Waiting for the Flu: Cognitive Inertia and the Spanish Influenza Pandemic of 1918–19

TOM DICKE

Department of History, Missouri State University, Springfield, Missouri.
Email: tomdicke@missouristate.edu

ABSTRACT. This study looks at public awareness and understanding of the Spanish flu in the United States between June 1918, when the flu became “Spanish,” and the end of September when the deadly second wave reached the majority of the country. Based on an extensive reading of local newspapers, it finds a near universal lack of preparation or panic or other signs of personal concern among those in the unaffected areas, despite extensive and potentially worrying coverage of the flu’s progress. The normal reaction to news of the inexorable approach of a pandemic of uncertain virulence is anxiety and action. The Spanish flu produced neither in the uninfected areas for a month. The most likely reason appears to be cognitive inertia—the tendency of existing beliefs or habits of thought to blind people to changed realities. This inertia grew out of the widespread understanding of flu as a seasonal visitor that while frequently unpleasant almost never killed the strong and otherwise healthy. This view of the flu was powerful enough that it blinded many in the unaffected regions to the threat for weeks even in the face of daily or near daily coverage of the pandemic’s spread. **KEYWORDS:** Spanish flu; cognitive inertia; pandemic; epidemic; influenza; public health emergency; newspapers.

AT 8:00 p.m. on Saturday, September 28, 1918, the doctors of the Greene County Medical Society met in Springfield, the county seat and a city of roughly thirty-eight thousand near the center of the Missouri Ozarks.¹ By that time, the deadly second

1. “Physicians to Meet,” *Springfield Missouri Daily Republican* [hereafter cited as *SMDR*] September 28, 1918, 9. In fact, the flu was already in the area. Springfield experienced its first reported flu death on Monday, September 30. The epidemic exploded the following day.

wave of the great Spanish influenza pandemic of 1918–19 had already been in the United States for a month. Despite the near certainty that the flu would soon reach them, other concerns, such as an after dinner presentation on diabetes, held the doctors' interest that night. Springfieldians in general likewise appeared undisturbed that they stood in the path of a pandemic. Ignorance was not the cause of their indifference. In the preceding two weeks, the city's two newspapers had published over three dozen flu-related reports and while this volume of coverage indicates Springfieldians were aware of the flu, nothing in any of those reports suggests they were anxious about the approaching outbreak. Such nonchalance was typical of those who had yet to experience the Spanish flu firsthand. For nearly the whole of September in cities and towns across the United States millions sat aware but inactive until the flu appeared and their neighbors began to die.

Even a cursory reading of American newspapers after the deadly second wave hit in late August shows it was widely reported that this strain was significantly more contagious and possibly more virulent than a normal flu.² How then to explain why it took weeks for most people to recognize a danger that should have been apparent in days? In the years since 1918, the few writers to touch on the question have either implied that wartime concerns absorbed public attention to a point that overshadowed apprehension over the flu or that flu coverage was purposely suppressed or downplayed in an effort to prevent panic or maintain morale in the closing months of World War I.³ This may

2. Newspapers were the only mass media for timely nonlocal news in 1918 as such they defined public knowledge about national or international events during that time. See Michael Schudson, *The Power of News* (Cambridge: Harvard University Press, 1995), Chapter 1, for a brief but perceptive overview of the importance of newspapers in American society. As of the summer of 2013, the Library of Congress historic newspapers collection (<http://chroniclingamerica.loc.gov/>) contained over one hundred and twenty-five thousand pages from 174 newspapers covering some portion 1918. These papers contained well over ten thousand pages with at least one mention of the word "influenza." This collection was searched using a variety of keywords. For an interesting report of an alternative search method, see E. Thomas Ewing, Samah Gad, and Naren Ramakrishnan, "Gaining Insights into Epidemics by Mining Historical Newspapers," *Computer*, June 2013, 46, 68–72 or E. Thomas Ewing, Samah Gad, Bernice L. Hausman, Kathleen Kerr, Bruce Pencek, and Naren Ramakrishnan, "Mining Coverage of the Flu: Big Data's Insights into an Epidemic," *Persp. Hist.*, January 2014, 28–31.

