War and the Origins of the 1918 Influenza Pandemic. *War in History*, 21 (1), 55-81.

²⁴ Dicke, T. (2014). Waiting for the Flu: Cognitive Inertia and the Spanish Influenza Pandemic of 1918–19. *Journal of the History of Medicine and Allied Sciences*, 70 (2), 195-217.

²⁵ Centers for Disease Control and Prevention (CDC). (2018, June 5). 1918 Flu Pandemic [Video file]. Retrieved from <https://www.youtube.com/watch?v=U6Ccdk5wPvk> University of Pennsylvania School of Nursing.

(2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>. Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

U.S. Bureau of the Census. Mortality Statistics. Washington, DC: Government Printing Office; 1921. 30.

https://www.cdc.gov/nchs/data/vsushistorical/mortstatsh_1920.pdf

²⁶ Chandra, S., & Christensen, J. (2017). Preparing for Pandemic Influenza: The Global 1918 Influenza Pandemic and the Role of World Historical Information. *Journal of World Historical Information*, 4(1), 20-30.

²⁷ Crosby, A. (1976). *America's Forgotten Pandemic: The Influenza of 1918*. Cambridge: Cambridge University Press.

²⁸ Arnold, D. (2019). Death and the Modern Empire: The 1918 Influenza Epidemic in India. *Transactions of the Royal Historical Society*, 29, 181-200.

²⁹ Kennedy, J. (2020) Spanish Influenza and Scotland. *Scottish Local History*, 105. P3-6. Dicke, T. (2014). Waiting for the Flu: Cognitive Inertia and the Spanish Influenza Pandemic of 1918–19. *Journal of the History of Medicine and Allied Sciences*, 70 (2), 195-217.

protection'.³⁰ Oscar Jewell Harvey, a historian that documented the events of the Spanish influenza pandemic, solidifies Kennedy's statement as he recalled that even in the 'silent' and 'lonely' regions of the world, 'whole settlements were left without a single survivor'.³¹

Although many of those infected with the Spanish influenza reported classic flu-like symptoms, such as a high fever of 102°-104°, muscle and joint pain, headaches and a sore throat, there were some major differences that made the virus a deadly killer.³² The Spanish influenza was an incredibly infectious, and fast-acting virus. It killed more people in just a few months than 'four years of all-out, world-wide slaughter had managed to do' during the First World War.³³ The virus took hold of patients so quickly that 'an afflicted person could collapse and die within hours of showing symptoms'.³⁴ There has been debate over the incubation period of the virus, as some reported from one to three days, whilst others reported as little as twelve hours. It was reported in France in 1918 that in one institution 'thirty-one cases out of thirty-three individuals occurred within three days, all of them infected by one nurse'.³⁵ The quick incubation period meant that it was 'practically impossible' to admit any patients to hospital that were 'not already in extremis'.³⁶

³⁰ Kennedy, J. (2020) Spanish Influenza and Scotland. *Scottish Local History*, 105. P8.

³¹ Harvey, O. J. (1920). *The Spanish influenza pandemic of 1918: an account of its ravages in Luzerne County, Pennsylvania, and the efforts made to combat and subdue it*. Wilkes-Barre. 5. Available at: <https://archive.org/details/0266067.nlm.nih.gov/page/n7/mode/2up>. Accessed 02/2020.

³² Keegan, J. (1918). The Prevailing Pandemic of Influenza. *The Journal of the American Medical Association*, 71(13), 1051-1059. University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>

³³ Norman, T. (2014, Jul 02). Deadly flu bug claimed life of nurse just days after war's end: First world war centenary special 1914-1918As part of the activities to commemorate the beginning of world war one a hundred years ago, local historian Terry Norman offers this story of an Ammanford nurse who succumbed to the Spanish flu epidemic at the end of the war that killed more people than the war itself. *Carmarthen Journal* Retrieved from <https://search-proquest-com.libaccess.hud.ac.uk/docview/1541967835?accountid=11526>

³⁴ Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

³⁵ Vaughan, W. T. (1921). *Influenza; an epidemiologic study*. Baltimore, The American Journal of Hygiene. <https://archive.org/details/influenzaepidemi00vaug/page/96/mode/2up?q=nurse>. 96.

³⁶ House Committee minutes 1918-1920, held on 28th October 1918. LG/AL5/56, The Royal London Hospital Archives.

Unlike regular cases of the flu, the ‘irritating, distressing [and] non-productive cough’ showed the most cause for concern.³⁷ The most deadly symptom of the 1918 influenza virus was the patients’ inability to breathe as their lungs ‘rapidly filled with a thin, bloody fluid’.³⁸ In some cases it was reported that blood would seep from the patients mouth and nose as they struggled to breathe – many patients essentially ‘drowned in their own bodily fluids’.³⁹ The lack of oxygen in the body, due to the intense respiratory symptoms, also caused patients to turn blue in the fingers, arms and face. They also experienced internal bleeding in the stomach and petechial haemorrhages in the skin: when patients began to show these signs of cyanosis ‘it often meant death was close’.⁴⁰ N.R Grist, a doctor who worked during the pandemic, refers to a letter written in 1959 that was sent between military surgical wards discussing the 1918 pandemic that highlights the extent of the cyanosis; ‘cyanosis extend[ed] from their ears and spread all over their face, until it [was] hard to distinguish the coloured man from the white’.⁴¹

Secondary infections, especially pneumonia, set in incredibly quickly in Spanish influenza patients; patients could be ‘fine in the morning and dead by nightfall’.⁴² The Spanish influenza damaged victims immune system so heavily that the secondary infections seemed to be ‘the most vicious type ... that [had] ever been seen’ and allowed very little chance of recovery.⁴³ John Keegan, a medical professional during the 1918 pandemic, stated that the

³⁷ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 85.

³⁸ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history’s deadliest pandemic. Rodies, K. (1998). That Great Call: The Pandemic of 1918. *Nursing and Health Care Perspectives*, 19(5), 204-205.

³⁹ Keegan, J. (1918). The Prevailing Pandemic of Influenza. *The Journal of the American Medical Association*, 71(13), 1051-1059. Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history’s deadliest pandemic.

⁴⁰ Ireland, M. W. (1928). Communicable Disease Report. *Medical Department of the United States Army in the World War*, 8(1), 61. University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>. Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history’s deadliest pandemic.

⁴¹ Grist, N. R. (1979). Pandemic influenza 1918. *British Medical Journal*, 2(6205), 1632–1633. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1599810/?page=1>

⁴² Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California’s RN’s*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020. Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history’s deadliest pandemic. Fantus, B. (1918). *Clinical observations on influenza*. Chicago: American Medical Association. <https://archive.org/details/101510335.nlm.nih.gov/page/n3/mode/2up?q=nurse>. 3.

⁴³ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 82.

mortality rate of those who had developed secondary pneumonia was 60-70 percent.⁴⁴ An article in the British Journal of Nursing in 1939 also recorded that, on average, respiratory complications were recorded in 70 percent of all fatal influenza cases.⁴⁵ Due to the severity of the virus and its complications, many of those that survived were left with severe healthcare needs that often required lifelong care and medication.⁴⁶ Some patients reported loss of hair, fingernails, and skin, whilst others developed heart and lung complications.⁴⁷ Some even reported sleep disturbances, depression and vertigo.⁴⁸

The biggest difference between the Spanish influenza and normal cases of the flu was who it affected most. Although there were some groups who were badly affected as expected, such as pregnant women, the virus primarily killed members of society who would usually survive a case of the flu with little to no complications: young, otherwise healthy men and women between the ages of 18 and 40.⁴⁹ Researchers think this may be because the Spanish influenza virus created an 'aberrant immune response', making it incredibly deadly for those who would normally fight off infections easily.⁵⁰ The United States recorded that 'the greatest number of deaths occurred in the cohort aged 25 to 29, the second greatest in those aged 30 to 34, and the third in those aged 20 to 24. More people died in each one of those 5-year groups than the total deaths among all those over age 60, and the combined deaths of those aged 20 to 34 more than doubled the deaths of all those over 50'.⁵¹ In

⁴⁴ Keegan, J. (1918). The Prevailing Pandemic of Influenza. *The Journal of the American Medical Association*, 71(13), 1051-1059. House Committee minutes 1918-1920, held on 18th November 1918. LG/AL5/56, The Royal London Hospital Archives.

⁴⁵ Anonymous. (1939). The Public Health: Memorandum on Influenza. *The British Journal of Nursing*, 87, 290. <https://rcnarchive.rcn.org.uk/data/VOLUME087-1939/page290-volume87-december1939.pdf>

⁴⁶ Kennedy, J. (2020) Spanish Influenza and Scotland. *Scottish Local History*, 105. P3-6.

⁴⁷ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history's deadliest pandemic.

⁴⁸ Mamelund, S.E. (2003) *Effects of the Spanish Influenza Pandemic of 1918-19 on Later Life Mortality of Norwegian Cohorts Born About 1900*. Working Paper. https://www.researchgate.net/publication/5097223_Effects_of_the_Spanish_Influenza_Pandemic_of_1918-19_on_Later_Life_Mortality_of_Norwegian_Cohorts_Born_About_1900. Accessed 08/2020.

⁴⁹ Jordan, E.O. (1927). *Epidemic Influenza: A Survey*. Chicago: American Medical Association. <https://quod.lib.umich.edu/f/flu/8580flu.0016.858/1/--epidemic-influenza-a-survey?page=root;size=100;view=text>. Humphries, M.O. (2014). Paths of Infection: The First World War and the Origins of the 1918 Influenza Pandemic. *War in History*, 21 (1), 55-81.

⁵⁰ Jordan, E.O. (1927). *Epidemic Influenza: A Survey*. Chicago: American Medical Association. <https://quod.lib.umich.edu/f/flu/8580flu.0016.858/1/--epidemic-influenza-a-survey?page=root;size=100;view=text>. Humphries, M.O. (2014). Paths of Infection: The First World War and the Origins of the 1918 Influenza Pandemic. *War in History*, 21 (1), 55-81.

⁵¹ U.S. Bureau of the Census. Mortality Statistics. Washington, DC: Government Printing Office; 1921. 30. https://www.cdc.gov/nchs/data/vsushistorical/mortstatsh_1920.pdf

general, the very old and very young, who would usually be the first to succumb to an influenza virus, were 'on the whole less susceptible'.⁵²

The Spanish influenza hit the world like no other pandemic, and nobody expected the horror and intensity that it would entail. As the infection spread and the death rate continued to rise, the Spanish influenza pandemic became a global crisis. The young and healthy were dying quickly, whilst the children and the elderly were left alone as they could not help their dying families and friends. Nobody was safe. The pressure of the pandemic left societies 'drifting' and 'falling apart'.⁵³ There was no international health agency equivalent to today's World Health Organization, there were no 'specific treatments' for influenza, and there was no general knowledge of nursing care in people's homes.⁵⁴ Healthcare systems across the world were 'drained of physicians and nurses by the military' and were quick to collapse.⁵⁵ The only people capable of fighting against the influenza outbreak were nurses, and the sheer lack of them made it an even harder task. The Spanish influenza became a milestone in the nursing profession's history as it became an opportunity for nurses to finally move out of the shadow of doctors and physicians and show how important their work truly was. It was their time to gain their political voice, make their own decisions and show that nursing care was crucial for caring for those in need, especially when there was no cure.

⁵² Fantus, B. (1918). *Clinical observations on influenza*. Chicago: American Medical Association. <https://archive.org/details/101510335.nlm.nih.gov/page/n3/mode/2up?q=nurse>. 3.

⁵³ Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

⁵⁴ Defries, R. D. (1940). *The Development of Public Health in Canada*. Toronto: Canadian Public Health Association. Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 81.

⁵⁵ Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

Historiography

Unfortunately, until its centenary in 2018, the Spanish influenza seemed to have ‘vanished without a trace’ within historical research and public memory.⁵⁶ The first historian to write in depth on the topic of the 1918 influenza pandemic was A.A. Hoehling with his publication *The Great Epidemic* in 1961.⁵⁷ In 1976, Alfred W Crosby published *Epidemic and Peace, 1918*, followed by his publication of *America’s Forgotten Pandemic: The Influenza of 1918* in 1989.⁵⁸ Both publications focussed primarily on the impact of the Spanish influenza in the United States, and paved the way for international research about the subject.⁵⁹ Crosby outlined the great historical significance of the pandemic and argued that the event had lasting consequences that were still felt in the late twentieth century. When looking at the Covid19 pandemic that the world is experiencing today, it is safe to say that lessons from the Spanish influenza are still being learnt in present day. Crosby has argued that historians were too busy ‘memorializing the experience of the Great War’ and therefore ‘did not talk much about the flu’.⁶⁰ As noted by Mark Honigsbaum, a lecturer in journalism, in 1924 ‘the Encyclopaedia Britannica didn’t even mention the pandemic in its review of the “most eventful years” of the 20th century’.⁶¹ ‘The flu never inspired awe, not in 1918 and not since’ wrote A. Crosby.⁶² When researching this topic, Crosby’s observation shines clear as there are little to no secondary sources regarding the pandemic until the 1960s, and most of the secondary literature was not written until the 2000s. M. Honigsbaum has stated that the virus ‘inspired few works of fiction or non-fiction’, and that the ‘absence’ of such works,

⁵⁶ Crosby, A. (1989). *America’s Forgotten Pandemic: The Influenza of 1918*. Cambridge: Cambridge University Press. Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

⁵⁷ Hoehling, A. A. (1961). *The Great Epidemic*. Boston: Little, Brown and Company.

⁵⁸ Crosby, A. (1976). *Epidemic and Peace 1918*. Connecticut: Greenwood Press. 51-162. Crosby, A.

(1989). *America’s Forgotten Pandemic: The Influenza of 1918*. Cambridge: Cambridge University Press.

⁵⁹ Crosby, A. E. (1989). *America’s Forgotten Pandemic: The Influenza of 1918*. Cambridge University Press.

⁶⁰ Crosby, A. (1989). *America’s Forgotten Pandemic: The Influenza of 1918*. Cambridge: Cambridge University Press.

⁶¹ Honigsbaum, M. (2018, September 3). *Why historians ignored the Spanish flu*. The Conversation. Retrieved 2 June 2021. Retrieved from <https://theconversation.com/why-historians-ignored-the-spanish-flu-101950>

⁶² Crosby, A. (1989). *America’s Forgotten Pandemic: The Influenza of 1918*. Cambridge: Cambridge University Press.

from both a general and historical standpoint, is 'most striking'.⁶³ An alternative argument was made by J. Fisher, who suggested that the 'silence' surrounding the 1918 influenza pandemic signified as a 'tribute to its awe-inspiring destructive power'.⁶⁴ Fisher believes that there is an 'inability of human language' to properly describe the horrors of such an event.⁶⁵ However, the existence of histories on other horrific events, such as war experiences and the Holocaust, show that historians do have the means to write about deadly events. This highlights the issue that the history of the 1918 influenza pandemic was given 'little attention' in comparison to other global events until recent years.⁶⁶

Another issue with the existing historical literature is that they often mention the roles and responsibilities of nurses, but never explore it in depth.⁶⁷ Some feminist writers, including R. Onion, have argued that one of the reasons the influenza pandemic 'faded in memory' was because 'it was the women who did most of the work'.⁶⁸ Only a few historians have looked in depth at the nursing profession and its impact during the 1918 pandemic: most notably are Arlene Keeling, Patricia D'Antonio, P.F. Cipriano and P.J. Wood.⁶⁹ J. Brooks has argued that historians of nursing are presented with the 'formidable task of attempting to decipher the history of a group about whom the documents are scarce, and who have rarely, if ever,

⁶³ Honigsbaum, M. (2018). Spanish influenza redux: revisiting the mother of all pandemics. *The Lancet*, 391(10139), 2492–2495. <https://www.sciencedirect.com.libaccess.hud.ac.uk/science/article/pii/S0140673618313606?via%3Dihub>

⁶⁴ Fisher, J. (2012). *Envisioning Disease, Gender, and War: Women's Narratives of the 1918 Influenza Pandemic*. New York: Springer.

⁶⁵ Fisher, J. (2012). *Envisioning Disease, Gender, and War: Women's Narratives of the 1918 Influenza Pandemic*. New York: Springer.

⁶⁶ Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

⁶⁷ Hile, E. (2018). "Like Brave Soldiers:" Nursing and the Spanish Influenza Epidemic of 1918 in the United States. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

⁶⁸ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

⁶⁹ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112. Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company. D'Antonio, P. (2019). The Great Flu and After: Why the Nurses? *American Journal of Public Health*, 109(6), 832-833. Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>. Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

written about themselves'.⁷⁰ T. Quinn seems to agree with the point made by J. Brooks as he has argued that it has been difficult to write about the Spanish influenza 'paradoxically because there is both too much and too little information'.⁷¹ By saying this, Quinn highlights that although some records regarding the Spanish influenza were kept, such as death and infection rates, the input from those involved in the pandemic is limited. Despite the lack of primary sources covering nurses during the pandemic, those that have researched the impact of nurses collectively agree that 'the pandemic of 1918-1919 had an overwhelming international impact on communities and the nursing profession'.⁷² They also agree that the importance of a nurses work during the pandemic was indisputable, especially in comparison to the help that could be provided by other medical professionals. As argued by P. D'Antonio, in contrast to the work of doctors, the 'recovery and rehabilitation' delivered by nurses was 'labour intensive, time-consuming, constant, and absolutely necessary'.⁷³ It is also agreed that nurses gained a sense of achievement and pride in caring for their patients in the most difficult of times, and showed little to no sign of giving up even in times of pressure.⁷⁴ Unfortunately, most historians that have focussed on the nursing profession during the pandemic focus on nurses in the United States. There is a major neglect of nursing history in regard to the British experience and the rest of the world. S. Chandra & J. Christensen have argued that the reason for this is because whilst 'literature on the pandemic is easily come by ... global treatments of the topic are much rarer'.⁷⁵ D. Arnold was one of the only historical pieces I found that researched in depth on the impact of influenza within Asia, he argued that there are 'photographs of hospital wards crammed with patients or emergency relief centres, pictures of people wearing protective face-masks, piled-up bodies awaiting cremation or burial' widely available in the United States, but there

⁷⁰ Brooks, J. E. (2000). Ghost of the past: capturing history and the history of nursing. *International History of Nursing Journal*, 5(2), 36-41.

⁷¹ Quinn, T. (2008). *Flu: A Social History of Influenza*. London: New Holland Publishers.

⁷² Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

⁷³ D'Antonio, P. (2019). The Great Flu and After: Why the Nurses? *American Journal of Public Health*, 109(6), 832-833.

⁷⁴ Hile, E. (2018). "Like Brave Soldiers:" *Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

⁷⁵ Chandra, S., & Christensen, J. (2017). Preparing for Pandemic Influenza: The Global 1918 Influenza Pandemic and the Role of World Historical Information. *Journal of World Historical Information*, 4(1), 20-30.

'are no such images for India ... Nor are there many for other Asian societies'.⁷⁶ The international nature of this study, and the reasoning for using of a mix of transatlantic resources within this thesis, is discussed in more depth under methodology.

⁷⁶ Arnold, D. (2019). Death and the Modern Empire: The 1918-19 Influenza Epidemic in India. *Transactions of the Royal Historical Society*, 29, 181-200.

Methodology and Primary Sources

Whilst researching for this thesis, the world was struck with another pandemic – Covid19. Although this provided my research with multiple new secondary sources comparing the two pandemics, it also limited the availability of primary sources. Although some archive visits were possible, such as visits to the Royal College of Nursing Archives in Edinburgh and London, due to Covid19 restrictions, some archived sources were unfortunately not attainable.⁷⁷ However, this thesis is an example of how compiling substantial primary research for a master's thesis is still possible by just using online sources. Many primary sources that are available online are just as valuable, empirically, as the same sources viewed in an archive. Original documents have been digitised or made available as facsimiles, so viewing the digitised copies offered the same view as the original documents.

There are large, publicly available, electronic repositories available online, which meant that a university login was not needed to access them. Being obliged to use more electronic sources due to the Covid19 pandemic meant that this research project took a more transatlantic approach. The available electronic resources allowed me to use materials that I had not initially thought of using, as the archives in which they are deposited are thousands of miles away from where I am based. Online resources regarding the pandemic in the United States were plentiful. The notes of medical professionals, diary and journal entries of nurses and letters between colleagues have been greatly preserved. The *Influenza Archive* is an online archive created by the University of Michigan Library that has compiled primary resources from newspapers, diary entries and doctors records across the United States.⁷⁸ Websites such as this one have 'analysed and exposed just how involved nurses were in the relief efforts' of the influenza pandemic, as well as displaying their physical and emotional experiences.⁷⁹ The primary sources, as will be discussed throughout this thesis, primarily

⁷⁷ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P11. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

⁷⁸ University of Michigan Library. (2012, September 19). *Influenza Encyclopaedia*. Influenza Encyclopaedia. Retrieved 6 January 2020, from <https://www.influenzaarchive.org/>

⁷⁹ Hile, E. (2018). *"Like Brave Soldiers:" Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

showed that there was ‘not much’ caregivers could do to stop the spread of the virus.⁸⁰ The pandemic made nurses work ‘more than usually difficult’, but they continued to help as much as they could.⁸¹ This website was incredibly helpful for giving an insight into nurses experiences in the United States, but again highlighted the issue of the lack of preservation of resources in the other countries that were affected by the pandemic. Similarly, like the secondary sources, most primary accounts focus on North America, with occasional reports from Europe.⁸² Online and in person museum exhibits were also an incredibly useful tool for this research.⁸³ Fortunately, I was able to visit the Florence Nightingale Museum in London before the Covid19 pandemic struck and was able to retrieve a lot of useful information regarding the 1918 pandemic as they were hosting a centenary event that highlighted the work of nurses.⁸⁴ Although museum exhibitions regarding the 1918 influenza, such as the one at the Florence Nightingale museum, were educational and insightful, they did not have any ‘surviving’ objects on display.⁸⁵ This is because most of it would have been burned at the time in an attempt to stop the spread of infection. C. M Stetler has argued that the lack of paraphernalia in the museum world from the 1918 pandemic has aided in the forgetting of the topic in public memory.⁸⁶

Unfortunately, there were some downsides to using online primary sources. Some websites had both scanned and photographed images of their archived documents, meaning the quality was not always legible. Clunky and slow websites also made the research a difficult and tedious task. Some websites were also locked by institutions that required a sign-up fee to see their online archived documents, which was unfortunately not always achievable on a

⁸⁰ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California's RN's*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

⁸¹ Westphal M. Society women work as nurses in flu hospital. The Chicago Daily Tribune 1918 Oct 10. Chicago VNA Collection, Chicago History Museum.

⁸² Spinney, L. (2017). *Pale Rider: The Spanish Flu of 1918 and how it changed the world*. London: Penguin Random House. 90.

⁸³ Westphal M. Society women work as nurses in flu hospital. The Chicago Daily Tribune 1918 Oct 10. Chicago VNA Collection, Chicago History Museum. Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history's deadliest pandemic.

⁸⁴ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history's deadliest pandemic.

⁸⁵ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

⁸⁶ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

student budget. There were also multiple instances of online archives no longer being available after being used a few months prior. This was incredibly frustrating, especially when I wanted to revisit pieces of research that I had previously read. The reliability of online sources was also an issue that had to be overcome, as whilst most documents were digitised on government websites and national archive collections, some are documented by private researchers with their own websites. Therefore, it was up to personal judgement whether to trust their documents as credible or not.

This introduction has focussed on the methodology and the primary sources of this study, highlighting the complexities of the approach, and discussing the need to ensure why the transatlantic focus was sustained. As previously mentioned, there is a lack of primary and secondary sources regarding the 1918 Spanish influenza pandemic. Crosby argued that the history of the Spanish influenza 'may as well be as lost as yesterday's wave in the ocean'.⁸⁷ Even in the United States, which arguably has one of the highest resource pools regarding the topic, the pandemic was seen to have 'disappeared from the American public's memory' as the 'pandemic diminished in its intensity'.⁸⁸ This study would have been close to impossible to conduct if a range of digitised sources from both the United States and Britain had not been available. There was in particular a greater availability of digitised primary sources relating to the topic in the United States. Although there are some incredibly informative pieces of research within this study from all corners of the world such as India and New Zealand, the vast majority of research used does originate from the United States and Britain.

Another reason for focussing on the experiences of nurses in both the United States and Britain in this thesis was due to their shared recognition of the nursing profession, and the similar state of professionalism held by the nurses themselves. Britain and the United States continuously worked together in regard to the progress of the nursing profession. The International Council of Nurses was founded in 1899, with Great Britain and the United States as two of its three charter members. The goals of the organisation were, and still are, to bring nurses organizations together in a worldwide body and to advance the profession

⁸⁷ Crosby, A. (1989). *America's Forgotten Pandemic: The Influenza of 1918*. Cambridge: Cambridge University Press. 306.

⁸⁸ Robinson, K. R. (2021). Comparing the Spanish flu and COVID-19 pandemics: Lessons to carry forward. *Nursing Forum*, 56(2), 350–357. <https://doi.org/10.1111/nuf.12534>

of nursing worldwide.⁸⁹ Another example of shared knowledge between the two countries was through the use of nursing textbooks. Nursing textbooks from Britain, such as Eva Luckes' *General Nursing* and Isla Stewart and Herbert Cuff's *Practical Nursing* were also influential in the United States.⁹⁰ The ninth edition of Luckes' textbook was published three years before the pandemic in 1915. Due to this common pool of knowledge between the two countries, they had a shared understanding of the nature of the nursing profession, and therefore used similar tactics when facing the Spanish influenza pandemic.

Britain and the United States continued to be at the 'forefront' throughout the 1918 Spanish influenza pandemic, and took the lead on responding to the crisis.⁹¹ Hospitals in these countries, especially in Philadelphia and London, were 'at the forefront of both nursing and medicine in the last few decades of the nineteenth century'.⁹² Therefore, as reflected through both my primary and secondary sources, a lot of the existing literature on the Spanish influenza comes from digitised sources from both Philadelphia and London. By making this a transatlantic study, I was able to retrieve a wider range of sources and create a more in-depth retelling of what nurses were faced with during the 1918 pandemic, and the 'critical role' they played in 'preventing further spread of influenza and reducing the pandemic's severity', both in the United States and Britain.⁹³

⁸⁹ Brush, B.I., Lynaugh, J.E., Boschma, G. Rafferty, A.M., Stewart, M. & Tomes, N.J. (1999). *Nurses of all Nations: A history of the International Council of Nurses, 1899-1999*. Lippincott. 1. McPherson, K. M. (2003). *Bedside Matters: The Transformation of Canadian Nursing, 1900-1990*. University of Toronto Press.

⁹⁰ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. Stewart, I., & Cuff, H. E. (1899). *Practical Nursing*. Blackwood. <https://archive.org/details/b21535942/page/210/mode/2up>.

⁹¹ Tesseyman, S., Brooks, J., & Hallett, C. (2020). Nurses and Surgical Dressers: Medical Students' Impact on Hospital Nursing Work in Philadelphia and London, 1870 to 1910. *Nursing History Review*, 29(1), 117-141. <https://connect.springerpub.com/content/sgnrhr/29/1/117>

⁹² Tesseyman, S., Brooks, J., & Hallett, C. (2020). Nurses and Surgical Dressers: Medical Students' Impact on Hospital Nursing Work in Philadelphia and London, 1870 to 1910. *Nursing History Review*, 29(1), 117-141. <https://connect.springerpub.com/content/sgnrhr/29/1/117>

⁹³ D'Antonio, P., & Whelan, J. C. (2004). Moments: When Time Stood Still. *The American Journal of Nursing*, 104(11), 66-72. https://www-ijstor-org.libaccess.hud.ac.uk/stable/29746200?seq=1#metadata_info_tab_contents

Chapter One: Nothing Compares: The importance of nursing during the Spanish influenza pandemic

From 1917 to 1920 healthcare professionals across the globe were faced with the difficult task of fighting against the ‘unseen, unknown enemy’ known as the Spanish influenza, and worked around the clock using all of their medical expertise to keep patients both alive and comfortable.⁹⁴ The Spanish influenza was like nothing that medical professionals had ever experienced before, and as medical institutions were already understaffed due to the First World War, it made caring for the sick an even more difficult task. When there was no cure, effective medical treatments, or medicines that a doctor could prescribe, effective nursing became the most vital care that could be provided to patients. Eva Luckes stated in her 1915 edition of ‘*General Nursing*’, that ‘the science of medicine and the art of nursing materially assist each other in their ultimate objects; i.e., the cure where that is possible, and, failing that, the alleviation of suffering’.⁹⁵ The Spanish influenza pandemic was a ‘pivotal moment for nursing’,⁹⁶ as it highlighted the importance of nurses for alleviating suffering and showed that it was the constant care provided by nurses that ‘spelled the difference between life and death’ for Spanish influenza patients.⁹⁷ Cipriano has argued that the changes made to the nursing profession during 1918-1919, such as the introduction of nurse registration, are ‘still felt today’.⁹⁸ This chapter will look at why nurses were so much more important than other medical professionals during the pandemic and why medical professionals lacked an understanding of the virus. This chapter will then discuss whether there was any alternative

⁹⁴ Quinn, T. (2008). *Flu: A Social History of Influenza*. London: New Holland Publishers.

⁹⁵ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 1.

⁹⁶ Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>. 305. D'Antonio, P. (2019). The Great Flu and After: Why the Nurses? *American Journal of Public Health*, 109(6), 832-833.

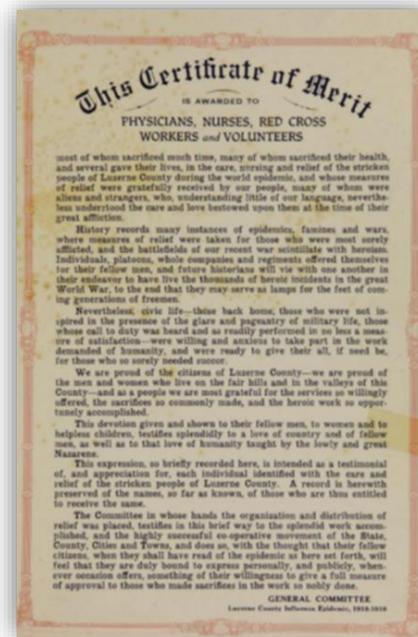
⁹⁷ Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>. 305. D'Antonio, P. (2019). The Great Flu and After: Why the Nurses? *American Journal of Public Health*, 109(6), 832-833.

⁹⁸ Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>. 305.

to nursing, and why nursing care was so crucial for patients' survival when there was no cure.

The importance of nurses in comparison to other medical professionals

The pandemic provided 'great experience' and career-changing lessons for both physicians and nurses.⁹⁹ But it quickly became apparent to everybody involved that 'good nursing was more important, as well as more difficult to secure, than good doctoring'.¹⁰⁰ For centuries, doctors had been seen as the answer to all medical questions. However, when faced with an incurable, rapidly spreading infectious disease, medical science had 'little to offer' and therefore the importance of day-to-day nursing care shone through.¹⁰¹ Doctors had few resources to rely on and almost no medicines that they could prescribe to assist in saving patients' lives. Although doctors did all they could to help care for their patients, nurses were the only ones who could truly 'help' and were the 'clearest predictor of survival'.¹⁰² The pandemic proved how



Harvey, O. J. (1920). The Spanish influenza pandemic of 1918: an account of its ravages in Luzerne County, Pennsylvania, and the efforts made to combat and subdue it. *Wilkes-Barre*. Available at: <https://archive.org/details/0266067.nlm.nih.gov/page/n7/mode/2up>. Accessed 02/2020.

⁹⁹ Vaughan, W. T. (1921). *Influenza; an epidemiologic study*. Baltimore, The American Journal of Hygiene. <https://archive.org/details/influenzaepidemi00vaug/page/96/mode/2up?q=nurse>. 237.

¹⁰⁰ Fantus, B. (1918). *Clinical observations on influenza*. Chicago: American Medical Association. <https://archive.org/details/101510335.nlm.nih.gov/page/n3/mode/2up?q=nurse>. 6.

¹⁰¹ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California's RN's*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

¹⁰² University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>. Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

important it was ‘for every woman – and every man – to be at least somewhat skilled in nursing the sick’.¹⁰³

When the Spanish influenza hit the world, there was ‘little or nothing known’ about viruses and their treatment.¹⁰⁴ Although bacterial infections were ‘fairly well’ understood, viruses were not, and therefore doctors struggled on how to most effectively care for their infected patients.¹⁰⁵ Medical professionals believed that ‘infectious diseases [were] caused by the introduction into the body of a living poison, which [had] the power of producing a disease if it can find therein conditions suitable for its development ... Every infectious or contagious disease is caused by a specific germ – a germ which produces that disease and no other ... All germs – or bacteria, as they are called – have their favourite seat in the body, and they leave the body through the lungs, the skin, the kidneys, or the bowels’.¹⁰⁶ Medical professionals tried ‘everything they had ever heard of ... from the ancient art of bleeding patients, to administering oxygen, to developing new vaccines’, but nothing deemed overly successful.¹⁰⁷ Some doctors even ‘mistakenly assumed the illness was caused by a bacillus and tried to treat it accordingly, which probably did more harm than good’.¹⁰⁸ Dr Valentine McGillycuddy, a physician who worked with the United States public health service, confessed that during the pandemic he ‘didn’t know a damn thing about influenza’ and ‘couldn’t help’.¹⁰⁹ He and his fellow practitioners felt useless in the face of the pandemic, saying that ‘not one of us knows a damn about it’, and therefore they had no idea how to

¹⁰³ Fantus, B. (1918). *Clinical observations on influenza*. Chicago: American Medical Association. <https://archive.org/details/101510335.nlm.nih.gov/page/n3/mode/2up?q=nurse>. 6.

¹⁰⁴ Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles’s memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

¹⁰⁵ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California’s RN’s*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

¹⁰⁶ Stoney, E. M. A. (1897). *Practical points in nursing for nurses in private practice: with an appendix containing rules for feeding the sick, recipes for invalid foods and beverages, weights and measures, dose list, and a full glossary of medical terms and nursing treatment* (2nd ed.). W.B. Saunders. <https://archive.org/details/68170600R.nlm.nih.gov/page/n5/mode/2up>. 213.

¹⁰⁷ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

¹⁰⁸ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California’s RN’s*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

¹⁰⁹ McGillycuddy, J. B. (1941). *McGillycuddy, Agent: A Bibliography of Dr Valentine T. McGillycuddy*. Stanford: Stanford University Press. 278.

treat the patients in front of them.¹¹⁰ Consequently, the doctors who were used to being the ‘manly conquerors in other stories about illness in the early 20th century’ ended up coming up ‘completely short in 1918’.¹¹¹ This is what made nurses ‘even more miraculous’, as although they also had nothing that could cure their patients, they were still able to face the crisis of the unknown with ‘optimism and gratitude’.¹¹²

During the First World War, the United States and Britain both deployed over 17,000 nurses to serve on the Western Front.¹¹³ This meant that the number of nurses left serving in their home countries were incredibly depleted and made caring for those infected by the Spanish influenza an even bigger task. Doctors, just like nurses, would make call after call to see to patients both in and out of hospitals, many ‘making up to sixty calls a day’.¹¹⁴ They were all incredibly overworked and often fell sick to the virus themselves, putting an even larger strain on healthcare systems around the world. D’Antonio and J. C Whelan state that many student nurses ‘stayed by their patients’ bedsides, despite pleas from family and friends ... hundreds of them died’.¹¹⁵ Dr Boobbyer, a doctor who worked during the pandemic in Nottingham, England, appealed for ‘further assistance on the part of trained nurses’ as he believed they were the only ones capable of ‘combatting the outbreak’.¹¹⁶ It became common knowledge amongst doctors that their only ‘purpose’ during the pandemic was to declare patients as dead, as many patients would succumb to the virus before a doctor could even arrive, especially for patients being treated outside of hospitals.¹¹⁷ Historian Nancy Bristow, in her book *American Pandemic*, quotes a physician who had to experience this on multiple occasions: ‘There wasn’t much a doctor could do. The patient would be

¹¹⁰ McGillycuddy, J. B. (1941). *McGillycuddy, Agent: A Bibliography of Dr Valentine T. McGillycuddy*. Stanford: Stanford University Press. 278.

¹¹¹ Williams, W. C. (1951). *The Autobiography of William Carlos Williams*. New York: Random House. 159-160.

¹¹² Hile, E. (2018). “Like Brave Soldiers:” *Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master’s Thesis). Retrieved from

https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹¹³ BBC. (2014, April 2). *World War One: The many battles faced by WW1’s nurses*. BBC News. Retrieved 10 February 2021, from <https://www.bbc.co.uk/news/magazine-26838077>

Jones, M. M. (2012). Retrieved 10 February 2021. *American Nurses in World War I*. American Experience. <https://www.pbs.org/wgbh/americanexperience/features/the-great-war-american-nurses-world-war-1/>

¹¹⁴ Williams, W. C. (1951). *The Autobiography of William Carlos Williams*. New York: Random House. 159-160.

¹¹⁵ D’Antonio, P., & Whelan, J. C. (2004). Moments: When Time Stood Still. *The American Journal of Nursing*, 104(11), 66–72. https://www-istor-org.libaccess.hud.ac.uk/stable/29746200?seq=1#metadata_info_tab_contents

¹¹⁶ Anonymous. (1918, November 25). Fresh Air Cures. *Nottingham Journal*, p. 3.

¹¹⁷ Anonymous. (1919, March 11). Sad Case of "Flu". *Sheffield Daily Telegraph*, p. 3.

dead before you could get back to see him ... the main thing of visiting every day was to find out who was dead and then bury them'.¹¹⁸

William Williams, another doctor who worked during the pandemic, wrote about his experiences in his autobiography and stressed that 'we hadn't a thing that was effective in checking that potent poison that was sweeping the world'.¹¹⁹ Due to the continuing shortage of nurses, doctors were truly 'struggling to cope' with the pandemic.¹²⁰ Their struggle became so outwardly apparent that other medical professionals and even government officials became afraid that doctors would 'desert their posts as soon as they [saw] that their own lives [were] in danger'.¹²¹ Some doctors, including M. Jacobs, admitted that they would often express to their colleagues 'the intention of committing minor crime with the object of being locked up for the duration of the pandemic'.¹²² Of course, this was all a 'joke' that doctors made when faced with imminent danger, yet it suggests that although doctors and nurses worked together during the pandemic, most doctors 'reflected no similar sense of satisfaction' that nurses did whilst caring for their patients.¹²³

Was there any alternative to nursing?

J.B Herrick, an American physician and professor of medicine stated that there was 'no drug [that could] prevent the occurrence of influenza ... many [had] been tried, but a review of the reports made by optimistic clinicians [was] far from convincing'.¹²⁴ As there was nothing to prevent the infection, nurses and doctors tried a number of drugs and remedies to try and help patients to alleviate their symptoms. It was hoped that if some drugs proved effective for helping patients control their symptoms at home, it would allow nurses to be

¹¹⁸ Bristow, N. (2012). *American Pandemic: The Lost Worlds of the 1918 Influenza Epidemic*. Oxford: Oxford University Press.

¹¹⁹ Williams, W. C. (1951). *The Autobiography of William Carlos Williams*. New York: Random House. 159-160.

¹²⁰ Bresalier, M. (2013). Fighting Flu: Military Pathology, Vaccines, and the Conflicted Identity of the 1918–19 Pandemic in Britain. *Journal of the History of Medicine and Allied Sciences*, 68(1), 87-128.

¹²¹ Huber, S. J. & Wynia, M. K. (2004). When pestilence prevails ... physician responsibilities in epidemics. *American Journal of Bioethics*, 4(1), 5-11.

¹²² Jacobs, M. (1965). *Reflections of a General Practitioner*. London: Johnson.

¹²³ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from

https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹²⁴ Herrick, J. B. (1919). *Treatment of influenza by means other than vaccines and serums*. Chicago: American Medical Association. <https://archive.org/details/101493938.nlm.nih.gov/page/n3/mode/2up>. 2.

able to provide more care for those in need. Initial attempts were made at creating a vaccine for the virus, but despite many efforts, no drug proved to have any specific influence as a prevention of influenza.¹²⁵ Doctors and nurses tried all sorts of remedies, from administering quinine sulphate to injecting typhoid vaccines.¹²⁶ Even treatments such as narcotics, arsenic or even ‘an egg in a cup of orange juice’ were tested.¹²⁷ An extremely common, yet controversial, remedy at the start of the pandemic was the administration of alcohol. Some doctors claimed that alcohol in small doses had a stimulant effect, while others urged complete abstinence.¹²⁸ Johnson, a doctor during the pandemic, recalls his experience with issuing alcohol; ‘at the beginning of the epidemic we prescribed whisky in almost every case. Our idea was that it would have a sedative action. At the present time we are very doubtful of its value. Toward the end of the epidemic, we used it very moderately’.¹²⁹ Elizabeth Cockayne, a British nurse who worked during the pandemic, stated during an interview with Dr Christopher Maggs that there were ‘very little drugs’ that actually showed any success in helping the patients in the fever hospitals.¹³⁰ Common treatments that did prove some effectiveness included aspirin, epinephrine, and oxygen.¹³¹ Vicks VapoRub was also widely used to help reduce congestion and a variety of cough medicines and expectorants were also used to help clear patients’ chests of fluid.¹³²

¹²⁵ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

¹²⁶ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 84.

¹²⁷ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

¹²⁸ Spinney, L. (2017). *Pale Rider: The Spanish Flu of 1918 and how it changed the world*. London: Penguin Random House. 97.

¹²⁹ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 85.

¹³⁰ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P37. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

¹³¹ Influenza Directive from Washington, D.C., regarding treatment and procedures; 9/26/1918; General Correspondence, 1917 - 1920; Records of Naval Districts and Shore Establishments, Record Group 181; National Archives at New York, New York, NY. [Online Version, <https://www.docsteach.org/documents/document/directive-from-washington-dc-regarding-treatment-and-procedures>, May 17, 2021]

¹³² Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309. https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA_1918.45.aspx. Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California’s RN’s*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

Johnson stated that these drugs 'possibly made the patients more comfortable, but [he was] very sceptical as to their influence on the general infection'.¹³³

As doctors failed to visit all their patients and as bacteriologists had 'no serum to offer', the public used home remedies of every description to try and relieve their suffering at home.¹³⁴ Well-known and easily achievable remedies such as good hydration, proper nourishment and 'fresh air and plenty of it' were suggested to the general public to help aid those in their own homes.¹³⁵ Home remedies widely varied, and ranged from small doses of strychnine and kerosene to red-pepper sandwiches.¹³⁶ In an attempt to prevent contracting the influenza virus, some people 'sprinkled sulphur in their shoes, wore vinegar packs on their stomachs, tied slices of cucumber to their ankles, or carried a potato in each pocket'.¹³⁷ Beyond the industrial world, people sought out their own traditional healers, including spiritual healers and ancient forms of treatment that made use of herbs and spices. They were trusted by their communities and were cheap alternatives to western medicine, but like the medicines tried in hospitals, they were also mostly unsuccessful and only provided a placebo.¹³⁸

It was hoped that drugs could provide some sort of alternative to the work of nurses, but sadly this was unsuccessful. It quickly became apparent that most drugs had no effect in helping influenza patients, and those that did still needed trained nurses to be able to

¹³³ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 85.

¹³⁴ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

Anonymous. (1939). The Public Health: Memorandum on Influenza. *The British Journal of Nursing*, 87, 290. <https://rcnarchive.rcn.org.uk/data/VOLUME087-1939/page290-volume87-december1939.pdf> Cape Town

Correspondent. (1918, November 28). The Spanish Death in South Africa: Stricken Cape Town. *The Manchester Guardian*. <https://www-proquest-com.libaccess.hud.ac.uk/docview/476199447?pq-origsite=summon>

¹³⁵ Anonymous. (1918, November 25). Fresh Air Cures. *Nottingham Journal*, p. 3. Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles's memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

¹³⁶ Fincher, J. (1989). America's deadly rendezvous with the "Spanish Lady." *Smithsonian*, 19(10), 130-145.

¹³⁷ Fincher, J. (1989). America's deadly rendezvous with the "Spanish Lady." *Smithsonian*, 19(10), 130-145.

¹³⁸ Spinney, L. (2017). *Pale Rider: The Spanish Flu of 1918 and how it changed the world*. London: Penguin Random House. 98.

administer them.¹³⁹ It was another reminder that there was no drug or general treatment that compared to the hard work of nurses.¹⁴⁰

The importance of care when there is no cure.

While doctors had ‘seemingly failed to reach their standards of mastery over the disease’, nurses went above and beyond to treat their patients, even with minimal knowledge of what they were fighting.¹⁴¹ Nurses worked tirelessly together to help their patients, and to prove their worth in the medical field. Many nurses were taught in the footsteps of Eva Luckes, aiming to be the best nurses they could, especially by following one of Luckes’ most dire rules as stated in the ninth edition of her textbook: ‘avoid anything which approaches to amateur doctoring, not only for your own sake, but for the sake of the whole nursing profession’.¹⁴² What Luckes meant by this was that nurses should remember ‘neither to rival nor interfere with [the work of] doctors, but in every sense help them’.¹⁴³ There was a reason that doctors felt useless in the face of the pandemic, and it was not a nurses job to take the doctor's place, but to become what the doctor couldn't be: a provider of care when there was no cure.

A large reason for the success of the nursing profession was their sense of pride in providing care for their patients. They were not disheartened by the fact they could not cure the disease, but instead kept fighting tirelessly throughout the course of the pandemic, and kept the professions, plus the rest of society's morale high, despite



Figure 2: *History of Medicine. (1918). A Child Sick with the Spanish Flu [Online image]. Retrieved from <https://www.thoughtco.com/1918-spanish-flu-pandemic-pictures-4122588>*

¹³⁹ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

¹⁴⁰ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 87.

¹⁴¹ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹⁴² Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 4.

¹⁴³ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 3.

not being able to save every patient. In the absence of medical intervention, nurses did all they could to save every life, and keep every patient comfortable, providing both physical and emotional care for those infected by the Spanish influenza virus. Staying by the bedside of patients in their final hours, providing emotional support to the families and loved ones and providing hope for those who did not know if they would succumb to the illness or not. Many doctors did not seem to show this same sense of satisfaction in their memoirs for simply providing care, as they felt that if they could not provide a cure then their work was pointless. Historian Elizabeth Hile also focused on this sense of pride that nurses felt by comparing them to doctors, stating that ‘nurses never [felt] the same sense of failure as their male counterparts because they were not failing, and without this sense of defeat nurses had no reason to believe their efforts were futile, as doctors often did’.¹⁴⁴ Hile has also argued that it was ‘this sense of optimism, femininity, and care’ that made nurses so inherently important during the pandemic in comparison to their fellow medical professionals.¹⁴⁵ This sense of pride and accomplishment that nurses held may be due to the fact that they were surpassing the standards that had previously been set for the nursing profession. The vast amount, and diversity, of the work provided by nurses during the pandemic highlighted the ‘importance of recognizing the complicated nature of everyday nursing work’.¹⁴⁶ Both medical professionals and the general public became more aware of the importance of ‘the little things’ that nurses did, and that nurses were more than a ‘simple aid to the physician’.¹⁴⁷

¹⁴⁴ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master’s Thesis). Retrieved from

https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹⁴⁵ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master’s Thesis). Retrieved from

https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹⁴⁶ MacLeod, M. (1994). “It’s the little things that count”: The hidden complexity of everyday clinical nursing practice. *Journal of Clinical Nursing*, 3, 361–368.

¹⁴⁷ Tesseyman, S., Hallett, C., & Brooks, J. (2017). Crisis at Guy’s Hospital (1880) and the nature of nursing work. *Nursing Inquiry*, 24(4), 1–8. <https://onlinelibrary.wiley.com/doi/10.1111/nin.12203>. D’Antonio, P.

(2010). *American Nursing: A History of Knowledge, Authority, and the Meaning of Work*. Baltimore: Johns Hopkins University Press. 38. Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

Chapter Two: Nurses' Impact: Nurses' methods of caring for Spanish influenza patients and their positive impact on the future of the nursing profession

Nurses provided vital care to millions of patients, both in their homes and in hospitals, no matter their race, creed, ethnicity, or sex. Nurses were the first, and sometimes only, medical professionals that would provide care to ethnic minorities and immigrants and took pride in helping everyone and anyone they could.¹⁴⁸ Skilled nurses were given multiple duties throughout their working days in which they were faced with making 'astute and critical observations of the patient's condition and intervene[d] accordingly' to help to keep casualties to a minimum.¹⁴⁹ Their roles can be sectioned into three key components. Their methods and techniques of general nursing for alleviating symptoms of infected patients, keeping patients comfortable when they were close to death, and preventing the spread of infection.

What kind of care did nurses provide for Spanish influenza patients?

The understanding of the Spanish influenza was rather minimal, and therefore medical professionals, especially nurses, were left to use their pre-existing knowledge on fighting infectious diseases. Nurses knew that there was 'no remedy that [was] able to either cure ... or shorten the duration' of the deadly strain of influenza, and instead they had to focus on keeping their patients in the best 'hygienic condition' possible and treat complications as they arose.¹⁵⁰ Eva Luckes stated that when there was no cure, the best treatment was to provide the patient with 'the most favourable condition for self-cure'.¹⁵¹ Although nurses are often seen as the caring medical professionals that 'wear [their] heart and not [their] brain on their sleeve', their intensive medical and technical knowledge must not be

¹⁴⁸ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

¹⁴⁹ Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

¹⁵⁰ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 195.

¹⁵¹ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 26.

forgotten.¹⁵² There were no antiviral medicines available that combatted the influenza, and there were no antibiotics to treat the pneumonia that often quickly followed after the onset of the disease.¹⁵³ Therefore the physical care that was provided to infected patients ‘minute by minute’ was critical for keeping them alive.¹⁵⁴ This ‘simple’ act of providing comfort often gave nurses a sense of accomplishment, as although they could not cure the patients, they kept them alive long enough that their own immune systems could be given a chance to eradicate the infection.¹⁵⁵ The chief duties that nurses took when caring for their patients consisted of giving painkiller-based medication, taking temperatures, fixing ice packs, keeping them well hydrated and fed, and rubbing their back or chest with camphorated sweet oil.¹⁵⁶ Remedies such as aspirin, mustard plasters, Vicks VapoRub, Listerine and cough syrups were all regularly issued by skilled nurses in order to try and relieve symptoms and improve the patients’ overall condition.¹⁵⁷ Nurses would also frequently apply ice-bags to patients’ foreheads in order to suppress the intense headaches that were often a symptom of the 1918 influenza virus.¹⁵⁸ Vera Giles, a nurse who worked during the 1918 pandemic, described her daily duties during the months she spent nursing – ‘we took temperatures, washed the patients, fed them and poulticed them with poultices we made ourselves’.¹⁵⁹ Poultices were moist cloths used to try and relieve congestion. Nurses would also provide

¹⁵² Gordon, S. (2006). Beyond the bedside: what do nurses really do? *Ohio Nurses Review*, 81(4), 9.

<https://pubmed.ncbi.nlm.nih.gov/16910198/>

¹⁵³ Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

¹⁵⁴ Odom-Forren, J. (2007). Nurses: Angels of Mercy or Competent Professionals. *Journal of PeriAnesthesia Nursing*, 22(2), 81-83.

¹⁵⁵ Hile, E. (2018). *“Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master’s Thesis). Retrieved from

https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹⁵⁶ Letter from nurse to her friend at the Haskell Indian Nations University, Kansas. (October 17 1918). Bureau of Indian Affairs. Record held at: National Archives at Kansas City. Record Group 75.

<https://www.archives.gov/exhibits/influenza-epidemic/records/volunteer-nurse-letter.pdf>

¹⁵⁷ Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

¹⁵⁸ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 83.

¹⁵⁹ Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles’s memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

care outside of hospitals where possible, for example by delivering medical supplies, such as pneumonia jackets, clean linens, and calorie dense foods such as soup and custard.¹⁶⁰

Keeping patients' fevers down and ensuring they had enough fluids and food was vital to helping them fight off the deadly virus, but it was not as easy as expected.¹⁶¹ The *Staffordshire Sentinel* wrote that the Spanish influenza spread so fast because 'few people, if any, [were] quite sufficiently

nourished'.¹⁶² Proper nourishment was vital for keeping patients as healthy as possible, therefore it became a nurses job to create the perfect balance in which they kept patients nourished without over feeding and watering. Dr James Johnston, a physician who treated influenza patients during the pandemic, noted how the duration of the virus varied from a few days to several weeks, and therefore believed that the most important thing that could be provided was 'as much nourishment as possible, with, of

course, good nursing'.¹⁶³ Johnson also suggested that 'the diet should be light, one depending a good deal upon the severity of the case ... it is safer to limit the diet to fluids while the infection is still pronounced, but as soon as the crisis has passed one may increase the diet freely and fairly regularly'.¹⁶⁴ It would also make getting up for the bathroom more common, which was advised against. Eva Luckes suggested that all patients suffering from infectious diseases 'should be confined to bed during the whole course of the fever and all



Figure 3: U.S Naval History and Heritage Command. (1918). Medical Personnel Giving Treatment to an Influenza Patient [Online image]. Retrieved from <https://www.thoughtco.com/1918-spanish-flu-pandemic-pictures-4122588>

¹⁶⁰ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

¹⁶¹ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history's deadliest pandemic. shorturl.at/aolP3

¹⁶² Anonymous. (1918, July 16). How to Avoid Influenza. *Staffordshire Sentinel*, p. 2.

¹⁶³ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 92-93.

¹⁶⁴ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 86.

bodily and mental exertion must be strictly prohibited'.¹⁶⁵ Guy Beckley Stearns wrote in his *Treatment of Influenza* article that the best method of caring for influenza patients was as follows:

'Provide plenty of air; no food or liquid during the first day or so, until natural hunger returns; no solid food until temperature is normal; plenty of water; absolute quiet in bed until at least three days after the temperature has become normal'.¹⁶⁶

'Rest' was the best 'natural agent' for treating influenza as it helped patients to maintain and build their strength.¹⁶⁷ Eva Luckes emphasized the importance of rest as it placed the patients 'in the most favorable condition for self-cure'.¹⁶⁸ Keeping patients confined to their beds helped to increase the conservation of a patient's strength, however it also made other tasks increasingly difficult.¹⁶⁹ For example, since the patients were not allowed to leave their beds, keeping them clean was an immense task for nurses. Nurses would make sure to wash and dry patients using both water and alcohol sponge baths, and would remove and replace any bandages and dressings whilst also making sure their surroundings were kept clean.¹⁷⁰ The virus also caused patients to 'break into a deluge of perspiration', leaving their clothes and bedsheets soaked with sweat within minutes.¹⁷¹ Nurses would then 'remove wet garments, rub the patients dry with a warm towel and apply warm, dry clothing', all whilst keeping them under clean, warm blankets and bed covers.¹⁷² Nurses also took the duties of turning and sitting up patients in their hospital beds to allow them to breathe as freely as possible, prevent a buildup of mucus and prevent the formation of pressure sores.¹⁷³

¹⁶⁵ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 195.

¹⁶⁶ Stearns, G. B. (1919). *Treatment of influenza*. New York Homeopathic Medical College.

<https://archive.org/details/100912258.nlm.nih.gov/page/n5/mode/2up?q=nurse>. 3.

¹⁶⁷ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 27.

¹⁶⁸ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 26.

¹⁶⁹ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 86.

¹⁷⁰ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

¹⁷¹ Hardy, C. Talking history. Albany (NY): State University of New York; [cited 2010 Apr 8]. I remember when: what became of the influenza pandemic of 1918 [Internet] producer. Available

from: <http://www.albany.edu/talkinghistory/ind/hardy-remember-when-influenza-epidemic.mp3>.

¹⁷² Fantus, B. (1918). *Clinical observations on influenza*. Chicago: American Medical Association.

<https://archive.org/details/101510335.nlm.nih.gov/page/n3/mode/2up?q=nurse>. 6.

¹⁷³ Laurent, C. (2019). *Rituals & Myths in Nursing: A Social History*. Pen and Sword. shorturl.at/fb139

The importance of keeping patients comfortable in their most vulnerable hours.

The act of keeping patients medicated, fed, watered and clean helped to prevent the onset of secondary bacterial pneumonia, which was often the main cause of death in influenza patients.¹⁷⁴ However, sometimes it was simply not possible to keep patients alive, and therefore it became the nurses' duty to keep patients as comfortable as possible in their final days and hours. Odom-Forren has argued that many influenza nurses would 'realize a patient [was] going south before the objective signs and symptoms', which allowed them extra time to try and bring patients back from the cusp of death.¹⁷⁵ In most cases, a death caused by the virus was 'messy and painful, but essentially private'.¹⁷⁶ Patients were segregated from their friends and families, and they would die in hospitals alone, or in segregated bedrooms in their own homes. In either case, it was the nurses job to provide care, love, and companionship for patients in their final hours, and to try and relieve the fear of the inevitable death that was approaching.

Eva Luckes stated that one of the most important duties a nurse could provide for a dying patient was 'a calm, hushed presence'.¹⁷⁷ Nurses have often been described as 'angels of mercy' who would bring 'rest' and understanding to those who needed it, so they could feel at peace in their final hours.¹⁷⁸ Nurses would make sure that patients were well covered and kept warm, but relieve them of clothing when bouts of perspiration would begin, whilst also regulating the temperature of the room to keep the patient as comfortable as possible.¹⁷⁹ Providing the freedom of breathing fresh air was seen as a great importance both physically and mentally. Allowing a patient to breathe fresh air made them feel connected to the world outside their hospital bed, even if their life may be short lived thereafter.¹⁸⁰ Dr James

¹⁷⁴ Morens, D. M., Taubenberger, J. K., & Fauci, A. S. (2008). Predominant Role of Bacterial Pneumonia as a Cause of Death in Pandemic Influenza: Implications for Pandemic Influenza Preparedness. *The Journal of Infectious Diseases*, 198(7), 962-970.

¹⁷⁵ Odom-Forren, J. (2007). Nurses: Angels of Mercy or Competent Professionals. *Journal of PeriAnesthesia Nursing*, 22(2), 81-83.

¹⁷⁶ Quinn, T. (2008). *Flu: A Social History of Influenza*. London: New Holland Publishers.

¹⁷⁷ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 43.

¹⁷⁸ Odom-Forren, J. (2007). Nurses: Angels of Mercy or Competent Professionals. *Journal of PeriAnesthesia Nursing*, 22(2), 81-83. Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 43.

¹⁷⁹ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 83.

¹⁸⁰ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 83.

Johnston repeatedly argued the importance of 'good nursing', especially when caring for dying patients, stating that it could never be 'overestimated'.¹⁸¹

Due to the infectious nature of the Spanish influenza, caring for, and even being close to, infected patients was often feared by other members of society. However, nurses continued to provide care and create a 'great deal of personal relationships' between themselves and their patients.¹⁸² Elizabeth Hile has argued that 'even under the most devastating adverse circumstances, nurses were achieving what they had set out to do: they were caring for those that needed them'.¹⁸³ Elizabeth Cockayne highlighted the giving nature of nurses, emphasizing that nurses were not, for the most part, deterred by the nature of the contagious disease. Cockayne was asked if she believed there were any differences between general nursing and infectious disease nursing, her response was as follows: 'No, I don't think so ... I think I was always wanting to give; I was always wanting to nurse and to do what was helpful to them, no matter what it was'.¹⁸⁴ Cockayne's response summarises the professionalism and pride that nurses took in caring for their patients, even if they could not always keep them alive.

Nurses' methods of preventing further infection.

Nurses were some of the first front-line workers to be exposed to the Spanish influenza, yet they continued to put themselves on the line every day knowing that they could contract the exact same disease that was killing their patients. In New Zealand, it was made clear that alongside caring for their patients, it was 'the duty of a nurse to take every possible precaution for the protection of the community as well as herself'.¹⁸⁵ Isla Stewart, a British

¹⁸¹ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 83.

¹⁸² Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P32-33. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

¹⁸³ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

¹⁸⁴ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P32-33. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

¹⁸⁵ Roddick, J. A. (2006). Delirium and fever in the antipodes: Nursing and the 1918 influenza epidemic in Dunedin Hospital, New Zealand. *Journal of Research in Nursing*, 11(4), 357-370. Anonymous. (1919). Nursing Echoes. *The British Journal of Nursing*, 62, 138. <https://rcnarchive.rcn.org.uk/volumes/62/Volume%2062%20Page%20138>

hospital matron, continuously stressed the importance of cleanliness when caring for patients with infectious diseases, stating that nurses ‘must never forget that the slightest carelessness on her part may result in others catching the disease’.¹⁸⁶ Stewart constantly reminded her students that they must always ‘think of [their] patients, the public, and [themselves]’.¹⁸⁷ Nurses had to be fearless. They had to be incredibly careful and aware of their surroundings but also acknowledge that they may catch the disease whilst caring for their patients. Eva Luckes made the following comment that summarised the importance of nurses respecting the infectious nature of the virus, as it was crucial to protect both themselves and their patients and not fear becoming sick:

‘There are two extremes that nurses must avoid with regard to infection as it concerns themselves – the cowardly dread of it on the one hand, and the careless disregard of it on the other ... Women who fear infection for themselves are greatly to be pitied; but they have no business to be nurses, and the sooner they understand that they have mistaken their vocation the better it will be for themselves, and all concerned’.¹⁸⁸

Although the exact understanding of how the disease spread was not fully understood, medical professionals knew the importance of keeping surfaces, equipment, and hands clean at all times. The extreme amount of influenza cases that flooded the fever wards caused hospitals to become ‘arenas of pandemonium’.¹⁸⁹ Therefore it was crucial that nurses washed their hands thoroughly between any interactions with patients to prevent the spread of the infection. Nurses would first wash their hands in water, followed by a second wash in antiseptic solution, then finished by drying their hands completely using paper towels that would be collectively burnt by the end of the day.¹⁹⁰ Nurses would also keep their fingernails short and ‘use nailbrushes before eating a meal and before tending to

¹⁸⁶ Stewart, I., & Cuff, H. E. (1899). *Practical Nursing*. Blackwood.
<https://archive.org/details/b21535942/page/210/mode/2up>. 211.

¹⁸⁷ Stewart, I., & Cuff, H. E. (1899). *Practical Nursing*. Blackwood.
<https://archive.org/details/b21535942/page/210/mode/2up>. 211.

¹⁸⁸ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 209.

¹⁸⁹ Roddick, J. A. (2006). Delirium and fever in the antipodes: Nursing and the 1918 influenza epidemic in Dunedin Hospital, New Zealand. *Journal of Research in Nursing*, 11(4), 357-370.

¹⁹⁰ Wood, H. C. (1919). *The control of epidemic influenza in a large institution*. New York: William Wood & Company. <https://archive.org/details/101496415.nlm.nih.gov/mode/2up?q=nurses>. 11.

patients'.¹⁹¹ Any time anything was touched by a patient, it would be wiped down using boiling water and disinfectants, and if it could not be cleaned, it would be incinerated immediately.¹⁹² As they were at risk of being infectious themselves, nurses and doctors would also voluntarily quarantine in order to help stop the spread of the virus.¹⁹³ V. Giles reported that nurses in Warrambool Hospital were 'not allowed to go home' when working in the isolation wards.¹⁹⁴

Although most cleaning was done by ward maids, nurses were still held responsible for the level of cleanliness within the wards, and nurse probationers were also given a lot of cleaning to do. Keeping hospitals clean was a mammoth task, but nurses tried their best to stop cross-contamination in any way they could. One way they tried to combat the spread of infection was through the use of masks.¹⁹⁵ Some medical professionals, such as B. Fantus, a Hungarian Jewish-American physician, did not believe that face masks were needed by nurses. Fantus argued that 'face masks were useless in protecting one against the infection ... shown by the fact that nurses, who of all people were especially given to wear them, were notoriously prone to [becoming] victims of the infection'.¹⁹⁶ Although there was no sufficient evidence yet as to

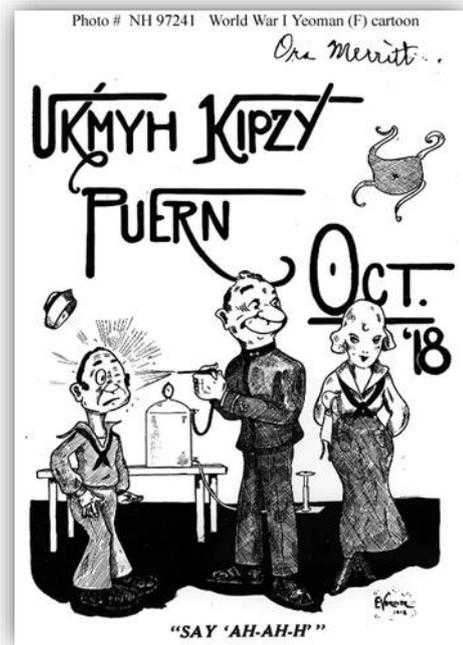


Figure 4: Verdier, E (1918). A Cartoon That Shows a Mask as a Countermeasure [Online image]. Retrieved from <https://www.thoughtco.com/1918-spanish-flu-pandemic-pictures-4122588>

¹⁹¹ Stewart, I., & Cuff, H. E. (1899). *Practical Nursing*. Blackwood. <https://archive.org/details/b21535942/page/210/mode/2up>. 211.

¹⁹² Wood, H. C. (1919). *The control of epidemic influenza in a large institution*. New York: William Wood & Company. <https://archive.org/details/101496415.nlm.nih.gov/mode/2up?q=nurses>. 11.

¹⁹³ Anonymous. (1918, October 9). Eleven Nurses Have Influenza. *San Francisco Examiner*. 9. <https://quod.lib.umich.edu/f/flu/0010flu.0009.100/1/--eleven-nurses-have-influenza?page=root;rgn=title;size=175;view=image;q1=nurses>. Retrieved 10/2020.

¹⁹⁴ Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles's memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

¹⁹⁵ Anonymous. (1919). *Nursing Echoes*. *The British Journal of Nursing*, 62, 138. <https://rcnarchive.rcn.org.uk/volumes/62/Volume%2062%20Page%20138>

¹⁹⁶ Fantus, B. (1918). *Clinical observations on influenza*. Chicago: American Medical Association. <https://archive.org/details/101510335.nlm.nih.gov/page/n3/mode/2up?q=nurse>. 4.

the level of the protection that masks provided, many believed they were useful, especially in a hospital setting.¹⁹⁷ J.B Herrick, an American physician and professor of medicine, believed that there could be ‘no doubt that a properly constructed mask’ would ‘lessen the danger of droplet infection for nurses, attendants and other nearby patients’.¹⁹⁸ The *Tewkesbury Register* also reported the importance of ‘wearing a mask and glasses when nursing or in attendance of a person suffering from influenza’ to help ‘avoid infection’.¹⁹⁹ Whenever tending to patients, both in hospitals and in their own homes, nurses would wear gauze masks to add another level of protection. Although the effectiveness of wearing a mask was debated by some, many hospitals, especially in the United States, made mask wearing a mandatory act, in hope of preventing nurses from contracting the Spanish influenza.²⁰⁰ The Red Cross also made mask wearing a mandatory requirement for their nurses. Nurses would carry approximately sixteen masks at all times, and would have two bags specifically for storing their gauze masks, ‘one for fresh and one for soiled’.²⁰¹ The masks would be cleaned daily by boiling them and leaving them to dry, and once the mask was soiled and no longer cleanable, it would be disposed of and burnt to prevent the spread of the disease through indirect contamination.²⁰² In Illinois, there were reports of nurses running out of the provided masks, and would instead create makeshift masks out of six square pieces of gauze, that would be layered together and wrapped in a paper towel which would be tied over the nurses’ face and pinned into the nurses’ hair to create a tighter seal.²⁰³ The use of rubber gloves has not been mentioned much in the available history, however an article in *The British Journal of Nursing* stated that although ‘no one seems to

¹⁹⁷ Anonymous. (1919). Influenza and its prevention. *The British Journal of Nursing*, 62, 147–148. <https://rcnarchive.rcn.org.uk/data/VOLUME062-1919/page147-volume62-08thmarch1919.pdf>. Anonymous. (1939). The Public Health: Memorandum on Influenza. *The British Journal of Nursing*, 87, 290. <https://rcnarchive.rcn.org.uk/data/VOLUME087-1939/page290-volume87-december1939.pdf>. Spinney, L. (2017). *Pale Rider: The Spanish Flu of 1918 and how it changed the world*. London: Penguin Random House. 97.

¹⁹⁸ Herrick, J. B. (1919). *Treatment of influenza by means other than vaccines and serums*. Chicago: American Medical Association. <https://archive.org/details/101493938.nlm.nih.gov/page/n3/mode/2up>. 2.

¹⁹⁹ Anonymous. (1919, March 1). How to Escape Flu. *The Tewkesbury Register, and Agricultural Gazette*, p. 6.

²⁰⁰ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

²⁰¹ Foley E. (1918) Department of public health nursing, Illinois. *American Journal of Nursing* 1918;19: 189-200.

²⁰² Foley E. (1918) Department of public health nursing, Illinois. *American Journal of Nursing* 1918;19: 189-200.

²⁰³ Foley E. (1918) Department of public health nursing, Illinois. *American Journal of Nursing* 1918;19: 189-200.

have suggested the use of rubber gloves in nursing cases of influenza pneumonia ... they must certainly be a protection'.²⁰⁴

The importance of professionalism within the nursing profession.

Whilst nurses were hard at work fighting to keep their patients alive, the nursing profession also had to fight its own battles of becoming a respected profession. In the early twentieth century the nursing profession was still in its infancy, even in places such as New Zealand that first introduced the registration of nurses in 1902. Most nurses were still fighting to be appreciated by the medical profession and the rest of society.²⁰⁵ Therefore the pandemic created an opportunity for nurses to step up to the podium and let their voices be heard and show that nurses were more than just doctors' assistants. Nurses had battled to prove that they were more than just a 'simple aid to the physician' that were 'available to take orders when necessary' for years, and the Spanish influenza pandemic became the 'ultimate test' for them to prove their worth.²⁰⁶ Nurses had often been looked down on in comparison to their male counterparts - doctors and physicians - and therefore the professionalism and reputation of nurses was in dire need of improvement. They had to demonstrate that they could look after themselves whilst also

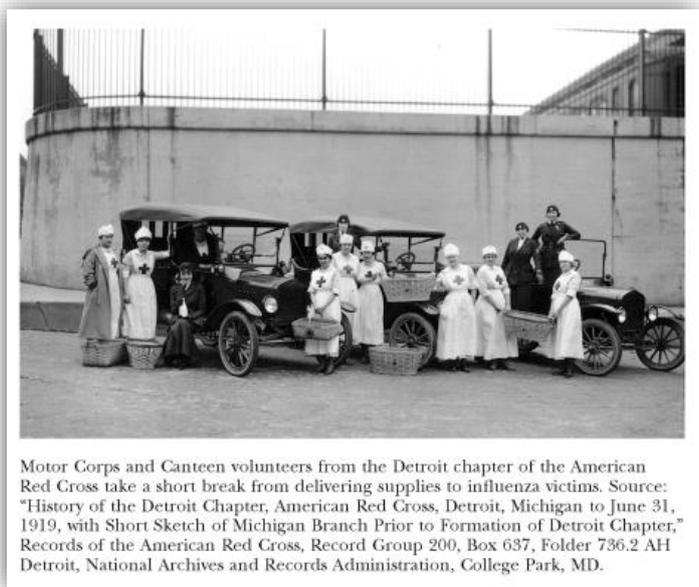


Figure 5: US National Library of Medicine National Institutes of Health. (1919). [Image]. PMC.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2862330/>

²⁰⁴ Anonymous. (1919). Nursing Echoes. *The British Journal of Nursing*, 62, 138.
<https://rcnarchive.rcn.org.uk/volumes/62/Volume%2062%20Page%20138>

²⁰⁵ Roddick, J. A. (2006). Delirium and fever in the antipodes: Nursing and the 1918 influenza epidemic in Dunedin Hospital, New Zealand. *Journal of Research in Nursing*, 11(4), 357-370.

²⁰⁶ D'Antonio, P. (2010). *American Nursing: A History of Knowledge, Authority, and the Meaning of Work*. Baltimore: Johns Hopkins University Press. 38. Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

caring for the sick no matter their environment; working both in patient's own homes and within hospitals.²⁰⁷ Therefore proving to both themselves and the rest of society that a female dominated profession did not have to constantly rely on male doctors and surgeons for instructions.

As hospitals across the world overflowed, public health nurses and visiting nurses took the brunt of the responsibility for caring for the community.²⁰⁸ For members of society who had no family members to care for them, many asked for help and home visits from professional public nurses. In the United States, the Visiting Nurse Association recorded that in October 1918, the number of home visits increased from the usual 12,000 per month to 25,759.²⁰⁹ Although this put a huge strain on the demand for nurses, it provided the profession with a 'time of great professional fulfilment' as they were able to prove their capabilities to patients who had never relied on public nurses beforehand.²¹⁰ Hile has argued that it was a time in which nurses felt a great 'sense of accomplishment' as they could provide care and comfort when nobody else could.²¹¹ Therefore proving their worth within the medical community and improving the professionalism of the role. It was this sense of opportunity caused by the prevailing pandemic that enhanced the 'gradual improvement' of the state of the nursing profession and, in turn, was noticed by the rest of society, including government officials.²¹²

²⁰⁷ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

²⁰⁸ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

²⁰⁹ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

²¹⁰ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

²¹¹ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

²¹² Committee minutes 1918-1920, held on 28th October 1918. LG/AL5/56, The Royal London Hospital Archives.

However, no matter how hard nurses worked, their list of responsibilities continued to increase with no sign of easing.²¹³ Nurses in Britain were not only tasked with caring for their patients, but also keeping beds and wards clean, personally scrubbing the floors of dirt, blood, and bodily fluids.²¹⁴ Although some cleaners had started to be implemented into hospitals, much of the cleaning was still left to the nurses, which took away precious time from their caring responsibilities. This was just one of the reasons that nurses had to stand their ground, make their own decisions, and make their voices heard. Patricia D'Antonio made the undeniable statement that nurses were capable of both making their own decisions and following orders, but 'not mindlessly or rigidly ... nurses would be watchful and waiting – but when necessary, they would also act immediately, forcefully, and competently'.²¹⁵ But in an era in which nurses were 'neither able to act independently of orders nor use their own initiative in the care of the sick', change was drastically needed.²¹⁶ Nurses knew they were the key workers of the pandemic, and that in order to keep as many patients alive as possible, nurses had to gain more autonomy over their work and become the voice of reason during the pandemic. And in such, nurses took initiative and argued until they were heard, allowing them to 'prove their worth and make the changes that arguably became the difference between life and death for their patients.'²¹⁷

²¹³ Hile, E. (2018). *Like Brave Soldiers: Nursing and the Spanish Influenza Epidemic of 1918 in the United States*. (Master's Thesis). Retrieved from

https://etd.ohiolink.edu/!etd.send_file?accession=bgsu1522409688878777&disposition=inline

²¹⁴ Luckes, E. C. E. (1890). Trained Nursing at the London Hospital. *The New review; London*, 3(17), 289-304.

²¹⁵ D'Antonio, P. (2010). *American Nursing: A History of Knowledge, Authority, and the Meaning of Work*. Baltimore: Johns Hopkins University Press. 38.

²¹⁶ Roddick, J. A. (2006). Delirium and fever in the antipodes: Nursing and the 1918 influenza epidemic in Dunedin Hospital, New Zealand. *Journal of Research in Nursing*, 11(4), 357-370.

²¹⁷ Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

The organisation, decision making and leadership of Spanish influenza nurses.



Figure 6: U.S Naval History and Heritage Command. (1918). A Crowded Barracks with Beds Separated by Sneeze Screens [Online image]. Retrieved from <https://www.thoughtco.com/1918-spanish-flu-pandemic-pictures-4122588>

To provide more ‘damage control’ and prevent further deaths due to the pandemic, nurses were able to implement their own ideas within hospitals and the public health sector. Nurses always tried, where they could, to ‘organize aid at a moment’s notice’ and provide insightful advice that would improve the outcome of the pandemic.²¹⁸ One of the biggest decisions that nurses suggested and handled was the decision to segregate influenza patients onto their own wards, away from other sections of the hospitals. Although the exact method that influenza spread through was unknown, nurses still knew they had to protect the rest of the hospital from the infectious disease. Therefore, in many hospitals it was agreed that influenza patients could be segregated as a major precaution of further spread of infection.²¹⁹ Johnson, a doctor during the pandemic, stated how this method was ‘almost an impossibility’ during the stress of the last pandemic, but strong-willed and organised nurses were able to make it happen during the Spanish influenza pandemic. Nurses also called for the patients suffering from secondary pneumonia to be further segregated and to provide ‘sneeze screens’ between each bed to add another layer of protection for the vast amounts of patients that would be occupying one ward. ‘Sneeze screens’ were a ‘simple’ method that were easy to carry out and consisted of a bedsheet that would be stretched between each bed to prevent the ‘fine spray which a heavy cough [would] always produce from spreading over the next two or three beds.’²²⁰

²¹⁸ Vaughan, W. T. (1921). *Influenza; an epidemiologic study*. Baltimore, The American Journal of Hygiene. <https://archive.org/details/influenzaepidemi00vaug/page/96/mode/2up?q=nurse>. 237.

²¹⁹House Committee minutes 1918-1920, held on 28th October 1918. LG/AL5/56, The Royal London Hospital Archives.

²²⁰ Johnston, J. I. (1919). *Studies on epidemic influenza: comprising clinical and laboratory investigations*. The University of Pittsburgh. <https://archive.org/details/35010560R.nlm.nih.gov>. 86.

Some nurses also made the hard decision to segregate themselves from the rest of society. It was known that the 'segregation of those who [were] ill and the prohibiting of public gatherings [would] lessen the number of contact infections'.²²¹ An example of this is shown through a group of nurses in Baltimore, who were in contact with the infected every day



Figure 7: U.S Naval History and Heritage Command. (1918). Rows of Beds Separated by Sneeze Screens in a Hospital [Online image]. Retrieved from <https://www.thoughtco.com/1918-spanish-flu-pandemic-pictures-4122588>

and made the powerful decision to segregate themselves. For the entirety of the pandemic they would only come into contact with each other, the hospital staff and the patients on their wards.²²² In Baltimore there were also reports of nurses that moved into the 'nurse houses' of hospitals, and communication between hospital nurses and the outside world was 'almost completely cut off' to prevent further spread of the infection.²²³ Nurses also made sure that they could provide uninterrupted attention to the sick, therefore early in the outbreak, nurses agreed with the Ministry of Health that 'various inspectors [would be] put on twenty-four-hour duty to provide food, fuel, and other necessities to stricken families' so that nurses could focus on caring for their sick patients, without leaving the families in a worrisome position.²²⁴

Another key decision that was made by nurses across the world, specifically in the United States, was to prohibit all private nursing ventures. The Spanish influenza badly affected everybody it infected, no matter their financial status, and therefore nurses knew that it would be unfair to prioritise those with money. In 1917, before the pandemic hit, there were only 581 applications for private nursing that were refused, whereas in the month of

²²¹ Herrick, J. B. (1919). *Treatment of influenza by means other than vaccines and serums*. Chicago: American Medical Association. <https://archive.org/details/101493938.nlm.nih.gov/page/n3/mode/2up>. 2.

²²² Bloomfield, A. L., & Harrop, G. A. (1919). *Clinical observations on epidemic influenza*. Baltimore University. <https://archive.org/details/101581780.nlm.nih.gov/page/n1/mode/2up?q=nurses>. 5.

²²³ Bloomfield, A. L., & Harrop, G. A. (1919). *Clinical observations on epidemic influenza*. Baltimore University. <https://archive.org/details/101581780.nlm.nih.gov/page/n1/mode/2up?q=nurses>. 5.

²²⁴ Anonymous. (1918, October 10). Sunshine Aid to Combat Flu. *The Globe*, p. 6. Anonymous. (1918, October 11). Can Keep Down the Morality. *The Globe*, p. 6.

November 1918 alone there were 1121 applications for nurses refused.²²⁵ Instead, the number of visiting nurses, public health nurses, Red Cross and Blue Circle nurses were vastly increased across the world to help those in need. This also meant that hospitals did not have to worry about paying more nurses' wages, as many were covered by the Red Cross.²²⁶ Many matrons also became effective organizers during the pandemic, teaching their graduate nurses how to properly supervise pupil nurses, medical students and lay volunteers to make sure they were providing the largest output of care they could under the 'extraordinary strain' the pandemic put upon them.²²⁷ Maclean, a nurse who worked in New Zealand during the pandemic, wrote of her experiences in her memoir *Nursing in New Zealand: History and Reminiscences*.²²⁸ Maclean wrote about how she spent whole days organizing emergency hospitals in schools, halls and even an old steamship.²²⁹ Nurses just like Maclean worked tirelessly through the 'nightmare of a time' that the pandemic created, being more than just nurses, but also taking control and making crucial decisions, something that nurses had not been given the opportunity to do before.²³⁰ Yet, the changes they made were life changing. They became the differences between life and death for patients and they reduced the chances of further infection. Nurses were not the only people to recognise their own hard work; and thus, after the pandemic was over, many members of the medical profession were left in awe of the work of nurses.

Nurses in every country worked together to fight against the influenza virus and used every caring technique that they had learned. They worked alongside doctors to provide the care that doctors could not and provided a boost of morale and beacon of hope for the sick and their families. Together, they became the first and most effective line of defence against the virus. Yet they continued to face an uphill battle as the dire need for nurses increased, but the number of nurses depleted. Nurses were the key for surviving the pandemic.

Philadelphia health commissioner Krusen remarked that 'doctors we have enough of.

²²⁵ House Committee minutes 1918-1920, held on 28th October 1918. LG/AL5/56, The Royal London Hospital Archives.

²²⁶ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

²²⁷ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

²²⁸ Maclean, H. (1932). *Nursing in New Zealand: History and Reminiscences*. Wellington: Tolan Publishing. 227.

²²⁹ Maclean, H. (1932). *Nursing in New Zealand: History and Reminiscences*. Wellington: Tolan Publishing. 227.

²³⁰ Maclean, H. (1932). *Nursing in New Zealand: History and Reminiscences*. Wellington: Tolan Publishing. 227.

Supplies are plentiful, buildings are offered to us everywhere. We have many beds that might be opened to patients. But without enough nurses to tend those we already have we are helpless'.²³¹ And such, the secondary fight for gaining more nurses became just as important as the primary fight against the virus.

²³¹ Anonymous. No increase reported in influenza deaths. In: Unidentified newspaper clipping, Visiting Nurse Society scrapbook. Cited in: Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112. Available at shorturl.at/mGO14. Accessed 04/2020.

Chapter Three: Nursing Crisis: The lack of nurses during the 1918 Spanish influenza pandemic

Nobody was prepared for the tough road ahead that the Spanish influenza paved. The virus 'devastated millions of people around the world' from every occupation; from tram drivers and shopkeepers to doctors and undertakers. Many were getting sick and could no longer work their essential jobs.²³² Arlene Keeling perfectly summarised this crisis, stating that as more people got sick, 'social infrastructure crumbled'.²³³ Even major cities that had well-organised health departments struggled to handle the continuously increasing number of sick patients. This meant that smaller cities and rural areas were left 'uncovered' and defenceless as their chances of getting more medical staff and supplies were low.²³⁴ As more people continued to contract the deadly virus, the whole medical profession was stretched incredibly thin. Every doctor was 'swamped' by calls from both patients at home and within hospitals and they continuously asked for 'further assistance of trained nurses'.²³⁵

There were no longer specialists or students, just 'weary doctors' and nurses doing everything they could to help.²³⁶ Ambulances were busy day and night, constantly bringing the sick from their homes into hospitals.²³⁷ Undertakers could not do their job quick enough as bodies piled up in hospitals and in the streets.²³⁸ They could not 'turn the coffins out or

²³² Milbrath, G. (2020). The US Army School of Nursing and the 1918 influenza pandemic: cooperation and collaboration at Camp Grant, Illinois. *Health Emergency and Disaster Nursing*, 7, 32–35.

https://www.jstage.jst.go.jp/article/hedn/advpub/0/advpub_2019-SP02/article. Accessed 03/2021.

²³³ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

²³⁴ Geister, J. (1957). The flu epidemic of 1918. *Nursing Outlook*, 5(10), 582-584.

²³⁵ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA_1918.45.aspx. Anonymous. (1918, November 25). Fresh Air Cures. *Nottingham Journal*, p. 3.

²³⁶ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

²³⁷ Doty, P. (1919). A retrospect of the influenza epidemic. *Public Health Nurse*, 22(12), 949-957

²³⁸ Tourscher, F. E. (1919). Work of the Sisters During the Epidemic of Influenza October 1918. *Records of the American Catholic Historical Society*, 30(1), 1–128.

<https://collections.nlm.nih.gov/bookviewer?PID=nlm:nlmuid-35010720R-bk>. Accessed 02/2021. Schoch-Spana, M. (2001). "Hospital's Full-Up": The 1918 Influenza Pandemic. *Public Health Reports*, 116(2), 32–34.

<https://journals.sagepub.com/doi/pdf/10.1093/phr/116.S2.32>

bury the people quick enough'.²³⁹ There were simply not enough hands to help each patient, and therefore many households were left with no one to care for them.²⁴⁰ Clean linens, food and water were crucial for combatting the flu, but with rising numbers of patients it became even more difficult to obtain these much-needed supplies. Medicines that were being used to ease the pain were running out, and the fresh laundry and food were being used as quickly as they were being made.²⁴¹ As shortages continued during the pandemic, it became apparent that the biggest issue by far was the lack of nurses. They were vital for keeping the mortality rate as low as possible and for keeping patients comfortable in their final hours both in their homes and in hospitals. Neither enough nurses nor orderlies were available, and although the remaining nurses were working incredibly hard, it remained insufficient for handling the new 'plague' that ravaged the world.²⁴² There was nobody else to ask for help, and the realisation that nurses were irreplaceable became common knowledge.²⁴³

The lack of nurses during the pandemic was by far the biggest issue that every community faced, and the need for more trained nurses became 'most evident'.²⁴⁴ As the number of patients increased, the number of nursing staff remained the same.²⁴⁵ A prime example of this is shown through a report written by the sisters of Notre Dame de Namur regarding a French hospital that accommodated about fifty-five influenza patients, yet there was only

²³⁹ Letter from the Wife of E S Bennett to E S Bennett. (28 October 1918). In Influenza Pandemic: East London IWM 96/3/1 Collection at the National Archives. Available at:

http://www.nationalarchives.gov.uk/pathways/firstworldwar/aftermath/p_influenza.htm

²⁴⁰ Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

²⁴¹ University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>

²⁴² Letter from the Wife of E S Bennett to E S Bennett. (28 October 1918). In Influenza Pandemic: East London IWM 96/3/1 Collection at the National Archives. Available at: Wood, H. C. (1919). *The control of epidemic influenza in a large institution*. New York: William Wood & Company.

<https://archive.org/details/101496415.nlm.nih.gov/mode/2up?q=nurses>. 2-3.

http://www.nationalarchives.gov.uk/pathways/firstworldwar/aftermath/p_influenza.htm

²⁴³ Cape Town Correspondent. (1918, November 28). The Spanish Death in South Africa: Stricken Cape Town. *The Manchester Guardian*. <https://www-proquest-com.libaccess.hud.ac.uk/docview/476199447?pq-origsite=summon>

²⁴⁴ Anonymous (1918). *Labors of the Sisters of Notre Dame de Namur during the Influenza Epidemic of October 1918*. <https://digital.library.villanova.edu/Item/vudl:635411#?c=&m=&s=&cv=4&xywh=-2201%2C236%2C6445%2C2777>

²⁴⁵ Doty, P. (1919). A retrospect of the influenza epidemic. *Public Health Nurse*, 22(12), 949-957

one trained nurse and one or at most two assistants to tend to the sick.²⁴⁶ Such difficulties affected every developed nation - including Britain, its dominions and the United States. Both the medical staff and the public saw the negative effects of the shortage, but it was not an easy problem to fix. Mrs Elton, a nurse who worked on a fever ward during the pandemic, stated that the whole nursing profession was aware of the shortages. Elton told her interviewer that they could not 'just put an advert for another nurse at a minute's notice' and that instead they just had to 'work extra hours'.²⁴⁷ As more nurses fell sick with the virus themselves, professional nurses were stretched thin, as they worked long hours with skeleton staff. Hospitals and homes were 'deluged with flu victims' and the need for nurses became insatiable.²⁴⁸ This lack of nurses was partly due to uncontrollable events such as the ongoing First World War, however, the nurse shortage also wasn't helped by its own profession.

This chapter will discuss the reasons for the lack of nurses in Britain, its dominions, and the United States during the pandemic, including the nurses fighting on the front line of the First World War, the issue of racial segregation in the nursing profession and the lack of nurses due to death and fear of the pandemic. It will then analyse the ways that governments and nurses themselves worked to improve and alleviate the shortage of nurses.

²⁴⁶ Anonymous (1918). *Labors of the Sisters of Notre Dame de Namur during the Influenza Epidemic of October 1918*. <https://digital.library.villanova.edu/Item/vudl:635411#?c=&m=&s=&cv=4&xywh=-2201%2C236%2C6445%2C2777>

²⁴⁷ Elton, Mrs. Oral History Interview conducted by Christopher Maggs. T/12A. p12. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

²⁴⁸ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

Depleted numbers of nurses due to the First World War

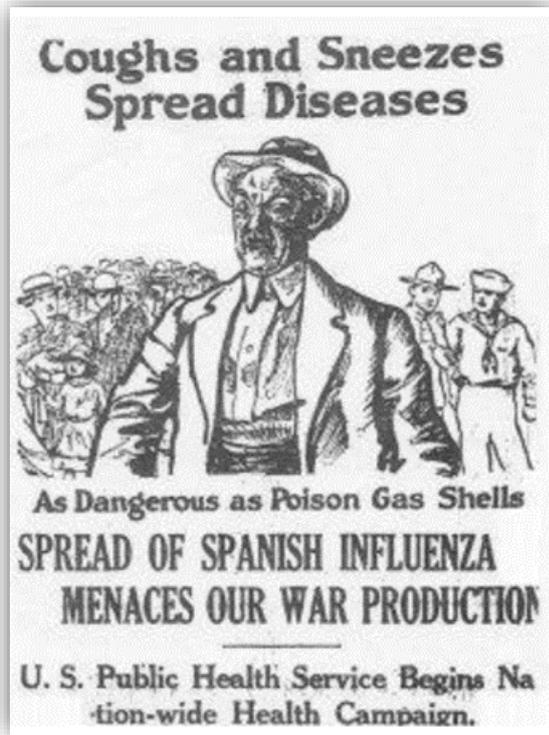


Figure 8: A warning posted in a 1918 issue of the *New York Times*

http://www.nwabr.org/studentbiotech/winners/studentwork/2006/WB_SC_Rimbakusumo/multimedia/spanflu2.jpg

drastically lower than what was needed.²⁵¹ During the war, over 10,000 American nurses were sent to serve on the Western Front, and over 1,500 served in the US Navy.²⁵² The vast majority of graduate nurses were also deployed to military camps both at home and abroad to assist in the war effort.²⁵³ The same shortage of nurses was seen across the world as the war continued to demand for more nurses. In Britain, there were at least 17,000 trained

Arguably the most well-known reason for the lack of nurses in the United States, Europe, and most other continents during the 1918 pandemic was due to the ongoing First World War. The pandemic was initially under-reported by news outlets, supposedly to reduce the risk of lowering morale for those at home.²⁴⁹ The influenza was initially seen more as a hinderance to the war. As indicated in the propaganda posters of the time, it quickly became apparent that this was not just ‘an ordinary flu’, but something much more than that, something that needed a lot more manpower to overcome.²⁵⁰ As so many ‘veiled warriors’ were healing soldiers on the front line, the number of nurses who were caring for influenza patients at home were

²⁴⁹ Anonymous. (2020, April 18). *How the Spanish flu of 1918–20 was largely forgotten*. The Economist. <https://www.economist.com/international/2020/04/18/how-the-spanish-flu-of-1918-20-was-largely-forgotten>

²⁵⁰ Illing, S. (2020, April 10). *The most important lesson of the 1918 influenza pandemic: Tell the damn truth*. VOX. <https://www.vox.com/coronavirus-covid19/2020/3/20/21184887/coronavirus-covid-19-spanish-flu-pandemic-john-barry>

²⁵¹ Hallett, C. E. (2014). *Veiled Warriors: Allied Nurses of the First World War*. Oxford.

²⁵² Sarnecky, M. T. (1999). *A History of the U.S. Army Nurse Corps*. University of Pennsylvania Press. 92.

Hammons, M. (2016). *The History of the U.S. Army Nursing Corps*. Veteran Aid. Retrieved February 2020, from <https://www.veteranaid.org/blog/2016/06/17/the-history-of-the-u-s-army-nursing-corps/>

Jones, M. M. (2018, July 3). *American Nurses in World War I*. Public Broadcasting Service (PBS).

<https://www.pbs.org/wgbh/americanexperience/features/the-great-war-american-nurses-world-war-1/>

²⁵³ Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

nurses serving as military nurses at home and overseas.²⁵⁴ Nearly a quarter of New Zealand's registered nurses were on overseas wartime service at that time.²⁵⁵ In Canada, over 3,000 nurses served on the home front, and in Australia over 2,000 nurses were deployed in the military.²⁵⁶ The large numbers of nurses serving in the war left civilian hospitals across the world seriously depleted.²⁵⁷ The *Globe* reported that London was left 'suffering from a dearth of trained nurses' due to the absence of nurses as they were on war service abroad.²⁵⁸

Miss Cockayne, a British nurse who worked during the pandemic, said that she had considered a career as a nurse in the armed forces, but knew that 'always a few people [had to be] left behind that [could] work'.²⁵⁹ The nurses who did remain at home were mainly working in major cities in the busiest hospitals. This was specifically seen in the United States as, with a few exceptions, there were no nursing services available for the large number of people living on farms and in more rural areas.²⁶⁰ Yet these numbers proved to be insufficient, and a common message began to be heard across the world: 'you can send all the doctors you want, but not one nurse'.²⁶¹ There was only so much that doctors and surgeons could do, yet nurses proved irreplaceable. Their knowledge, skills and expertise were vital for keeping the death count of influenza victims as low as humanly possible. The combination of a First World War and one of the deadliest pandemics in history revealed that there was an 'alarming shortage of nurses' across the world, and that something drastically needed changing.²⁶²

²⁵⁴ Fell, A. S., & Hallett, C. E. (2013). *First World War Nursing: New Perspectives*. Routledge.

Anonymous. "Women's Auxiliary Army Corps". National Archives. <https://www.nationalarchives.gov.uk/help-with-your-research/research-guides/womens-army-auxiliary-corps-service-records-1917-1920/>. Retrieved 17th July 2021.

²⁵⁵ Rice, G.W. (2005). *Black November: The 1918 Influenza Pandemic in New Zealand* (2nd ed.). Christchurch: Canterbury University Press. 231.

²⁵⁶ Gossage, C. (1991). *Greatcoats and Glamour Boots: Canadian Women at War (1939–1945), Revised Edition*. Durdurn Press Limited. Anonymous. (2021, May 6). *1918: Australians in France - Nurses - 'The roses of No Man's Land'*. Australian War Memorial. <https://www.awm.gov.au/visit/exhibitions/1918/medical/nurses>

²⁵⁷ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112. Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

²⁵⁸ Anonymous. (1919, February 19). Dearth of Nurses. *Globe*, p. 7.

²⁵⁹ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P35. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

²⁶⁰ Kalisch, I, & Kalisch, B. (1986). *The advance of American nursing* (2nd ed.). Boston: Little, Brown & Co.

²⁶¹ Crosby, A. (1976). *Epidemic and peace, 1928*. Westport, CT: Greenwood Press.

²⁶² Foley E. (1918) Department of public health nursing, Illinois. *American Journal of Nursing* 1918;19: 189-200.

The lack of nurses due to inherent racism.

Despite nursing services being depleted due to the ongoing war effort, the nursing profession itself was also responsible for its low numbers of trained nurses. During this time, nursing remained a predominantly white, and almost exclusively female occupation.²⁶³ Employing anybody other than a white woman as a nurse was 'almost unheard of'.²⁶⁴ Racism was endemic and fixed within the consciousness of the people at the time, and therefore the shortage of nurses was intensified as the nursing profession failed to fully utilise black nurses in both the war effort and the fight against the Spanish influenza.²⁶⁵

Fifty years before the pandemic, the American Civil War broke the racial boundary of letting black soldiers serve alongside their white counterparts; with roughly 179,000 black men serving in the Union Army and 19,000 more serving in the Navy.²⁶⁶ But once the Civil War was over, there remained no rule for equal treatment and therefore the battle for equality continued. Major cities remained segregated, and hiring a black employee, especially a nurse, was seen as an extraordinary thing to do. Black women who wanted to nurse were restricted to nursing only black patients, and for the most part were not allowed to integrate with the rest of society, never mind care for sick white people. Historian Darlene Clark Hine has argued that black communities responded to such exclusion by 'pooling their resources to establish their own black hospitals and training programmes'.²⁶⁷ Between 1891 and 1907, twelve nurse training programmes opened for black women, including ones at New York's Lincoln Hospital, Chicago's Provident Hospital, and Freedmen's Hospital in Washington, DC.²⁶⁸ In 1908, black nurses formed the National Association of Coloured

²⁶³ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California's RN's*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

²⁶⁴ Elton, Mrs. Oral History Interview conducted by Christopher Maggs. T/12A. p12. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

²⁶⁵ Jones, M. M., & Saines, M. (2019). The Eighteen of 1918–1919: Black Nurses and the Great Flu Pandemic in the United States. *American Journal of Public Health*, 109(6), 877-884.

²⁶⁶ Reid, R. M. (2010). *Practicing Medicine in a Black Regiment: The Civil War Diary of Burt G. Wilder, 55th Massachusetts*. University of Massachusetts Press. 47-262. Anonymous. (2017, September 1). *Black Soldiers in the U.S. Military During the Civil War*. National Archives. <https://www.archives.gov/education/lessons/blacks-civil-war>

²⁶⁷ Hine, D. C. (1962). Black Women in White. *Journal of the National Medical Association*, 54(3). 271-287.

²⁶⁸ Hine, D. C. (1962). Black Women in White. *Journal of the National Medical Association*, 54(3), 271–287.

Cobb, W. M. (1962). A Short History of Freedmen's Hospital. *Journal of the National Medical Association*, 54(3), 271-287.

Graduate Nurses (NACGN).²⁶⁹ In the 1900 United States Census, approximately 10,000 men and women identified themselves as professional or trained nurses, but this number only included 201 black Americans.²⁷⁰ By 1910, 3010 black women and about 200 black men identified as professional or trained nurses.²⁷¹ In 1916, the American Nurses Association became the first professional health care organization to admit black nurses as members.²⁷² Despite this, the prejudice within the nursing profession continued, as even when faced with a pandemic, black nurses were still refused work, and therefore limited the supply of skilled nurses at a time when the world needed it the most.²⁷³ When the United States entered the First World War in 1917, many black American nurses volunteered for military service, and when the pandemic hit, many volunteered their services in hospitals and for home-visits. Yet the majority of black nurses were denied from working both on the frontline in the war effort, and at home to combat to the influenza pandemic.²⁷⁴ Neither the United States Army nor the Naval Nurse Corps would employ black nurses.²⁷⁵ Black nurses were even refused to be nurses' aides in European theatres, despite being fully educated and qualified.²⁷⁶

²⁶⁹ Threat, C.J. (2015) *Nursing Civil Rights: Gender & Race in the Army Nurse Corps*. Illinois, University of Illinois. 10-24.

²⁷⁰ D'Antonio, P., & Whelan, J. C. (2009). Counting Nurses: The Power of Historical Census Data. *Journal of Clinical Nursing*, 18(19), 2717-2724.

²⁷¹ D'Antonio, P., & Whelan, J. C. (2009). Counting Nurses: The Power of Historical Census Data. *Journal of Clinical Nursing*, 18(19), 2717-2724.

²⁷² D'Antonio, P. (2019). The Great Flu and After: Why the Nurses? *American Journal of Public Health*, 109(6), 832-833.

²⁷³ Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

²⁷⁴ Dock, L.L., Pickett, S. E., Noyes, C.D., Clement, F.F., Fox, E.G., & Meter, A.V.N. (1922) *History of American Red Cross Nursing*. The Macmillan Company. 75, 97-100. Retrieved from <https://archive.org/details/historyofamerica00dock/page/n7/mode/2up?ref=ol&view=theater>. Accessed 09/2021.

²⁷⁵ Anonymous. (1917, September 8). Negroes Sentenced. *Abbeville Progress*. <https://chroniclingamerica.loc.gov/lccn/sn88064057/1917-09-08/ed-1/seq-3/#date1=1917&index=2&rows=20&words=negro+WAC&searchType=basic&sequence=0&state=&date2=1920&proxtext=%22negro+wacs%22&y=16&x=16&dateFilterType=yearRange&page=1>. Accessed 01/2020. Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

²⁷⁶ Jones, M. M., & Saines, M. (2019). The Eighteen of 1918-1919: Black Nurses and the Great Flu Pandemic in the United States. *American Journal of Public Health*, 109(6), 877-884.

Black communities were under-funded by governments, and their access to education and employment was limited.²⁷⁷ Black nursing students were often refused entry into mainstream nursing schools due to racist school boards and therefore were left to learn in black-run schools that were often massively underfunded and had limited resources and supplies. Although there was never anything 'explicitly stating' that black nurses could not work in hospitals or serve for the organizations such as the Red Cross, many of them held criteria that made it almost impossible for them to qualify.²⁷⁸ For example, the Red Cross required that nurses must have graduated from a school associated with a hospital with more than fifty beds. The small, segregated hospitals that most black nurses trained in, normally had thirty beds maximum, making it virtually impossible for the trained black nurses to be accepted to work for such organisations.²⁷⁹ Even for those who managed to be accepted into mainstream education, their employability remained low after graduation. This was because many organizations restricted enrolment to black graduates of reputable hospital-based nursing schools who had passed a physical examination and obtained a positive character reference from a supervisor.²⁸⁰

When the 1918 influenza pandemic hit, black communities that were 'hobbled by poverty, Jim Crow segregation and rampant discrimination', were mostly left to fend for themselves.²⁸¹ For most of the pandemic, sick black families were turned away from hospitals, and black communities had to take care of themselves.²⁸² Vanessa Gamble, a medical historian, has said that the start of the Spanish influenza intensified the 'racist

²⁷⁷ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California's RN's*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020.

²⁷⁸ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

²⁷⁹ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112. Threat, C.J. (2015) *Nursing Civil Rights: Gender & Race in the Army Nurse Corps*. Illinois, University of Illinois. 10-24.

²⁸⁰ Dock, L.L., Pickett, S. E., Noyes, C.D., Clement, F.F., Fox, E.G., & Meter, A.V.N. (1922) *History of American Red Cross Nursing*. The Macmillan Company. 74-75, 97-100. Retrieved from <https://archive.org/details/historyofamerica00dock/page/n7/mode/2up?ref=ol&view=theater>. Accessed 09/2021. Staupers, M. K. (1961). *No Time for Prejudice: A Story of the Integration of Negroes in Nursing in the United States*. New York: Macmillan. 14, 123.

²⁸¹ Brooks, R. A. (2020, October 5). *Why African Americans Were More Likely to Die During the 1918 Flu Pandemic*. History. <https://www.history.com/news/1918-flu-pandemic-african-americans-healthcare-black-nurses>. Accessed 02/2021.

²⁸² Brooks, R. A. (2020, October 5). *Why African Americans Were More Likely to Die During the 1918 Flu Pandemic*. History. <https://www.history.com/news/1918-flu-pandemic-african-americans-healthcare-black-nurses>. Accessed 02/2021.

theories of black biological inferiority [and] racial barriers in medicine and public health'.²⁸³ Even when black nurses offered their help to white hospitals and families in a dire time of need, their offers were rejected. This deep-rooted racism of the nursing profession and of sick patients had to quickly be overcome in order to tackle the nursing shortage and the influenza pandemic.

Nurses' deaths and the hesitation to work due to the fear of the pandemic

Reducing death rates of patients was not the only worry for many nurses. Nursing infectious diseases had always been a dangerous job. Eva Luckes, a Matron from the London Hospital, stated in her well-known textbook '*General Nursing*', that when caring for infectious patients 'there is always the possibility ... of nurses who "catch" things from their patients ... the possibility which no nurse need to shut her eyes to, that she may have to suffer herself, or that she may meet her death as a direct consequence of attending to her patient'.²⁸⁴ The nurses that fought the Spanish influenza were no different, they were not invincible, and when surrounded by sick patients every day, they put themselves at great personal risk. Even with intense precaution and sanitization, nurses were not safe from the 'vicious and deadly' disease that encircled them.²⁸⁵ Spanish influenza was the leading cause of death for military nurses during the First World War, as the 'most common stated cause of death was pneumonia caused by Spanish flu'.²⁸⁶ Therefore, when the nurses also became sick, the situation became critical.²⁸⁷

²⁸³ Gamble, V. N. (2010). "There Wasn't a Lot of Comforts in Those Days:" African Americans, Public Health, and the 1918 Influenza Epidemic. *Public Health Reports*, 125(3), 114–122.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2862340/>

²⁸⁴ Luckes, E. (1915). *General Nursing*. Kegan Paul, Trench, Trubner & Co., Ltd. London. 211.

²⁸⁵ Herrick, J. B. (1919). *Treatment of influenza by means other than vaccines and serums*. Chicago: American Medical Association. <https://archive.org/details/101493938.nlm.nih.gov/page/n3/mode/2up>. 5.

²⁸⁶ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history's deadliest pandemic. shorturl.at/aolP3. Rice, G.W. (2005). *Black November: The 1918 Influenza Pandemic in New Zealand* (2nd ed.). Christchurch: Canterbury University Press. 231. British Red Cross. (2018). *VAD Casualties During the First World War*. Retrieved June 2021, from <https://vad.redcross.org.uk/~media/BritishRedCross/Documents/Who%20we%20are/History%20and%20archives/VAD%20casualties%20during%20the%20First%20World%20War.pdf>. Hallett, C. E. (2014). *Veiled Warriors: Allied Nurses of the First World War*. Oxford.

²⁸⁷ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports* (1974-), 125 (3), 105-112.

Hospital records across the world suggest that no medical institution went without casualties of its own staff, 'the grim reaper [was] busy' wrote *Hayes Free Press*.²⁸⁸ N. Grist, a doctor who worked during the pandemic, recollected that they 'lost an outrageous number of nurses and doctors' due to the virus.²⁸⁹ There are copious amounts of records that documented the death and illness of nurses in hospitals across the world: Dorothy Deming, a student nurse at Presbyterian Hospital in New York City during the pandemic recalled that '90 of [the] graduate nurses and students came down with flu [and] one died'.²⁹⁰ The Florence Nightingale Museum in London reported the 'tragic case' of a British VAD nurse called Phyllis Burn that died in 1918 within two days of having Spanish influenza symptoms.²⁹¹ An inquiry at the offices of the Metropolitan Asylums Board elicited the information that 'just over 300 of the nurses [were] affected with influenza' at the temporary hospitals and 'fifty percent of the ambulance staff [were] on the sick list with influenza'.²⁹² The Johns Hopkins Hospital in Maryland stated that nearly 40 percent of their nurses fell ill with influenza during the pandemic.²⁹³ It was also recorded that there were about 160 nurses, hospital staff and medical students from Rush Medical College who fell sick and ended up being patients themselves.²⁹⁴ The nurses who fell sick were not sent home, instead they were quarantined and treated on 'side wards', meaning that nurses often had to treat and care for their colleagues, and friends, in their final hours.²⁹⁵ In Britain, Sheffield hospital reported that one doctor and one nurse had died, and thirty nurses and ward maids were also 'down with the disease'.²⁹⁶ The Royal College of Nursing also updated

²⁸⁸ Anonymous. (1918, October 17). Deaths. *The Hays Free Press*.

<https://www.loc.gov/resource/sn84029690/1918-10-17/ed-1/?sp=1&r=0.119,-0.035,0.774,0.383,0>. Accessed 10/2020. House Committee minutes 1918-1920, held on 28th October 1918. LG/AL5/56, The Royal London Hospital Archives.

²⁸⁹ Grist NR. Pandemic influenza 1918. *British Medical Journal*. 1979;2(6203):1632–1633.

²⁹⁰ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA_1918.45.aspx. House Committee minutes 1918-1920, held on 11th November, 1918. LG/AL5/56, The Royal London Hospital Archives.

²⁹¹ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history's deadliest pandemic.

²⁹² Anonymous. (1918, November 1). Flu Still Serious. *Pall Mall Gazette*, p. 3.

²⁹³ Bloomfield, A. L., & Harrop, G. A. (1919). *Clinical observations on epidemic influenza*. Baltimore University. <https://archive.org/details/101581780.nlm.nih.gov/page/n1/mode/2up?q=nurses>. 1.

²⁹⁴ Herrick, J. B. (1919). *Treatment of influenza by means other than vaccines and serums*. Chicago: American Medical Association. <https://archive.org/details/101493938.nlm.nih.gov/page/n3/mode/2up>. 5.

²⁹⁵ Kemp, A. Oral History Interview conducted by Christopher Maggs. T/16. p12. Digitised 2009. Royal College of Nursing Archives, Edinburgh. Anonymous. (1918, October 9). Eleven Nurses Have Influenza. *San Francisco Examiner*. 9. Retrieved from <https://quod.lib.umich.edu/f/flu/0010flu.0009.100/1/--eleven-nurses-have-influenza?page=root;rgn=title;size=175;view=image;q1=nurses>. Retrieved 10/2020.

²⁹⁶ Anonymous. (1918, October 31). Sheffield Calls for Volunteer Nurses. *Sheffield Independent*, p. 5.

their Council Records frequently during the pandemic and stated that in 1919 twenty-two members had died during the year.²⁹⁷ In the capital of New Zealand, Wellington, 69 sick nurses were admitted to hospital in November 1918, amounting to a third of all patient admissions that month.²⁹⁸ New Zealand's nursing profession also had an occupational death rate of 21.8/1000 due to the influenza virus, making it three times more deadly than serving in the New Zealand military.²⁹⁹

Although there were some nurses who were lucky enough to not 'get anything at all' during the pandemic, the majority either got sick themselves, or saw their colleagues become patients.³⁰⁰ This overwhelming fear of getting sick, or infecting others, made some nurses incredibly 'afraid of getting something' and therefore their morale was depleted.³⁰¹ This fear of contracting the deadly virus also made recruiting more nurses an even harder challenge. Deming recalls there being a 'natural fear of infection' in the over-crowded wards and that 'some of [her] best aides and volunteers, if not sick themselves, stayed home to nurse relatives and friends'.³⁰² The Royal College of Nursing recorded the resignation of five nurses in 1919 due to the fear of contracting the virus.³⁰³ The stress and overwhelming fear of the virus also led to nurses resigning and taking sick-leave due to mental exhaustion.³⁰⁴

The nursing profession was 'caught wholly unprepared' by the Spanish influenza pandemic.³⁰⁵ Medical and nursing services across the world broke down almost completely

²⁹⁷ The Royal College of Nursing. (1919). *Fourth Annual Report, 1919*. Retrieved from https://rcn.access.preservica.com/uncategorized/IO_4c793463-0b67-4688-a27f-8caf4bde96c6/

²⁹⁸ Rice, G.W. (2005). *Black November: The 1918 Influenza Pandemic in New Zealand* (2nd ed.). Christchurch: Canterbury University Press. 231.

²⁹⁹ Rice, G.W. (2005). *Black November: The 1918 Influenza Pandemic in New Zealand* (2nd ed.). Christchurch: Canterbury University Press. 231.

³⁰⁰ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P10. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

³⁰¹ Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P10. Digitised 2009. Royal College of Nursing Archives, Edinburgh. Anonymous. (1918, December 2). Thirty Dollars Day for Nurse during the 'Flu'. *Ogden Daily Standard*. https://collections.lib.utah.edu/details?id=1542419&facet_topic_t=%22nurses%22&facet_setname_s=uum_1918fpn

³⁰² Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309. https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

³⁰³ The Royal College of Nursing. (1919). *Fourth Annual Report, 1919*. Retrieved from https://rcn.access.preservica.com/uncategorized/IO_4c793463-0b67-4688-a27f-8caf4bde96c6/

³⁰⁴ Roddick, J. A. (2006). Delirium and fever in the antipodes: Nursing and the 1918 influenza epidemic in Dunedin Hospital, New Zealand. *Journal of Research in Nursing*, 11(4), 357-370.

³⁰⁵ Anonymous. (1918). Experiences During the Influenza Epidemic. *American Journal of Nursing*, 19(3), 203–204.

due to the stress of the pandemic, and many areas called for a state of emergency.³⁰⁶ A lack of nurses due to war service, deep-rooted racism and prejudice, and fear of contracting the virus themselves led to a heavily reduced number of nursing staff.³⁰⁷ As more people continued to get sick, and the number of nurses depleted, the true crisis of the Spanish influenza came to light. There was nothing that could be done to help without the trained and educated hands of nurses, and therefore drastic changes had to be made.

https://journals.lww.com/ajnonline/Citation/1918/12000/I__EXPERIENCES_DURING_THE_INFLUENZA_EPIDEMIC.23.aspx

³⁰⁶ Anonymous. (1918, October 22). Shortage of Nurses Handicaps Flu Fight. *Indianapolis Star*. Retrieved from <https://quod.lib.umich.edu/f/flu/0100flu.0005.010/1/--shortage-of-nurses-handicaps-flu-fight?page=root;rgn=title;size=175;view=image;q1=nurses>

³⁰⁷ Roddick, J. A. (2006). Delirium and fever in the antipodes: Nursing and the 1918 influenza epidemic in Dunedin Hospital, New Zealand. *Journal of Research in Nursing*, 11(4), 357-370.

Chapter Four: A state of emergency: Overcoming the nursing shortage during the 1918

Spanish influenza pandemic

To overcome the issue of a lack of nurses, governments and health-boards across the world had to make some crucial decisions. Before the pandemic, the workload of nurses was already too heavy, as alongside caring for patients they were also made to clean linens, mop floors and make food. During the pandemic, nurses were often 'left alone except for occasional visits from doctors or other nurses' and therefore it quickly became apparent that more nurses were needed, as well as extra hands to help with the jobs that did not need medical training, so nurses could focus on caring for patients.³⁰⁸ Lillian D. Wald, the director of Henry Street Settlement, wrote to Jacob Schiffin in 1918 that 'the wolf [was] scratching at the door with enormous demand for nurses'.³⁰⁹ In order to fix this crisis, the nursing profession had to make some major changes. It had to hire more nurses and aides to help balance out the workload, it had to prioritise certain jobs and create a mobile workforce, and it had to stop the discrimination as to who could be a nurse and offer their help.

Balancing out the workload: volunteer nurses and extra helping hands.

Hospitals were overcrowded, medical assistance at home was beyond the reach of many and the death toll was rapidly increasing.³¹⁰ Getting more nurses to work during the pandemic was the most difficult, yet most effective solution to such a pressing issue. As one hospital worker expressed it, 'the call is for anyone who has a pair of hands and is willing to help where the need is greatest'.³¹¹ There were multiple cases of new and rapid nurse

³⁰⁸ Sister M. Herman. (1919). *My Experience during the Epidemic / by Sister M. Herman*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from <https://digital.library.villanova.edu/Item/vudl:630446#?c=&m=&s=&cv=4&xywh=-2328%2C-1%2C6960%2C3000>. (Accessed 01/2021).

³⁰⁹ Wald, L. (1918). The work of the nurses' emergency council. *Public Health Nurse*, 10(12), 305–313.

³¹⁰ Sister Sophie Madeleine. (1919). *Experiences During Epidemic / by Sister Sophie Madeleine*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from <https://digital.library.villanova.edu/Item/vudl:631657#?c=&m=&s=&cv=1&xywh=-717%2C1016%2C3543%2C1527>. (Accessed 01/2021).

³¹¹ Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85. https://journals.lww.com/ajnonline/Citation/1918/11000/THE_EPIDEMIC_OF_INFLUENZA.1.aspx

training schools for those who did not have any nursing experience but wanted to help during the crisis.³¹² They would teach the basics to volunteers who would then be able to assist in both overrun hospitals and during home visits. The Red Cross also set up courses in first aid and dietetics, which allowed volunteers to help 'assist in handling cases of influenza in private homes'.³¹³ H. C. Wood recalls relying heavily on these medical students as it was so difficult to obtain more fully trained nurses.³¹⁴



Figure 9: Anonymous. (2018, March 2). 1918 Historical Image Gallery. Centres for Disease Control and Prevention. <https://www.cdc.gov/flu/pandemic-resources/1918-commemoration/historical-images.htm>

Advertisements, such as the one shown in Figure 9, were posted in American newspapers by local hospitals offering to train new nurses, with incentives such as learning from home and weekly wages.³¹⁵ An advert in the *San Francisco Chronicle* appealed for anyone who had 'experience in home nursing', offering to pay \$20 a week for untrained help and \$5 a day for trained help'.³¹⁶ These training camps and courses were seen across the world: the Catholic Church set up youth programmes to train young nurses in Germany. In Canada, the Ministry of Health 'moved swiftly' to create additional hospital accommodation and train volunteers to care for the sick. They also issued a call for an Ontario Emergency Volunteer Health Auxiliary that provided training to create a volunteer group known as the Sisters of

³¹² Milbrath, G. (2020). The US Army School of Nursing and the 1918 influenza pandemic: cooperation and collaboration at Camp Grant, Illinois. *Health Emergency and Disaster Nursing*, 7, 32–35. https://www.ijstage.ijst.go.jp/article/hedn/advpub/0/advpub_2019-SP02/article. Accessed 03/2021. Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

³¹³ Anonymous. (1918, October 14). Red Cross Makes Urgent Appeal for Services Of Nurses. *Dallas Morning News*. Retrieved from <https://quod.lib.umich.edu/f/flu/0040flu.0003.400/1/--red-cross-makes-urgent-appeal-for-services-of-nurses?page=root;rgn=title;size=125;view=image;q1=nurses>.

³¹⁴ Wood, H. C. (1919). *The control of epidemic influenza in a large institution*. New York: William Wood & Company. <https://archive.org/details/101496415.nlm.nih.gov/mode/2up?q=nurses>. 3.

³¹⁵ Spinney, L. (2017). *Pale Rider: The Spanish Flu of 1918 and how it changed the world*. London: Penguin Random House. 90. Anonymous. (2018, March 2). 1918 Historical Image Gallery. Centres for Disease Control and Prevention. <https://www.cdc.gov/flu/pandemic-resources/1918-commemoration/historical-images.htm>

³¹⁶ Anonymous. (1918, December 22). Nurses Wanted On Influenza. *San Francisco Chronicle*. Retrieved from <https://quod.lib.umich.edu/f/flu/0120flu.0016.210/1/--nurses-wanted-on-influenza?page=root;rgn=title;size=200;view=image;q1=nurses>

Service.³¹⁷ Student nurses were often more than willing to offer their services and they were ‘thrown in the thick of the epidemic’.³¹⁸

Retired nurses and anybody with previous nursing experience were also appealed for.³¹⁹ M. Lent reported in the *Public Health Nurse* in 1918 that ‘those who had any idea of nursing cheerfully gave their service’.³²⁰ Even military camps, that arguably had the biggest nursing workforce during the pandemic, were appealing for more help.³²¹ Advertisements were seen in newspapers, flyers, and on public notice boards. There were also many requests made by the Red Cross that were broadcast through news outlets and local advertisements.³²² In the United States, there were constant updates requesting more and more nurses, as although ‘society made repeated efforts’ to get nurses to register, ‘the demand [continued] to greatly exceed the supply.’³²³ The *Salt Lake Telegram* published an

³¹⁷ McCullough, J. W. S. (1918). The Control of Influenza in Ontario. *Canada Medical Association Journal*, 8(1), 1084- 1085.

³¹⁸ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.
https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

³¹⁹ Wald, L. (1918). The work of the nurses' emergency council. *Public Health Nurse*, 10(12), 305-313.

³²⁰ Lent, M. (1918). The extent and control of influenza in Washington, D.C. *Public Health Nurse*, 20(12), 296-304.

³²¹ Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85.
https://journals.lww.com/ajnonline/Citation/1918/11000/THE_EPIDEMIC_OF_INFLUENZA.1.aspx

³²² Sister Sophie Madeleine. (1919). *Experiences During Epidemic / by Sister Sophie Madeleine*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from <https://digital.library.villanova.edu/Item/vudl:631657#?c=&m=&s=&cv=1&xywh=-,717%2C1016%2C3543%2C1527>. (Accessed 01/2021). Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85. Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company. Anonymous. (1918, October 14). Red Cross Makes Urgent Appeal for Services of Nurses. *Dallas Morning News*. Retrieved from <https://quod.lib.umich.edu/f/flu/0040flu.0003.400/1/--red-cross-makes-urgent-appeal-for-services-of-nurses?page=root;rgn=title;size=125;view=image;q1=nurses>.

³²³ Anonymous. (1919, January 23). Red Cross Needs Several Nurses. *The Charleston Evening Post*. Retrieved from <https://quod.lib.umich.edu/f/flu/0140flu.0002.410/1/--red-cross-needs-several-nurses?page=root;rgn=title;size=150;view=image;q1=nurses>

advert stating that ‘there [was] a great shortage of nurses to handle the cases of influenza developing hourly, and all women with any experience at nursing [were] urged to register at the Amelia Palace’.³²⁴ In Washington, similar pleas for help were made as a public appeal was made to ‘graduate nurses, undergraduates, practical nurses, nurses’ aides and anyone who had had any sort of nursing experience at all’ to help in caring for the increasing number of infected patients.³²⁵ Sisters and members of the church were also often willing to provide their services; Sister Ancilla, a Church Sister recalled her willingness to ‘offer her services’ to help the nurses as ‘although [she] was unexperienced, [she] trusted in the Sacred Heart for help and protection’.³²⁶ A Red Cross appeal in the *Charleston Evening Post* called for ‘every woman who [had] any nursing experience’ to register at the Red Cross and ‘serve her city’ in its time of need.³²⁷ Another advert was posted in the *Abbeville Press and Banner* asking for anyone who was ‘organized, prepared [and] enthusiastic’ to join the Red Cross.³²⁸ Members of the public from all

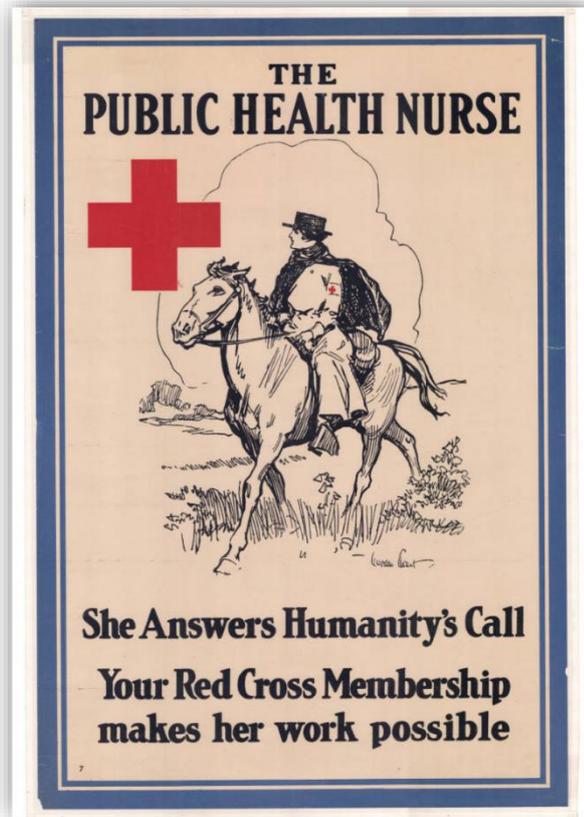


Figure 10: American Red Cross Poster. *The Public Health Nurse*. (n.d.). North Carolina Digital Collections. Retrieved 14 July 2021, from <https://digital.ncdcr.gov/digital/collection/p15012coll10/id/2044>

³²⁴ Anonymous. (1918, October 17). Flu Nurses Are Greatly in Demand. *Salt Lake Telegram*. https://collections.lib.utah.edu/details?id=1543024&facet_topic_t=%22nurses%22&facet_setname_s=uum_1918fpn

³²⁵ Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85. https://journals.lww.com/ajnonline/Citation/1918/11000/THE_EPIDEMIC_OF_INFLUENZA.1.aspx

³²⁶ Sister M. Ancilla. (1919). *Influenza of 1918 / by Sister M. Ancilla*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from <https://digital.library.villanova.edu/Item/vudl:632964#?c=&m=&s=&cv=3&xywh=-2335%2C-1%2C6960%2C3000>. (Accessed 01/2021).

³²⁷ Anonymous. (1919, January 23). Red Cross Needs Several Nurses. *The Charleston Evening Post*. Retrieved from <https://quod.lib.umich.edu/f/flu/0140flu.0002.410/1/--red-cross-needs-several-nurses?page=root;rgn=title;size=150;view=image;q1=nurses>

³²⁸ Anonymous. (1919, November 4). 3rd Red Cross Roll Call. *Abbeville The Press and Banner*. <https://www.loc.gov/resource/sn84026853/1919-11-04/ed-1/?sp=3&r=-0.007,-0.021,0.55,0.429,0>

occupations including schoolteachers, church auxiliaries, Catholic sisters and social service agencies volunteered and provided 'essential support'.³²⁹ From American Red Cross appeals alone, over 18,000 nurses and volunteers stepped forward to serve alongside the United States Public Health Workers, local health authorities, and the nurses who were already battling the pandemic. S. Tesseyman et al have argued that the presence of medical students in times of need had a 'significant impact on nursing development'.³³⁰

This successful form of appeal for more nurses was also seen a lot in Britain. Local newspapers tended to advertise for city hospitals who needed more hands to help care for their patients. An example of this is seen in an article published by the *West Sussex Gazette*, in which the Royal Portsmouth Hospital appealed for 'trained nurses and VADs to 'volunteer their services' in the emergency wards.³³¹ The *Sheffield Independent* also published an appeal in which Dr. Williams 'explained the difficulty under which they [were] labouring' due to the drastic 'spread of the influenza epidemic in Sheffield, together with the difficulty of dealing with the number of serious cases'.³³² The appeal asked for both 'helpers for the hospital and home assistance'.³³³ Dr. Edmund Smith, a medical officer of the British Health Department in York also wrote to the press asking for the names and addresses of women who they thought 'may have had hospital training, have had more or less experience of nursing, and, whom are willing to be employed on night or day duty at patients' homes in cases of influenza, pneumonia, bronchitis, and other diseases, cases not usually or always removed to a hospital'.³³⁴ Although many advertisements encouraged to volunteer through an act of patriotism, some adverts, such as this one written by Dr. Smith, were incentivised through money, as Smith ensured that volunteers would be 'paid either by the patients or out of public funds'.³³⁵

³²⁹ Wall, B. M., & Keeling, A. W. (2010). *Nurses on the front line: when disaster strikes, 1878-2010*. New York: Springer Publishing Company.

³³⁰ Tesseyman, S., Brooks, J., & Hallett, C. (2020). Nurses and Surgical Dressers: Medical Students' Impact on Hospital Nursing Work in Philadelphia and London, 1870 to 1910. *Nursing History Review*, 29(1), 117–141. <https://connect.springerpub.com/content/sgnrhr/29/1/117>

³³¹ Anonymous. (1919, March 20). Portsmouth. *West Sussex Gazette*, p. 12.

³³² Anonymous. (1918, October 31). Sheffield Calls for Volunteer Nurses. *Sheffield Independent*, p. 5.

³³³ Anonymous. (1918, October 31). Sheffield Calls for Volunteer Nurses. *Sheffield Independent*, p. 5.

³³⁴ Anonymous. (1919). Nursing Echoes. *The British Journal of Nursing*, 62, 138. <https://rcnarchive.rcn.org.uk/volumes/62/Volume%2062%20Page%20138>

³³⁵ Anonymous. (1919). Nursing Echoes. *The British Journal of Nursing*, 62, 138. <https://rcnarchive.rcn.org.uk/volumes/62/Volume%2062%20Page%20138>

The British Red Cross also called for more Voluntary Aid Detachments (VADs) both during the First World War, as seen in Figure 11, and during the 1918 pandemic to help both in hospitals and during home visits. The British Red Cross's country director at the time, Lord Chilston, suggested that 'county directors should ascertain ... members [that] would be prepared to assist the medical officers and district nursing associations'.³³⁶ It is thought that somewhere between 70,000 and 100,000 women served as VADs between 1914 to 1918, assisting both in the war effort and the fight against influenza.³³⁷

Volunteers provided critically needed support in both hospitals and at home and were vital to relieving some of the pressure that nurses faced as they 'worked to the point of exhaustion'.³³⁸ Now that nurses had the extra hands they needed, they had to appropriately balance the workload. The Ministry of Health informed *The Globe* that nurses had to focus 'their entire attention on assisting the sick', so volunteers had to focus on providing food, fuel, and other necessities to the families of the sick and those who were not in need of urgent medical care.³³⁹



Figure 11: VAD Recruitment Poster: British Red Cross. (n.d.). 'Spanish flu': The British Red Cross' work in the face of a global pandemic. Retrieved 17 July 2021, from <https://www.redcross.org.uk/stories/health-and-social-care/health/coronavirus-how-the-red-cross-helped-in-the-spanish-f>

³³⁶ British Red Cross. (n.d.). 'Spanish flu': The British Red Cross' work in the face of a global pandemic. Retrieved 17 July 2021, from <https://www.redcross.org.uk/stories/health-and-social-care/health/coronavirus-how-the-red-cross-helped-in-the-spanish-flu-pandemic>

³³⁷ Light, S. (n.d.). *VOLUNTARY AID DETACHMENTS*. Scarlet Finders. Retrieved 14 July 2021, from <http://www.scarletfinders.co.uk/181.html>

³³⁸ Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812. Anonymous. (1918, October 10). Sunshine Aid to Combat Flu. *The Globe*, p. 6. Anonymous. (1918, October 11). Can Keep Down the Morality. *The Globe*, p. 6.

³³⁹ Anonymous. (1918, October 10). Sunshine Aid to Combat Flu. *The Globe*, p. 6. Anonymous. (1918, October 11). Can Keep Down the Morality. *The Globe*, p. 6.

Prioritising jobs and mobilising the workforce

As well as more trained nurses and volunteers, there was a 'vocal demand [and] new pressure for coordinated planning'.³⁴⁰ The nursing profession needed to reassign jobs, reduce private nursing, and mobilise its workforce in order to make the most of its new volunteers and to keep things running smoothly.

Reassigning jobs was crucial to making the nursing workforce

run as efficiently as possible, and to make sure that all patients received the best care possible. Nurses were reassigned, vacations of staff members were cancelled, and hours of duty were extended.³⁴¹ Physicians were also told not to 'employ nurses as office or laboratory assistants during the emergency' as their skills were needed for caring for the sick.³⁴² The decision to put a stop to private nursing was also made in order for all patients to have an equal chance of receiving care during the pandemic. London Hospital reported that nurses were 'refused for private cases' so that 'more help might be given in the wards'.³⁴³ The Nurses Emergency Council also appealed that all nurses attending chronic cases had to be released for general service unless in case of life or death.³⁴⁴



Figure 12: Medical Department - Influenza Epidemic 1918 - Volunteer nurses at Red Cross Hospital during the Influenza Epidemic Eureka, California. (n.d.). National Archives Catalogue. Retrieved 17 July 2021, from <https://catalog.archives.gov/id/45499325>

³⁴⁰ Melosh, B. (1982). *The Physician's Hand*. Philadelphia: Temple University Press.

³⁴¹ Deming, D. (1957). Influenza -1918. *American Journal of Nursing*, 57(10), 1308-1309. https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx.

³⁴² Wald, L. (1918). The work of the nurses' emergency council. *Public Health Nurse*, 10(12), 307. Deming, D. (1957). Influenza -1918. *American Journal of Nursing*, 57(10), 1308-1309. https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

³⁴³ House Committee minutes 1918-1920, held on 11th November. LG/AL5/56, The Royal London Hospital Archives. House Committee minutes 1918-1920, held on 21st October 1918. LG/AL5/56, The Royal London Hospital Archives.

³⁴⁴ Wald, L. (1918). The work of the nurses' emergency council. *Public Health Nurse*, 10(12), 307.

Alongside caring for patients, nurses were often tasked with cleaning and clerical work, but it soon became apparent that ‘in the stress of war and epidemic [nurses] must be placed in more essential services’.³⁴⁵ Therefore, trained nurses were no longer made to do the jobs that did not need medical training, as they could be left for the volunteers. Volunteers that ‘lacked professional training or ability to nurse’ would take over the ‘unskilled’ yet necessary tasks that were usually done by nurses. These jobs consisted of answering phones, washing dishes, driving nurses to home-visits, clerical work, sweeping floors and keeping hospitals generally clean.³⁴⁶ B. Franklin Royer, a commissioner of health, encouraged the people of the community who ‘wish[ed] to do something for the sufferers but [could not] nurse them, to make masks, gowns, and other supplies, also broths or other forms of nourishing food’.³⁴⁷ To avoid any calamities, volunteers were almost always screened and selected by government and medical boards. A standard schedule of nursing and volunteer work was also devised by organisations such as the Red Cross in an attempt to avoid chaos and keep the profession structured even when faced with an influx of new workers and volunteers.³⁴⁸

The nursing profession was also mobilised in order to reach and care for as many patients as possible. Big hospitals were only situated in big busy cities, so by mobilising the nurses on home visits, it meant that patients living in more rural areas were able to receive proper care. By late 1918, the American Red Cross had organized a motor corps of volunteers and nurses to carry them ‘from house to house’ in both busy and rural districts, with a total of 35 cars per day to assist in nurses home visits.³⁴⁹ They also transported patients back to hospitals, with a statistic from St. Louis stating that the motor corps transported as many as

³⁴⁵ Anonymous. (1918, October 20). ‘Survey to Enroll All Local Nurses’, *Ohio State Journal*. 2. Available at <https://quod.lib.umich.edu/f/flu/0010flu.0003.100/1/--survey-to-enroll-all-local-nurses?page=root;rgn=full+text;size=150;view=image;q1=nurses>. Accessed 02/2020.

³⁴⁶ Wald, L. (1918). The work of the nurses' emergency council. *Public Health Nurse*, 10(12), 305-313. Lent, M. (1918). The extent and control of influenza in Washington, D.C. *Public Health Nurse*, 20(12), 296-304.

³⁴⁷ Harvey, O. J. (1920). *The Spanish influenza pandemic of 1918: an account of its ravages in Luzerne County, Pennsylvania, and the efforts made to combat and subdue it*. Wilkes-Barre. 24. Available at: <https://archive.org/details/0266067.nlm.nih.gov/page/n7/mode/2up>. Accessed 02/2020.

³⁴⁸ Tomes, N. (2010). “Destroyer and Teacher”: Managing the Masses During the 1918–1919 Influenza Pandemic. *Public Health Reports*, 125(3), 48–62. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2862334/>

³⁴⁹ Wald, L. (1918). The work of the nurses' emergency council. *Public Health Nurse*, 10(12), 305-313. Jones, M. M. (2010). The American Red Cross and Local Response to the 1918 Influenza Pandemic: A Four-City Case Study. *Public Health Reports*, 125(3), 92–103. https://www.researchgate.net/figure/Motor-corps-volunteers-transporting-influenza-patients-during-the-1918-1919-pandemic_fig3_44693012

101 patients in a single day.³⁵⁰ The use of cars also made it possible for nurses to carry more supplies than they had been able to carry in their supply bags in the past.³⁵¹ The motor corps also transported items produced by volunteer seamstresses, such as hospital gowns, pyjamas, and sheets and also delivered fresh meals to sick people in their homes.³⁵²

Breaking down the racial barriers within the nursing profession.

Although many of the nurses and volunteers that stepped forward were primarily ‘middle and upper-class white women’, many black women also offered to help during the crisis.³⁵³ Black nurses were initially faced with frustration as their offers to volunteer were disregarded, and the most they could achieve was to be placed on a ‘reserve members’ list.³⁵⁴ However, as the nursing shortage became increasingly severe, the crisis ‘forced’ the nursing profession to ‘temporarily abandon their rigid and discriminatory professional standards’.³⁵⁵ By 1917, opportunities for black nurses became more readily available, as the Red Cross reversed its policy on not enrolling black nurses, and most trained black nurses met the qualifications to be hired by white institutions.³⁵⁶ Opportunities within the Red

³⁵⁰ Jones, M. M. (2010). The American Red Cross and Local Response to the 1918 Influenza Pandemic: A Four-City Case Study. *Public Health Reports*, 125(3), 92–103. 94. https://www.researchgate.net/figure/Motor-corps-volunteers-transporting-influenza-patients-during-the-1918-1919-pandemic_fig3_44693012

³⁵¹ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112.

³⁵² Jones, M. M. (2010). The American Red Cross and Local Response to the 1918 Influenza Pandemic: A Four-City Case Study. *Public Health Reports*, 125(3), 92–103. 94. https://www.researchgate.net/figure/Motor-corps-volunteers-transporting-influenza-patients-during-the-1918-1919-pandemic_fig3_44693012

³⁵³ Jones, M. M. (2010). The American Red Cross and Local Response to the 1918 Influenza Pandemic: A Four-City Case Study. *Public Health Reports*, 125(3), 92–103. 94. https://www.researchgate.net/figure/Motor-corps-volunteers-transporting-influenza-patients-during-the-1918-1919-pandemic_fig3_44693012

³⁵⁴ Jones, M. M. (2010). The American Red Cross and Local Response to the 1918 Influenza Pandemic: A Four-City Case Study. *Public Health Reports*, 125(3), 92–103. 95. https://www.researchgate.net/figure/Motor-corps-volunteers-transporting-influenza-patients-during-the-1918-1919-pandemic_fig3_44693012

³⁵⁵ Jones, M. M. (2010). The American Red Cross and Local Response to the 1918 Influenza Pandemic: A Four-City Case Study. *Public Health Reports*, 125(3), 92–103. 95. https://www.researchgate.net/figure/Motor-corps-volunteers-transporting-influenza-patients-during-the-1918-1919-pandemic_fig3_44693012

³⁵⁶ Jones, M. M., & Saines, M. (2019). The Eighteen of 1918–1919: Black Nurses and the Great Flu Pandemic in the United States. *American Journal of Public Health*, 109(6), 877-884. Staupers, M. K. (1961). *No Time for Prejudice: A Story of the Integration of Negroes in Nursing in the United States*. New York: Macmillan. 14, 123.

Cross began opening up to trained black nurses, and, to some, black nurses were seen as 'the free coloured women helping to free the world'.³⁵⁷

As the pandemic peaked, more opportunities became available for black nurses to provide their services. By August 1918 the United States Army began accepting the aid of African American nurses, sending the first black nurses to Camp Sherman in Ohio, and Camp Grant in Illinois.³⁵⁸ After 18 black nurses were accepted to serve in the American Army during the pandemic and black troops were 'available to take part in the war', the president of the National Association of Coloured Graduate Nurses believed that more trained black nurses should also be able to provide their skills.³⁵⁹ In turn, she offered 2,000 black nurses, ready trained, to serve in both the war effort and the fight against influenza in hospitals in Europe and America.³⁶⁰ Carnegie Steel in Pittsburgh, Pennsylvania, also hired 16 black nurses to care for the employees who were sick with flu.³⁶¹ Some black nurses were also given the opportunity to conduct home visits. The *New York Age* reported that 'the demand for nurses [was] so great' that they were 'unable to furnish adequate supply'.³⁶² This lack of nurses led to 'a number of' black nurses being sent to 'homes that hitherto have not been opened to coloured nurses', such as the estates of Newport socialites.³⁶³

³⁵⁷ Anonymous. (1918, October 12) "Colored Nurses Are Very Much in Demand," *New York Age*. 1. Anonymous. (1918). The Coloured Women of the Mid-West and the Red Cross. *The British Journal of Nursing*, 61, 7. <https://rcnarchive.rcn.org.uk/data/VOLUME061-1918/page007-volume61-06thjuly1918.pdf>

³⁵⁸ Keeling, A.W. (2010). "Alert to the Necessities of the Emergency": U.S Nursing During the 1918 Influenza Pandemic. *Public Health Reports (1974-)*, 125 (3), 105-112. Milbrath, G. (2020). The US Army School of Nursing and the 1918 influenza pandemic: cooperation and collaboration at Camp Grant, Illinois. *Health Emergency and Disaster Nursing*, 7, 32–35. https://www.jstage.jst.go.jp/article/hedn/advpub/0/advpub_2019-SPO2/article. Accessed 03/2021.

³⁵⁹ Jones, M. M., & Saines, M. (2019). The Eighteen of 1918–1919: Black Nurses and the Great Flu Pandemic in the United States. *American Journal of Public Health*, 109(6), 877-884. Anonymous. (1918). The Coloured Women of the Mid-West and the Red Cross. *The British Journal of Nursing*, 61, 7. <https://rcnarchive.rcn.org.uk/data/VOLUME061-1918/page007-volume61-06thjuly1918.pdf>

³⁶⁰ Anonymous. (1918). The Coloured Women of the Mid-West and the Red Cross. *The British Journal of Nursing*, 61, 7. <https://rcnarchive.rcn.org.uk/data/VOLUME061-1918/page007-volume61-06thjuly1918.pdf>

³⁶¹ Saunders, V. (1919) Horizons. *The Crisis*. 17(4), 160-210. 196. Retrieved from <https://www.marxists.org/history/usa/workers/civil-rights/crisis/0200-crisis-v17n04-w100.pdf>. Accessed 01/2021. Dock, L.L., Pickett, S. E., Noyes, C.D., Clement, F.F., Fox, E.G., & Meter, A.V.N. (1922) *History of American Red Cross Nursing*. The Macmillan Company. 374. Retrieved from <https://archive.org/details/historyofamerica00dock/page/n7/mode/2up?ref=ol&view=theater>. Accessed 09/2021.

³⁶² Anonymous. (1918, October 12) "Colored Nurses Are Very Much in Demand," *New York Age*. 1.

³⁶³ Anonymous. (1918, October 12) "Colored Nurses Are Very Much in Demand," *New York Age*. 1.

M. Lent believed that the epidemic created a kinship among people. She argued that ‘caste, colour [and] creed were forgotten, and the desire to render aid seemed paramount ... Anyone who had anything to give gave it fully, freely, with not thought of praise nor desire for notoriety’.³⁶⁴ Black nurses gave all they could to help, however the crisis did not make people forget about their race. It must be noted that this continued to be a period of ‘pervasive segregation and racial violence’, so even though black nurses were given opportunities and were allowed to work, they were still not treated equally.³⁶⁵ Black patients were still segregated in most hospitals and were often treated in basements and attics, whilst white patients were treated on main wards. In the American South, Jim Crow laws continued to enforce racial segregation even in the middle of a global pandemic.³⁶⁶ In order to adhere to the laws that refused black people from being admitted to hospitals for white patients, the Red Cross set up separate emergency hospitals for black people.³⁶⁷ Black nurses were often tasked with treating black patients, and some black nurses were even rejected by white patients when they tried to provide care. Kenneth Davis has argued that ‘even the angels of mercy’ who took care of these dying patients ‘still



Figure 13: Photograph 165-WW-127(94); The full caption for this item is as follows: American Red Cross canteens, United States. Taking food to the [African American] family all down with the "Flu"; ca. 1917 -1919; American Unofficial Collection of World War I Photographs, 1917 - 1918; Records of the War Department General and Special Staffs, Record Group 165; National Archives at College Park, College Park, MD. [Online Version, <https://www.docsteach.org/documents/document/red-cross-food-family>, May 17, 2021]

³⁶⁴ Lent, M. (1918). The extent and control of influenza in Washington, D.C. *Public Health Nurse*, 20(12), 296-304.

³⁶⁵ Jones, M. M., & Saines, M. (2019). The Eighteen of 1918–1919: Black Nurses and the Great Flu Pandemic in the United States. *American Journal of Public Health*, 109(6), 877-884.

³⁶⁶ Keeling, A. W. (2020). The 1918 influenza pandemic: Lessons from the past for a global community. *Health Emergency and Disaster Nursing*, 7(1), 1–2. https://www.researchgate.net/publication/339216817_The_1918_influenza_pandemic_Lessons_from_the_past_for_a_global_community

³⁶⁷ Keeling, A. W. (2018). When Place Matters: The 1918 Flu Pandemic in Small Towns and Villages in the United States. *Windows in Time: Newsletter of the Eleanor C. Bjoring Centre for Nursing Historical Inquiry*, 26(2), 9–12. <https://pubmed.ncbi.nlm.nih.gov/30248253/>

had to confront the racism of the day'.³⁶⁸ Black nurses were also regularly massively underpaid in comparison to white nurses. A family in Winnemucca, Nevada, reportedly paid a black nurse \$30 a day for her services, which was half the monthly salary of a white army nurse.³⁶⁹ Another newspaper reported a case in which an advert was posted offering 'thirty dollars a day' for flu nurses, but the black women that applied were only 'offered \$20 a day'.³⁷⁰

The resilience of an undervalued profession

Arguably, nurses' resilience during this time was the most important factor for keeping society running smoothly and keeping the death toll as low as possible. When others would run from the pandemic, nurses took on the challenge: Deming recalls the pandemic as an example of 'the nursing [she] had dreamed of, this was nursing at its most demanding'.³⁷¹ Nurses acknowledged that they were the only effective method of helping patients, so despite limited numbers of staff, seeing their colleagues get sick, and knowing they themselves could contract the same illness, nurses 'remained professionals'.³⁷² Sister Madelaine highlighted the resilience of nurses throughout the whole pandemic as she recalls how they continued to work their hardest despite each evening being a 'repetition of the previous one – bathing the patients, distributing medicine and nourishment, and preparing for the morgue'.³⁷³

³⁶⁸ Davis, K. C. (2018). *More Deadly Than War: The Hidden History of the Spanish Flu and the First World War*. Henry Holt and Co.

³⁶⁹ Saunders, V. (1919) *Horizons. The Crisis*. 17(4), 160-210. 196. Retrieved from <https://www.marxists.org/history/usa/workers/civil-rights/crisis/0200-crisis-v17n04-w100.pdf>. (accessed 01/2021). Dock, L.L., Pickett, S. E., Noyes, C.D., Clement, F.F., Fox, E.G., & Meter, A.V.N. (1922) *History of American Red Cross Nursing*. The Macmillan Company. 374. Retrieved from <https://archive.org/details/historyofamerica00dock/page/n7/mode/2up?ref=ol&view=theater>. Accessed 09/2021.

³⁷⁰ Anonymous. (1918, December 2). Thirty Dollars Day for Nurse during the 'Flu'. *Ogden Daily Standard*. https://collections.lib.utah.edu/details?id=1542419&facet_topic_t=%22nurses%22&facet_setname_s=uum_1918fjn

³⁷¹ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309. https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

³⁷² University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>

³⁷³ Sister Sophie Madeleine. (1919). *Experiences During Epidemic / by Sister Sophie Madeleine*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from

For years, nothing had compared to the work of nurses, yet their dedication, resilience and hard work went almost unrecorded as the profession was still in its infancy. However, during the pandemic this started to change, as the hard work of nurses became increasingly noticeable. An article in the *American Journal of Nursing* in 1918 stated the importance of nursing work, and that ‘even though it is not being talked about’, it was well-known that they were all ‘trying to do [their] part’.³⁷⁴ Over and over again, nurses were reminded by doctors and other medical professionals that ‘everything [depended] on good nursing’, so it was their time to prove the importance of nursing to the rest of society.³⁷⁵ The reaction and perseverance of nurses during the pandemic became a steppingstone for showing the world how truly important the profession was, and how much more they could do if given the right help and opportunities. P. F. Cipriano has backed this statement by saying that in order to continue improving the work provided by nurses, governments and societies must in turn ‘care for the caregivers and invest in nurses’.³⁷⁶

Maurice Jacobs, a practitioner during the 1918 pandemic, spoke about the collective experiences of the medical profession; ‘we were all in the same boat, tossed about on pestilent seas, sick at heart and frustrated’.³⁷⁷ Hospitals were overcrowded and nurses were incredibly overworked, as they were required to work twelve hours a day minimum, with ‘only a short time for luncheon and dinner’.³⁷⁸ A public health nurse in Alabama recorded caring for over 139 patients over three days.³⁷⁹ Yet, despite this lack of help, the ward only recorded one fatality, highlighting the absolute necessity of the nurses work, and how crucial it was for keeping people alive, even when her skills were stretched so thin. Despite

<https://digital.library.villanova.edu/Item/vudl:631657#?c=&m=&s=&cv=1&xywh=-717%2C1016%2C3543%2C1527>. (Accessed 01/2021)

³⁷⁴ Anonymous. (1918). Experiences During the Influenza Epidemic. *American Journal of Nursing*, 19(3), 203–204.

https://journals.lww.com/ajnonline/Citation/1918/12000/I__EXPERIENCES_DURING_THE_INFLUENZA_EPIDEMIC.23.aspx

³⁷⁵ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

³⁷⁶ Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

³⁷⁷ Jacobs, M. (1965). *Reflections of a General Practitioner*. London: Johnson.

³⁷⁸ Letter from nurse to her friend at the Haskell Indian Nations University, Kansas. (October 17, 1918). Bureau of Indian Affairs. Record held at: National Archives at Kansas City. Record Group 75.

<https://www.archives.gov/exhibits/influenza-epidemic/records/volunteer-nurse-letter.pdf>. Retrieved 01/09/2021.

³⁷⁹ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history’s deadliest pandemic. shorturl.at/aolP3. Retrieved 01/09/2021.

the constant uphill battle and endless struggles that nurses faced, they continued to save ‘countless lives with their dedication’.³⁸⁰ Whilst the number of those available was altogether inadequate during the crisis, the response made by the nurses who remained proved the sheer importance of nurses’ work. Historical records report countless experiences of nurses and their ‘unselfish devotion to duty’ as they provided the best care they could, even under harsh conditions.³⁸¹ After caring for thousands of patients, and witnessing the deaths of many, exhausted and overworked nurses were repeatedly left with the feeling of ‘we tried our best’.³⁸² The *American Journal of Nursing* stated that the response of the nursing body was ‘so splendid’ that they had ‘an enlarged vision of courage, the self-sacrificing spirit and the true womanliness of nurses’.³⁸³

Nurses and volunteers found their motivation to keep going through the patients they kept alive. Patients were ‘glad to see us’ said Sister Mary Scholastica; ‘little did they realize how inexperienced we were, but with a good will and the help of the Sacred Heart we succeeded in calming many of the suffered’.³⁸⁴ As neighbours and family members were either reluctant to help or sick themselves, nurses were often the only ones left to help care for the sick, and ‘worked very hard’ to save as many lives as possible.³⁸⁵ Although there was little that caregivers could do to cure the virus, they could help to relieve suffering, again

³⁸⁰ Florence Nightingale Museum, London. Spanish Flu exhibition. Spanish Flu: Nursing during history’s deadliest pandemic. shorturl.at/aolP3

³⁸¹ Anonymous. (1918, November 21). Nurse Victims of Flu. *Liverpool Echo*, p. 4.

³⁸² Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA_1918.45.aspx. Sister Mary Scholastica. (1919). *My Experience during the epidemic / by Sister Mary Scholastica*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from <https://digital.library.villanova.edu/Item/vudl:630440#?c=&m=&s=&cv=1&xywh=-497%2C454%2C3356%2C1446>. (Accessed 01/2021).

³⁸³ Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85. https://journals.lww.com/ajnonline/Citation/1918/11000/THE_EPIDEMIC_OF_INFLUENZA.1.aspx

³⁸⁴ Sister Mary Scholastica. (1919). *My Experience during the epidemic / by Sister Mary Scholastica*. Villanova Digital Collection. Valvey Memorial Library, Villanova University, Pennsylvania. Retrieved from <https://digital.library.villanova.edu/Item/vudl:630440#?c=&m=&s=&cv=1&xywh=-497%2C454%2C3356%2C1446>. (accessed 01/2021).

³⁸⁵ Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California’s RN’s*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020

Cockayne, E. Oral History Interview conducted by Christopher Maggs. T/10. P11. Digitised 2009. Royal College of Nursing Archives, Edinburgh.

reiterating that nursing care was ‘crucially important’ and ‘the clearest predictor of survival’.³⁸⁶

The pandemic affected everybody in some way, and the question of ‘can’t something be done?’ was frequently heard by nurses.³⁸⁷ There were no miracle drugs or antibiotics, yet nurses kept working to keep patients alive to enable their immune systems to mobilize against the virus. Although there were obvious limitations and not everybody was able to receive proper nursing care when they fell ill, much was accomplished through the work of the nursing profession. The pandemic ‘taxed nurse manpower to the ultimate’.³⁸⁸ However, nurses were able to demonstrate their incredible resilience, and that they could mobilize their power, balance out the workload and overcome some racial boundaries to maximize their efforts to combat the pandemic as effectively as possible. They also brought more attention to the nursing profession, which resulted in a public outcry for more nurses.³⁸⁹ Along with their war service, the pandemic allowed nurses to be seen and heard for one of the first times in the profession’s history and provided nurses with vital skills and experiences that would prepare them for handling similar emergencies that would arise in the future.³⁹⁰

³⁸⁶ Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

³⁸⁷ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

³⁸⁸ Robinson, K. R. (1990). The Role of Nursing in the Influenza Epidemic of 1918–1919. *Nursing Forum*, 25(2), 19–26.

https://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/KRobinson_The%20role%20of%20nursing%20i n%20the%20influenza%20epidemic%20of%201918-1919.pdf

³⁸⁹ Robinson, K. R. (1990). The Role of Nursing in the Influenza Epidemic of 1918–1919. *Nursing Forum*, 25(2), 19–26.

https://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/KRobinson_The%20role%20of%20nursing%20i n%20the%20influenza%20epidemic%20of%201918-1919.pdf

³⁹⁰ Robinson, K. R. (1990). The Role of Nursing in the Influenza Epidemic of 1918–1919. *Nursing Forum*, 25(2), 19–26.

https://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/KRobinson_The%20role%20of%20nursing%20i n%20the%20influenza%20epidemic%20of%201918-1919.pdf

Chapter Five: Reflecting on infectious disease pandemics through public history: the importance of learning from the past during Covid19.

In 2020, the world was hit with yet another global pandemic: Covid19. The coronavirus pandemic 'awakened a community memory' of the Spanish influenza, which had been largely forgotten by the general public.³⁹¹ 'People are starting to realise that we have had a pandemic here before and there were huge losses' says Ms. Sheehan, the daughter of Vera Giles, a nurse that worked during the 1918 pandemic.³⁹² Many similarities resonate between the 1918 pandemic and Covid19, such as the rapid loss of life, the hardships and struggles of healthcare professionals and a feeling of global uncertainty. It is times such as this that learning from the past becomes crucial for improving our chances of survival against another deadly pandemic.

When looking at the history of pandemics, it is quickly recognisable that it is not 'if' another pandemic will occur, but 'when'. This makes it incredibly important for scientists, governments, and anybody else looking to prepare for the future, to research the history of pandemics. A broadcaster for the BBC commented in 2006 that the world has now passed the 'modern epidemiological transition', meaning that 'degenerative' diseases have now 'replaced infectious diseases as the main cause of death'.³⁹³ Yet it remains crucial to continue researching past pandemics to further 'strengthen our defences against future threats'.³⁹⁴ Alongside multiple other global pandemics such as Ebola, SARS, and the current Covid19 outbreak, there have been two endemic cases of worldwide influenza since the 1918 pandemic; one in 1957 and then in 1968. Scientific research has taught us that all the past pandemics were caused by three different antigenic subtypes of the influenza A virus, and it is assumed that when another influenza pandemic strikes, it will again 'arise from one

³⁹¹ Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles's memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

³⁹² Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles's memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

³⁹³ BBC. (2006). *Am I normal?* [Radio broadcast]. London: Radio 4.

³⁹⁴ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

of the sixteen known HA subtypes'.³⁹⁵ Scientific research has also taught us the workings of the virus, how they are spread, how the virus attacks the body, and how immune responses work against the virus. Yet, despite continuous epidemiological research, the world around us continues to develop every day, and in turn it becomes even more vulnerable to the next pandemic.³⁹⁶ Confined workspaces, the pace and frequency of global travel and the drastic increase of population in comparison to 1918 are all factors that create more ways for a new pandemic to spread.³⁹⁷ The world population in 1918 was only 28 percent of today's population, meaning that a pandemic on the same scale of the 1918 influenza outbreak would cause a death toll today of 175 to 350 million people worldwide.³⁹⁸

This invisible threat of a future pandemic highlights the importance of looking at the social and public history of those involved during pandemics. It becomes evident that there is much to learn from the past work of front-line workers, specifically nurses, in order to provide the best and most effective care to the patients who need it urgently. The history of nurses and their work to combat the virus quickly becomes just as important as the science behind the virus itself. The Spanish influenza became a critical timestamp on the history of the nursing profession. Nurses were given opportunities that they had never experienced before, responsibilities higher than their male medical counterparts, and the chance to 'mobilize their power'.³⁹⁹ Nurses pushing for change and voicing their own suggestions for caring for the sick also began to create a 'collective voice' for the nursing profession.⁴⁰⁰ Kathryn M. McPherson, a historian specialising in Canadian women's history, has argued that by creating a 'collective voice', nurses were able to more easily voice their opinions. This gave their arguments more 'meaning' in the 'broader political and economic sphere'.⁴⁰¹ But arguably more important than the voice that nurses were given during the influenza

³⁹⁵ Kilbourne, E. D. (2006). Influenza Pandemics of the 20th Century. *Emerging Infectious Diseases*, 12(1), 9–14. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3291411/#>.

³⁹⁶ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

³⁹⁷ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

³⁹⁸ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

³⁹⁹ Robinson, K. R. (2021). Comparing the Spanish flu and COVID-19 pandemics: Lessons to carry forward. *Nursing Forum*, 56(2), 350–357. <https://doi.org/10.1111/nuf.12534>

⁴⁰⁰ McPherson, K. M. (2003). *Bedside Matters: The Transformation of Canadian Nursing, 1900–1990*. University of Toronto Press. 67.

⁴⁰¹ McPherson, K. M. (2003). *Bedside Matters: The Transformation of Canadian Nursing, 1900–1990*. University of Toronto Press. 67.

pandemic, was the echo that they left behind. Available public history of the Spanish influenza and the way it compares to current pandemics, not only allows scientists to understand the past, but provides a method of education for the general public, so that they can understand the looming possibility of pandemics and what they can do to stay safe. This chapter will discuss the importance of public history for learning from the past to prepare efficiently for future pandemics, the accessibility and reliability of public history for the general public, and the way that nurses are continuously presented throughout history as ‘emblems of resilience’ for the rest of society during times of crisis.⁴⁰²

The value of public history.

Historians have argued over the meaning of public history, and what it is ‘meant to achieve’ since the early 1970s, but as the field has developed, it has become most known as ‘a calling designed to help people write, create, and understand their own history’.⁴⁰³ Public history is crucial for allowing the general public to understand history in a way that offers insight into their own lives in an easy to comprehend manner. Peter Christie, an English oral history lecturer, claims that public history is the best method of ‘connecting today’s population with its roots’.⁴⁰⁴ However, before the 1970s, professional, university-trained historians were the gatekeepers of almost all history that was produced and were seen as the arbiters of quality.⁴⁰⁵ The ‘myth’ around the ‘supremacy of the historian’ believed that historians were the only ones who could accurately produce historical narratives, allowing no room for access or interpretation by the general public.⁴⁰⁶ The way that the general public used history was not taken seriously by professional historians, and those who tried to

⁴⁰² Gordon, O. Gwinnup, A. Hallett, C. (2020). Learning from the past? Spanish influenza and the lessons for Covid-19. *Nursing Times*, 116(10), 27–31. <https://www.nursingtimes.net/clinical-archive/wellbeing-for-nurses/learning-from-the-past-spanish-influenza-and-the-lessons-for-covid-19-21-09-2020/>

⁴⁰³ Grele, R. J. (1981). Whose Public? Whose History? What Is the Goal of a Public Historian? *The Public Historian*, 3(1), 46. Weible, R. (2008, March 1). *Defining Public History: Is it possible? Is it necessary?* Perspectives on History. <https://www.historians.org/publications-and-directories/perspectives-on-history/march-2008/defining-public-history-is-it-possible-is-it-necessary#note2>. Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge.

⁴⁰⁴ Christie, P. (2004). Publications of 2004. *The Local Historian*, 35(1), 55–58. <https://www.balh.org.uk/publication-tlh-the-local-historian-volume-35-number-1-february-2005>

⁴⁰⁵ Butler, T. (2011, November 9). *What is History For?* History Workshop. Available at: <https://www.historyworkshop.org.uk/what-is-history-for/>. Accessed on 04/2021.

⁴⁰⁶ Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge.

understand the past were patronised as if they had no reason for wanting to learn about their own history.⁴⁰⁷ Therefore to allow a new ‘collaborative, radical’ form of public history to exist, historians had to ‘give up their traditional stance on everyday history-making’.⁴⁰⁸ They had to show a new found respect for anybody wanting to learn and write about history, and importantly gain the general public’s trust, so they could co-create reliable historical literature together; the resulting work is now referred to as public history.⁴⁰⁹

Ludmilla Jordanova, a British public historian, has stated that ‘the past is essentially open-ended, and accounts of it are public property, available for numerous uses’.⁴¹⁰ Arguably the most important use of public history is for preparing for the future; especially in the case of studying past pandemics. In the early 1920s, as the Spanish influenza ‘still threatened’ many, medical researchers, scientists, politicians, and historians in America began their research on the virus that caused the outbreak.⁴¹¹ Even whilst the 1918 pandemic was still taking place, organisations such as the *American Journal of Nursing* predicted that the pandemic would be ‘followed by others’ and that they should therefore ‘prepare [themselves] to meet them when they appear’.⁴¹² Intensive research and preparation have helped scientists learn more about influenza viruses and how to help treat them; for example, in 1933 a British biomedical research study on the Spanish influenza resulted in the discovery of the causative virus.⁴¹³ Researchers searched for ‘cause and cure’, but also documented and analysed the ‘impact of the epidemic on American culture’.⁴¹⁴ This research highlights the interest that both scientists and historians had at looking at the way pandemics affected not only those who were sick, but those around them who were left to

⁴⁰⁷ Butler, T. (2011, November 9). *What is History For?* History Workshop. Available at: <https://www.historyworkshop.org.uk/what-is-history-for/>. Accessed on 04/2021.

⁴⁰⁸ Butler, T. (2011, November 9). *What is History For?* History Workshop. Available at: <https://www.historyworkshop.org.uk/what-is-history-for/>. Accessed on 04/2021.

⁴⁰⁹ Butler, T. (2011, November 9). *What is History For?* History Workshop. Available at: <https://www.historyworkshop.org.uk/what-is-history-for/>. Accessed on 04/2021. Christie, P. (2004). Publications of 2004. *The Local Historian*, 35(1), 55–58. <https://www.balh.org.uk/publication-tlh-the-local-historian-volume-35-number-1-february-2005>

⁴¹⁰ Jordanova, L. (2000). *History in Practice*. Bloomsbury Publishing. 155.

⁴¹¹ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

⁴¹² Palmer, S. (1918). Editorial comment. *American Journal of Nursing*, 29(3), 155-156.

⁴¹³ Radetsky, P. (1991). *Invisible Invaders: The Story of the Emerging Age of Viruses*. Boston: Little, Brown and Company. Tognotti, E. (2003). Scientific Triumphalism and Learning from Facts: Bacteriology and the ‘Spanish Flu’ Challenge of 1918. *Social History of Medicine*, 16(1), 97-110.

⁴¹⁴ Stetler, C.M. (2017). The 1918 Spanish Influenza: Three Months of Horror in Philadelphia. *Pennsylvania History: A Journal of Mid-Atlantic Studies* 84(4), 462-487. <https://www.muse.jhu.edu/article/672913>.

continue living through the pandemic. Newspapers have been seen to perform this ‘essential function’ of including the every-day civilian into their narrative, ‘representing as much as possible of what was considered local significance’, both in the 1918 pandemic, and during the current Covid19 pandemic.⁴¹⁵

Toby Butler, a British oral historian, stated that ‘it is the usefulness of the past that drives people to create histories’.⁴¹⁶ Pandemic influenza remains a major risk to populations across the globe in the twenty-first century.⁴¹⁷ Although modern advancements in medicine provide society with a helping hand in reducing mortality rates, the importance of researching ‘epidemic control’ remains crucial.⁴¹⁸ By researching past pandemics, such as the 1918 Spanish influenza outbreak, countries have been able to plan significant public health interventions in an attempt to ‘reduce the incidence of severe outcomes in future pandemics’.⁴¹⁹ The positive effects of actions used during the 1918 pandemic such as social distancing, the use of quarantine, face masks and good use of sanitization have been seen and replicated in more recent pandemics, including the current outbreak of Covid19.⁴²⁰ Matthew Boyce stated that although the current Covid19 pandemic is ‘frightening’, it will eventually be contained by listening to the ‘century-old lessons’; ‘we must act swiftly, intentionally and implement multiple interventions simultaneously to curb the spread of disease’.⁴²¹ Unfortunately, much like the publications during the 1918 pandemic, the importance of nurses’ work during the Covid19 pandemic seems to be overlooked, ignored and neglected. Public history allows an insight into the every-day lives of those involved in

⁴¹⁵ Irving, H. (2020, April 6). *Public History, Flu Pandemics and the Provincial Media in 1918 and 2020*. Social History Society. https://socialhistory.org.uk/shs_exchange/public-history-flu-provincial-media/

⁴¹⁶ Butler, T. (2011, November 9). *What is History For?* History Workshop. Available at: <https://www.historyworkshop.org.uk/what-is-history-for/>. Accessed on 04/2021.

⁴¹⁷ Chandra, S., & Christensen, J. (2017). Preparing for Pandemic Influenza: The Global 1918 Influenza Pandemic and the Role of World Historical Information. *Journal of World Historical Information*, 4(1), 20-30.

⁴¹⁸ Glezen, W. P. (1996). Emerging Infections: Pandemic Influenza. *Epidemiologic Reviews*, 18(1), 64–74. <https://academic.oup.com/epirev/article/18/1/64/447194>

⁴¹⁹ Chandra, S., & Christensen, J. (2017). Preparing for Pandemic Influenza: The Global 1918 Influenza Pandemic and the Role of World Historical Information. *Journal of World Historical Information*, 4(1), 20-30. Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press. Boyce, M., & Katz, R. (2020, March 18). *The 1918 Influenza Pandemic and COVID-19*. PBS. <https://www.pbs.org/wgbh/americanexperience/features/1918-influenza-pandemic-and-covid-19/>

⁴²⁰ Oung, K. [New York Times]. (2020, March 14). *Coronavirus Racism Infected my High School* [Video]. The New York Times. <https://www.nytimes.com/video/opinion/100000007028034/racism-coronavirus-asians.html>

⁴²¹ Boyce, M., & Katz, R. (2020, March 18). *The 1918 Influenza Pandemic and COVID-19*. PBS. <https://www.pbs.org/wgbh/americanexperience/features/1918-influenza-pandemic-and-covid-19/>

events such as pandemics and allows us to learn from the past to help ourselves in the present, but undoubtedly the most important role of a public historian 'is as an educator' for the general public.⁴²²

Informing our current understanding: educating the public in times of crisis.

During a time of crisis, such as the 1918 Spanish influenza pandemic, and most recently the Covid19 pandemic, it is crucial to keep not only healthcare and front-line workers updated, but also to keep the general public involved and educated with what is happening around them. The Covid19 pandemic has demonstrated the 'value of accurate statistics for setting health policy and educating the public about likely outcomes'.⁴²³ Without reliable, educational, and readily available resources, mass panic can spread quickly amongst communities.⁴²⁴ The United States response to the 1918 influenza outbreak offers a case study of 'a communication strategy to avoid'.⁴²⁵ As the United States continued to fight during the First World War, the government attempted to 'control public perception' around the influenza outbreak by not broadcasting about it, in an attempt to not damage morale.⁴²⁶ However, the lack of education given to the public meant that rumours and fear became even more prevalent, and spread just as quickly as the virus itself.⁴²⁷ The idea that 'fear kills more than the disease' became a mantra in city after city across the United States, as many people isolated themselves in an attempt to stay away from anyone or anything that could have been in contact with the virus.⁴²⁸ During the start of the outbreak, the American general public were left with no advice or help as to how to stay safe, and

⁴²² Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge.

⁴²³ Ewing, E. T. (2021, April 1). *Measuring Mortality In The Pandemics Of 1918–19 and 2020–21*. Health Affairs. Retrieved 1 June 2021, from <https://www.healthaffairs.org/doi/10.1377/hblog20210329.51293/full/>

⁴²⁴ Van Hartesveldt, F. R. (1992). *The 1918–1919 Pandemic of Influenza: The Urban Impact in the Western World*. New York: Edwin Mellen Press.

⁴²⁵ Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

⁴²⁶ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

⁴²⁷ University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>

⁴²⁸ Van Hartesveldt, F. R. (1992). *The 1918–1919 Pandemic of Influenza: The Urban Impact in the Western World*. New York: Edwin Mellen Press. University of Pennsylvania School of Nursing. (2017). *Calm, Cool, Courageous: Nursing and the 1918 Influenza Pandemic*. Retrieved from <https://www.nursing.upenn.edu/history/publications/calm-cool-courageous/>

therefore, as stated by the *Literary Digest*, fear became the ‘first enemy’ as the mass panic had to be quelled alongside caring for the sick.⁴²⁹ A. Bloomfield and G. Harrop made observations that hospitals also kept information regarding the pandemic away from the patients: ‘no medical or scientific books, or newspapers, were allowed in the wards’.⁴³⁰ They believed that nurses and doctors decided to censor the information as the ‘harrowing accounts of the epidemic ... might have a bad effect on the patients [that were] already depressed’.⁴³¹

Alongside fear, ignorance was another significant problem. Due to the lack of information given to the American public from their governments, the Spanish influenza became ‘a danger too late realized’, and therefore caused public health officials in cities and towns to lose weeks of preparation time.⁴³² The lack of available information also damaged the general public’s understanding of the virus, as *The Globe* stated; the situation remained ‘greatly misunderstood’ by the majority of the public, as many believed it was just another flu, and only found out the severity of it when it was too late.⁴³³ The choice by the American government to provide ‘fake reassurance’ and withhold information from the general public caused a major loss of credibility.⁴³⁴ The lack of information was also seen in some British newspapers. The *Daily Mail* wrote an article on the 6th of June 1918 titled ‘is influenza coming?’.⁴³⁵ The article begins by stating that most attacks of influenza are ‘no worse’ than a cold and that people should not have ‘any dread’ about the virus.⁴³⁶ However, the article also created a lot of confusion as although it tried to reassure the public, it also stated that people should ‘prepare [their] defences now’.⁴³⁷ This article also shows the neglect

⁴²⁹ Van Hartesveldt, F. R. (1992). *The 1918–1919 Pandemic of Influenza: The Urban Impact in the Western World*. New York: Edwin Mellen Press.

⁴³⁰ Bloomfield, A. L., & Harrop, G. A. (1919). *Clinical observations on epidemic influenza*. Baltimore University. <https://archive.org/details/101581780.nlm.nih.gov/page/n1/mode/2up?q=nurses>. 4.

⁴³¹ Bloomfield, A. L., & Harrop, G. A. (1919). *Clinical observations on epidemic influenza*. Baltimore University. <https://archive.org/details/101581780.nlm.nih.gov/page/n1/mode/2up?q=nurses>. 4.

⁴³² Anonymous. (1918, September 27) “Topics of the Times,” *New York Times*. p2.

⁴³³ Anonymous. (1919, February 19). Dearth of Nurses. *Globe*, p. 7.

⁴³⁴ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

⁴³⁵ Anonymous. (1918, June 6). Is Influenza Coming? *The Daily Mail*. <https://www.historic-newspapers.co.uk/old-newspapers/daily-mail/>

⁴³⁶ Anonymous. (1918, June 6). Is Influenza Coming? *The Daily Mail*. <https://www.historic-newspapers.co.uk/old-newspapers/daily-mail/>

⁴³⁷ Anonymous. (1918, June 6). Is Influenza Coming? *The Daily Mail*. <https://www.historic-newspapers.co.uk/old-newspapers/daily-mail/>

towards the work of nurses during the pandemic, as it recommended that the key advice to keeping safe and healthy during the pandemic was to 'maintain a cheery outlook' as 'depressed mental states' increased the chance of contracting the virus.⁴³⁸

Looking at the way the United States handled the pandemic in view of the general public allows us to see how important it is to keep everyone involved and up to date with what is going on around them. This is especially prevalent whilst living in the midst of the Covid19 pandemic, an outbreak that has many similarities to that of the 1918 pandemic. Covid19 is a respiratory disease similar to that of the H1N1 virus that caused the Spanish influenza and the initial response to the virus 'relied heavily on non-pharmaceutical interventions and supportive treatment'.⁴³⁹ The mass usage of social media in 2020 led to grave concern over the spread of misinformation, as just how rumours 'passed in the streets in 1918' they 'today pass over internet blogs' even quicker.⁴⁴⁰ As argued by John M. Barry, an American historian who has studied the 1918 influenza pandemic in depth, it is crucial for governments and media outlets to retain trust from the general public during times of crisis.⁴⁴¹ Public history is arguably the most effective and reliable way to educate the general public on events such as the pandemic. Raphael Samuel, an expert in the importance of memory and public history, stated that history is a 'social form of knowledge; the work in any given instance, of a thousand different hands'.⁴⁴² This argument shows the importance of having insights and opinions from every section of society, not just the historians, in order to create a history that everyone can understand and relate to. Pedro Ramos Pinto has also argued the importance of keeping the general public involved when creating history as 'historical knowledge is not an inert, standardized commodity such as a screw ... but rather a malleable product which is itself shaped by these various processes'.⁴⁴³ Jerome de Groot, a specialist in public and popular history, has argued that some of the most successful ways

⁴³⁸ Anonymous. (1918, June 6). Is Influenza Coming? *The Daily Mail*. <https://www.historic-newspapers.co.uk/old-newspapers/daily-mail/>

⁴³⁹ Boyce, M., & Katz, R. (2020, March 18). *The 1918 Influenza Pandemic and COVID-19*. PBS. <https://www.pbs.org/wgbh/americanexperience/features/1918-influenza-pandemic-and-covid-19/>

⁴⁴⁰ Boyce, M., & Katz, R. (2020, March 18). *The 1918 Influenza Pandemic and COVID-19*. PBS. <https://www.pbs.org/wgbh/americanexperience/features/1918-influenza-pandemic-and-covid-19/> Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

⁴⁴¹ Barry, J. M. (2009). Pandemics: avoiding the mistakes of 1918. *Nature*, 459, 324-325.

⁴⁴² Samuel, R. (1994). *Theatres of Memory: The Past in Contemporary Culture*. Verso. 15.

⁴⁴³ Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge. 9.

that history is now spread throughout society is through accessible and entertaining forms of media such as films, books, music and television.⁴⁴⁴ By incorporating public history into the media around us, it allows the study of history to become a 'leisure activity' that everybody can be involved in.⁴⁴⁵ H. Irving stated whilst documenting the Covid19 pandemic that although 'writing this particular history' was a 'daunting' task, it was 'essential'.⁴⁴⁶

The use of television is arguably the most 'widely and eagerly' consumed method of educational history.⁴⁴⁷ It often provides an easy-to-understand summary of its topic that can help to 'shed some light and truth' on often overlooked or misunderstood subjects.⁴⁴⁸ This is especially prevalent when trying to give the general public an insight into the crucial work of nurses and medical professionals during the pandemic. This, in turn, teaches the general public the importance of nursing care and creates an expectation for 'communities to be able to nurse the sick ... for people at home' to help relieve the pressure on nurses.⁴⁴⁹

Television has been crucial for educating the general public on the Covid19 pandemic, whilst also using lessons from the Spanish influenza pandemic to learn from the past. Henry Irving wrote in the *Public History* journal about the use of media to spread awareness and information during both pandemics and the effect it has on the general public: he highlighted the importance of using past experiences to prepare for current events as 'the past [revisits] us in the present'.⁴⁵⁰ In 2018 many television specials were broadcast in remembrance of the 100 year anniversary of the Spanish influenza pandemic, such as *The Flu that Killed 50 Million, Pandemic: The Story of the 1918 Flu and American Influence* –

⁴⁴⁴ De Groot, J. (2016). *Consuming History: Historians and Heritage in Contemporary Popular Culture*. Taylor & Francis Group. 165. Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge.

⁴⁴⁵ De Groot, J. (2016). *Consuming History: Historians and Heritage in Contemporary Popular Culture*. Taylor & Francis Group. 177.

⁴⁴⁶ Irving, H. (2020, April 6). *Public History, Flu Pandemics and the Provincial Media in 1918 and 2020*. Social History Society. https://socialhistory.org.uk/shs_exchange/public-history-flu-provincial-media/

⁴⁴⁷ Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge. 1.

⁴⁴⁸ Pinto, P. R., & Taithe, B. (2015). *The Impact of History? Histories at the Beginning of the 21st Century* (1st ed.). Routledge. 17.

⁴⁴⁹ Wood, P.J. (2016). Managing boundaries between professional and lay nursing following the influenza pandemic, 1918-1919: insights for professional resilience today? *Journal of Clinical Nursing*, 26 (1), 805-812.

⁴⁵⁰ Irving, H. (2020, April 6). *Public History, Flu Pandemics and the Provincial Media in 1918 and 2020*. Social History Society. https://socialhistory.org.uk/shs_exchange/public-history-flu-provincial-media/

Influenza 1918.⁴⁵¹ Television programmes such as these provide the general public with entertaining, relatable, and heart-wrenching stories from those involved and affected by the 1918 pandemic, whilst also providing a reliable educational source of information that easily explains what happened from 1918-1920. Some television stations, notably ITV, created documentaries such as *2020: The Story of Us*, that provided an insight into the work of nurses and their hardships during the Covid19 pandemic.⁴⁵² This documentary also included nurses' thoughts regarding the pandemic and had a large focus on the affects that working during a pandemic can have on the mental health of nurses. Covid19 and the 1918 Spanish influenza pandemic have also created inspiration for many fictional pieces of entertainment that highlight the work of nurses such as *Help*, *Downton Abbey*, *Station Eleven* and *Pale Horse*, *Pale Rider*.⁴⁵³ In 2006, E. Kilbourne emphasised the importance of keeping the public educated to reduce fear and panic as 'will there ever be another 1918?' became an increasingly asked question, which then became reality in 2020.⁴⁵⁴ Since the outbreak of the Covid19 pandemic, television outlets have broadcasted many specials highlighting the Covid19 virus, specifically looking at how its spread, how nurses and medical professionals are helping to combat the virus, and how people at home can help and reduce the spread too.⁴⁵⁵ Kilbourne has argued that by looking at past pandemics we are able to learn that although 'hand washing, hand wringing, public education, [and] gauze masks' help society to prepare for modern pandemics, the 'keystone of influenza prevention is vaccination'.⁴⁵⁶ This in turn helps as another educational key to convince more of the general public to get vaccinated when they can, as historical evidence suggests that is the most effective way to

⁴⁵¹ Bright, R. & Thompson, A. (2018). *The Flu That Killed 50 Million*. [Television Broadcast]. BBC. Byrne, A. (2018). *Pandemic: The Story of the 1918 Flu*. [Television Broadcast]. BBC. Collins, M. & Collins, R. (2006) American Experience - Influenza 1918. [Television Broadcast]. PBS.

⁴⁵² ITV. 22 March 2021. *2020: The Story of Us*. [Television Broadcast]. ITV.

⁴⁵³ Fellowes, J. (February 13 2012). *Downton Abbey, Season Two, Episode Six*. [Television Broadcast]. ITV. Channel Four Television Corporation. (16 September 2021). *Help*. [Television Broadcast]. Channel Four. St. John Mandel, E. (2014). *Station Eleven*. Picador. Porter, K. A. (1939). *Pale Horse, Pale Rider*. Penguin Modern Classics.

⁴⁵⁴ Kilbourne, E. D. (2006). Influenza Pandemics of the 20th Century. *Emerging Infectious Diseases*, 12(1), 9–14. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3291411/#>

⁴⁵⁵ A list of recent TV broadcasts looking at the Covid19 pandemic: Anonymous. (2021, April 26) *Covid-19 in India: A country struggling to breathe*. [Video]. YouTube.

https://www.youtube.com/watch?v=Gm_4CD0zWB4&ab_channel=BBC. Anonymous (2020) *Hospital: Coronavirus Special*. [Television Broadcast]. BBC. Cheshire, T. (2020) *COVID-19: How It Began*. [Television Broadcast]. Sky.

⁴⁵⁶ Kilbourne, E. D. (2006). Influenza Pandemics of the 20th Century. *Emerging Infectious Diseases*, 12(1), 9–14. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3291411/#>

combat outbreaks of influenza. De Groot has argued that experiencing key events, such as the Covid19 pandemic, provides an 'individualised resonance' and allows the general public an easier way to 'connect and empathise' with the experiences of the past.⁴⁵⁷ The events of Covid19 creates an increased desire for people to find out how the 1918 pandemic affected society and the resonances and stark differences between the two pandemics. This connection between Covid19 and the 1918 Spanish influenza pandemic has made public history even more critical as the general public reach out for more information in an attempt to find comfort and hope through knowledge of the past.⁴⁵⁸

'Emblems of resilience':⁴⁵⁹ a forgotten voice and an ongoing legacy.

Despite the severity of the 1918 Spanish influenza pandemic, its historical presence has often been overshadowed by that of the First World War.⁴⁶⁰ The period only became a topic of interest for historians in the late 1990s, and only spread into public history in 2018 as it marked the centenary of the pandemic. This has since been followed by an outburst of available public history due to the comparisons to the ongoing Covid19 outbreak. Although the 1918 pandemic has often been regarded as 'a time to forget', it was also a time that 'some would always remember': specifically the nurses.⁴⁶¹ The Spanish influenza pandemic became a 'pivotal moment for nursing', as it 'gave new resolve to nurses and nursing organizations by emphasizing the vast importance of skilled nursing in 'times of peace as well as war', which is felt just as strongly in the present day.⁴⁶² Yet the importance of nurses was not initially recognised due to the profession still being in its infancy. However, one key

⁴⁵⁷ De Groot, J. (2016). *Consuming History: Historians and Heritage in Contemporary Popular Culture*. Taylor & Francis Group. 177.

⁴⁵⁸ Eghigian, G. (2020). The Spanish Flu Pandemic and Mental Health: A Historical Perspective. *Psychiatric Times*, 37(5). 26. <https://www.psychiatrictimes.com/view/spanish-flu-pandemic-and-mental-health-historical-perspective>

⁴⁵⁹ Gordon, O. Gwinnup, A. Hallett, C. (2020). Learning from the past? Spanish influenza and the lessons for Covid-19. *Nursing Times*, 116(10), 27–31. <https://www.nursingtimes.net/clinical-archive/wellbeing-for-nurses/learning-from-the-past-spanish-influenza-and-the-lessons-for-covid-19-21-09-2020/>

⁴⁶⁰ Quinn, T. (2008). *Flu: A Social History of Influenza*. London: New Holland Publishers.

⁴⁶¹ Collins, M. & Collins, R. (2006) American Experience - Influenza 1918. [Television Broadcast]. PBS.

⁴⁶² Hanink, E (2017). Nursing During the Spanish Flu Epidemic of 1918. *Working Nurse: Career Advice and Opportunities for California's RN's*. 7-8. <https://www.workingnurse.com/articles/Nursing-During-the-Spanish-Flu-Epidemic-of-1918>. Accessed 03/2020. Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

point continued to resonate throughout historical writings on the topic: nurses were, and still are, 'emblems of resilience' for the general public in times of crisis.⁴⁶³ Nurses have been depicted as 'angels' throughout media and history, suggesting that their work provides a sense of godliness and hope for those around them.⁴⁶⁴ However, this angelic imagery of nurses can also be unhelpful as it suggests that nurses have an 'innate ability to care' developed from an expectation that caring would be a part of a woman's duty to family and community'.⁴⁶⁵ This narrative ignores the immense amount of knowledge and training needed to be a nurse, and greatly undermines the professionalism of the nursing profession. It also suggests that nurses are immune to contracting infectious diseases, when in reality they are the opposite.⁴⁶⁶ Jessica Stokes-Parish has also reported on the 'unintended consequence of the hero narrative' regarding Covid19 nurses.⁴⁶⁷ Stokes-Parish states that the 'harmful commentary of heroism' reinforces a 'feminized, gendered workforce' that 'serves to disempower and silence nurses'.⁴⁶⁸ The British Association of Critical Care nurses made a powerful statement regarding the topic:

'We're not angels, we're not heroes, we are human beings that have chosen a career, that are highly educated, that work in a patient safety-critical profession, who simply want to go and do the job that we trained to do and be protected to do it'.⁴⁶⁹

⁴⁶³ Gordon, O. Gwinnup, A. Hallett, C. (2020). Learning from the past? Spanish influenza and the lessons for Covid-19. *Nursing Times*, 116(10), 27–31. <https://www.nursingtimes.net/clinical-archive/wellbeing-for-nurses/learning-from-the-past-spanish-influenza-and-the-lessons-for-covid-19-21-09-2020/>

⁴⁶⁴ Gordon, S., & Nelson, S. (2005). An end to angels. *American Journal of Nursing*, 105(5), 62–69. <https://pubmed.ncbi.nlm.nih.gov/15867536/>. Belcher, M. C. (2004). VIEWPOINT: I'm No Angel: I am a nurse—and that's enough. *American Journal of Nursing*, 104(7), 13. https://www.nursingcenter.com/journalarticle?Article_ID=514333

⁴⁶⁵ Reverby, S. M. (1987). *Ordered to Care: The Dilemma of American Nursing, 1850- 1945*. Cambridge: Cambridge University Press. 2.

⁴⁶⁶ Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

⁴⁶⁷ Stokes-Parish, J., Elliot, R., Rolls, K., & Massey, D. (2020). Angels and Heroes: The Unintended Consequence of the Hero Narrative. *Wiley Public Health Emergency Collection*, 52(5), 462–466. <https://sigmapubs.onlinelibrary.wiley.com/doi/10.1111/jnu.12591>

⁴⁶⁸ Stokes-Parish, J., Elliot, R., Rolls, K., & Massey, D. (2020). Angels and Heroes: The Unintended Consequence of the Hero Narrative. *Wiley Public Health Emergency Collection*, 52(5), 462–466. <https://sigmapubs.onlinelibrary.wiley.com/doi/10.1111/jnu.12591>

⁴⁶⁹ British Association of Critical Care Nurses. (2020). Not angels not heroes, educated people who work in a safety critical profession. BBC. Retrieved from <https://www.facebook.com/watch/?v=232939254681969>

As nurses continued to struggle to have their voices heard, and as public history was not yet properly established, recording nurses duties and practices during the 1918 pandemic were not a priority. Many nurses were not recognised for their hard work until after the pandemic had ended, as evidenced by a letter written by D. Dougherty, the Archbishop of Philadelphia, beginning with ‘now that the influenza epidemic has abated, I think it a fitting time to send you my heartfelt thanks for your good work during the plague’.⁴⁷⁰ Therefore, some nurses took it into their own hands to create their own histories by writing personal memoirs to document their experiences during the Spanish influenza pandemic; highlighting their ‘unwearied kindness and unselfish devotion to [their] patients’.⁴⁷¹ D. Dougherty also wrote a letter in 1918 that emphasized the ignorance that many held towards the work of nurses, stating that only the nurses themselves ‘fully realise[ed] what inconveniences [they] were put in and what sacrifices [they] made’.⁴⁷² Sister M. Ethelreda wrote in 1919 ‘we felt proud to be nurses ... we did the best we could and our hearts were in our work’.⁴⁷³ Ethelreda also noted how ‘poor suffering men were cheered by our presence’, which solidified the idea of nurses being viewed as angel-like beings for those in need.⁴⁷⁴ Nancy Bristow has argued that although nurses ‘acknowledged the horror of the disease and the wretched state of their victims’ in their memoirs, most still ‘recounted their experiences in the epidemic positively’.⁴⁷⁵ This contagious positivity is also seen when looking at the nurses working amidst the Covid19 pandemic, both through recordings of personal experiences, and through the media. An example of this was seen in 2020 when the popular band *Lawrence* released a song called *Quarantined with You* that documented the relatable

⁴⁷⁰ Dougherty, D. J. (1920). *Letter (copy), To: "Rev. dear Mother Superior & Sisters" From: D. J. Dougherty Archbishop of Philadelphia, November 9, 1920.*

<https://digital.library.villanova.edu/Item/vudl:635467#c=&m=&s=&cv=&xywh=-720%2C654%2C3729%2C1607>

⁴⁷¹ Anonymous. (1915) Review of Luckes E.C.E *General Nursing* by Eva C. E. Luckes. *The American Journal of Nursing*, 15(5), 434-43.

⁴⁷² Dougherty, D. J. (1918). *Letter (copy), To: "Rev. dear Mother Superior & Sisters" From: D. J. Dougherty Archbishop of Philadelphia, November 9, 1918.*

<https://digital.library.villanova.edu/Item/vudl:635467#c=&m=&s=&cv=&xywh=-720%2C654%2C3729%2C1607>

⁴⁷³ Sister M. Ethelreda, I. (1919). *Rev. and Dear Mother / by Sister M. Ethelreda.*

<https://digital.library.villanova.edu/Item/vudl:631617#c=&m=&s=&cv=2&xywh=-703%2C6%2C4028%2C1736>

⁴⁷⁴ Sister M. Ethelreda, I. (1919). *Rev. and Dear Mother / by Sister M. Ethelreda.*

<https://digital.library.villanova.edu/Item/vudl:631617#c=&m=&s=&cv=2&xywh=-703%2C6%2C4028%2C1736>

⁴⁷⁵ Bristow, N. K. (2005). “You Can’t Do Anything for Influenza:’ Doctors, Nurses and the Power of Gender During the Influenza Pandemic in the United States”. In H. Phillips, & D. Killingray (Eds.) *The Spanish Influenza Pandemic of 1918-19: New Perspectives*. London: Routledge.

experiences of quarantining during the Covid19 pandemic. The chorus consists of the following lyrics:

‘There are doctors, there are nurses working every day.

And they are the real heroes, I think that's fair to say.

It's their courage and their smile, that help me make it through.’⁴⁷⁶

Nurses’ positive impact on the general public during the Covid19 pandemic is more visible than ever, as just like in 1918, they were seen as emblems of resilience and beacons of light in times of darkness but are now being put under the spotlight unlike their predecessors during the Spanish influenza.

However, although nurses, both in 1918 and now, are described as ethereal beings, this does not mean they are ‘immune’ to the toll that living through a pandemic can bring to a person’s mental health.⁴⁷⁷ Nurses were not so angel-like that they could be emotionally oblivious to the patients they could not save, the grieving families that surrounded them, and the loss of fellow nurses, friends, and family. Historical records show that the pandemic, like the war, ‘took a toll on the emotional resilience’ of those working during the pandemic: ‘the massive and sudden loss of life plunged many into a chronic state of helplessness and anxiousness’.⁴⁷⁸ Nancy Bristow has stated that many ‘surviving health professionals [noted] that they were haunted by a sense of frustration and grief, even years later’.⁴⁷⁹ Sister Ethelreda wrote that from the start to the end of the pandemic, she remained ‘shocked and stupefied’ by the ‘horrors’ she saw each day, never becoming fully accustomed to it.⁴⁸⁰ Vera Giles reported that she and her nursing colleagues ‘didn’t discuss [their] feelings’.⁴⁸¹ Dorothy

⁴⁷⁶ Lawrence (2020). Quarantined With You. Beautiful Mind Records. Available at: <https://open.spotify.com/track/6ZxWtJqM3r2imGqHFxZSDr?si=7cce09c1111a487a>. Accessed 09/2021.

⁴⁷⁷ Bristow, N. K. (2012). *American Pandemic: The Lost Worlds of the 1918 Influenza Epidemic*. Oxford University Press.

⁴⁷⁸ Eghigian, G. (2020). The Spanish Flu Pandemic and Mental Health: A Historical Perspective. *Psychiatric Times*, 37(5). 26. <https://www.psychiatrictimes.com/view/spanish-flu-pandemic-and-mental-health-historical-perspective>

⁴⁷⁹ Bristow, N. K. (2012). *American Pandemic: The Lost Worlds of the 1918 Influenza Epidemic*. Oxford University Press.

⁴⁸⁰ Sister M. Ethelreda, I. (1919). *Rev. and Dear Mother / by Sister M. Ethelreda*. <https://digital.library.villanova.edu/Item/vudl:631617#?c=&m=&s=&cv=2&xywh=-703%2C6%2C4028%2C1736>

⁴⁸¹ Johnson, S. (2020, August 21). *Spanish flu nurse Vera Giles’s memories, recorded by her daughter, resonate amid COVID-19*. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

Deming, a nurse during the 1918 pandemic recalled being 'fairly well prepared for this ordeal; prepared, that is, for all but the emotional impact of the situation'.⁴⁸² Deming goes on to recollect about one day that her and her colleagues could no longer bottle up their emotions:

'One glorious morning ... after a particularly sad death, I knew the tears I had been shedding inwardly must find outlet. I rushed to the linen closet, always our place of refuge, and there ahead of me, was Dorothy, sobbing her heart out. We really let go. I wonder about this sometimes when I hear people say nurses are hard-boiled'.⁴⁸³

Multiple studies have also shown that nurses working during the Covid19 pandemic have also experienced 'psychological distress' from carrying the heavy burden of caring for their patients whilst also being the 'emblem of resilience' for the general public.⁴⁸⁴ Therefore this idea of nurses being angelic and 'hard-boiled' must be cast aside in order to provide nurses with the proper emotional support that they need.⁴⁸⁵ It must be noted by both historians and the general public that nurses were, and continue to be, more than just a light in the dark for a scared society, and should be remembered and documented in history for their hard work, extensive knowledge and dedication alongside their positivity and selflessness.

⁴⁸² Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

⁴⁸³ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

⁴⁸⁴ Galehdar, N., Kamran, A., Toulabi, T., & Heydari, H. (2020). Exploring nurses' experiences of psychological distress during care of patients with COVID-19: a qualitative study. *BMC Psychiatry*, 20(489), 1–9.

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⁴⁸⁵ Deming, D. (1957). Influenza –1918. *American Journal of Nursing*, 57(10), 1308–1309.

https://journals.lww.com/ajnonline/Citation/1957/10000/INFLUENZA__1918.45.aspx

Conclusion

The Spanish influenza pandemic struck every corner of the world, and by 1920 it became the 'worst acute infectious disease outbreak in modern history'.⁴⁸⁶ Although 'science was sufficiently sophisticated' to anticipate that another influenza outbreak would occur, the world remained 'largely powerless' to its devastating impact.⁴⁸⁷ As doctors felt helpless and no drugs had any effect, it quickly became obvious that the hard and tireless work of nurses was the only effective method of keeping patients alive, and such, the Spanish influenza became 'the final reckoning' for the nursing profession.⁴⁸⁸ The mountain of problems that nurses faced in the height of the pandemic made for an incredibly hard challenge, and as stated by Vera Giles, 'there were some very sad moments, but we just had to carry on'.⁴⁸⁹ From keeping patients alive to training new nurses, from breaking down racial barriers to gaining their political voice and making change, the nursing profession showed that their job 'should be respected as a legitimate career'.⁴⁹⁰ The Spanish influenza allowed nurses to 'claim professional recognition' from the rest of the medical community and prove that they were more than just assistants.⁴⁹¹ Although the 1918 pandemic was a milestone for the nursing profession, and the recognition of nurses is much higher now than it was during 1918, there is still 'much need for improvement for respecting the profession'.⁴⁹² The Spanish influenza provided important lessons for future generations, both in the nursing profession and the general public, surrounding the treatment of infectious patients. Colon

⁴⁸⁶ Boyce, M., & Katz, R. (2020, March 18). *The 1918 Influenza Pandemic and COVID-19*. PBS.

<https://www.pbs.org/wgbh/americanexperience/features/1918-influenza-pandemic-and-covid-19/>

⁴⁸⁷ Knobler, S. L., Mack, A., & Mahmoud, A. (2005). *The Threat of Pandemic Influenza: Are We Ready? Workshop Summary*. Washington: National Academies Press.

⁴⁸⁸ Anonymous. (1918). The Epidemic of Influenza. *The American Journal of Nursing*, 19(2), 83–85.

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⁴⁸⁹ Johnson, S. (2020, August 21). Spanish flu nurse Vera Giles's memories, recorded by her daughter, resonate amid COVID-19. ABC News. <https://www.abc.net.au/news/2020-08-21/memories-of-spanish-flu-nurse-echo-during-present-pandemic/12545754>

⁴⁹⁰ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

⁴⁹¹ Onion, R. (2019, February 18). *Did We Forget to Memorialize Spanish Flu Because Women Were the Heroes?* Slate. Retrieved February 2020, from <https://slate.com/technology/2019/02/spanish-flu-women-nurses-heroism.html>

⁴⁹² Cipriano, P.F. (2018). 100 years on: the Spanish flu, pandemics and keeping nurses safe. *International Nursing Review*, 65 (3), 305-306. <https://onlinelibrary-wiley-com.libaccess.hud.ac.uk/doi/10.1111/inr.12483>

expressed that the influenza nurses of 1918 ‘succeeded in teaching lasting lessons in sanitization and prevention of disease’.⁴⁹³ By looking at the hard work being done by nurses currently during the Covid19 pandemic, we see stark resonances between the two pandemics. Learning from the past will always be crucial for preparing for the next inevitable pandemic and will encourage others to continue to build respect for the nursing profession. It was very easy for the governments and members of the public of 1918 to use the word ‘angels’ to describe the work and mannerisms of nurses. Just as it is easy for today’s governments and journalists to use the word ‘heroes’. The use of such words to describe nurses is effortless, but it is unfathomably difficult to clearly acknowledge and describe the hard work and resilience that is continuously provided by nurses in times of global crisis. It is possible that through proper documentation and research regarding pandemics, such as Covid19, that the hard work of nurses will be remembered and appreciated more than the forgotten ‘angels’ of the 1918 Spanish influenza pandemic.

⁴⁹³ Colon, A. (1919). Experiences during the epidemic: Influenza at Cedar Branch camp. *American Journal of Nursing*, 19(8), 605-607.

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