3. See, for example, Alfred W. Crosby, *America's Forgotten Pandemic: The Influenza of 1918*, 2nd ed. (Cambridge; New York: Cambridge University Press, 2003), 48–49. (Originally published as *Epidemic and Peace, 1918* [Westport, Connecticut: Greenwood Press, 1976]) or John M. Barry, *The Great Influenza the Epic Story of the Deadliest Plague in History* (New York: Penguin Books, 2004), 218–19 and 333–38.

explain individual reports and reactions but is insufficient as a general explanation. When taken as a whole, flu coverage was extensive enough and accurate enough to make it unlikely that there were many attempts to suppress or shape reporting.

A wide sampling of flu reporting in the decades before the Spanish flu appeared and an extensive reading of the same coverage through the summer and fall of 1918 suggests another answer: many of those in the uninfected areas underestimated the danger posed by the Spanish flu because cognitive inertia—the tendency of existing beliefs or habits of thought to blind people to changed realities—caused them to see the flu as the nuisance it had always been rather than the killer it had become.⁴ This inertia was widespread because nearly every adult knew what to expect from the flu. Most had either survived an outbreak or known someone who had done so. Most knew the flu as a seasonal visitor whose symptoms could be mild or severe but were rarely fatal. This understanding of the flu as essentially harmless was, it seems, powerful enough that it temporarily blinded readers in uninfected areas to the implications of the extensive coverage that, though often brief and sometimes contradictory, nonetheless indicated a highly contagious and possibly dangerous flu was sweeping the country.

The effects of cognitive inertia are by definition unrecognized by those who experience it, but signs of its presence are scattered across American newspapers throughout September, after which the magnitude of the crisis became impossible to overlook or misunderstand. The best evidence of indifference by those who had not experienced the pandemic is the near complete absence of any signs of concern or action related to the flu's approach in the local press. Despite weeks of extensive coverage nationally, a sample of scores of newspapers in the uninfected areas found no worried letters to the editor, no calls to mobilize local physicians, nor, with one exception, any editorials either

4. Psychologists refer to this general phenomenon as "irrational belief persistence." See Jonathan Baron, *Thinking and Deciding*, 4th ed. (Cambridge: Cambridge University Press, 2008), 203–11, for a good overview. Beginning in the 1990s, organizational psychologists and strategic management researchers began to apply the concept of cognitive inertia to the study of managerial failures. See: Mary Tripsas and Giovanni Gavetti, "Capabilities, Cognition, and Inertia: Evidence from Digital Imaging," *Strategic Manage. J.*, 2000, 21, 1147–61, for an interesting case study and Gerard P. Hodgkinson and Paul R. Sparrow, *The Competent Organization* (Buckingham, UK: Open University Press, 2002), 1–3 and 140–44, for a good summary of the literature.

warning of the flu's approach or calling for action.⁵ Even within reports on the flu's rapid spread and growing lethality, there were no indications that the flu might become a serious problem locally. Only one newspaper, *The Ogden [Utah] Standard*, featured an editorial calling for preparations ahead of the flu's arrival, but there was no indication in later issues that anything was done before the flu hit.⁶ Similarly, until the end of September, these same papers show no signs of activity by public health officials in the uninfected areas.⁷ All of this silence and inactivity persisted, despite months of sporadic coverage of the flu's travels through Europe and nearly daily coverage of the pandemic's progress through the United States for at least two weeks before the flu reached most of the country.⁸

In looking at how editors and reporters presented the Spanish flu, several things stand out that when taken together suggest cognitive inertia. First, the press recognized something newsworthy was happening. The volume of flu coverage was significant and it increased as the flu spread. Based on a sample of roughly one hundred and seventy newspapers, the word "influenza" appeared on over five hundred pages during September 1918. In contrast, the same search during September 1917 located only thirteen pages with the word "influenza." Next, the press generally reported official estimates of the numbers infected and similar basic facts accurately and some of these reports were potentially worrisome. Finally, there was no consensus among either reporters or the general public on how to interpret this information. Coverage wavered as reporters framed the flu as a

5. Of the roughly one hundred and seventy newspapers from some portion of 1918 in the Library of Congress historic newspapers collection, fifty-eight published stories about Spanish influenza during September 1918. A search using the term "influenza" yielded a total of 514 pages during that month. Despite that fact that the flu continued to affect the armies in Europe, nearly all of these reports concerned the flu in the United States, few of the flu articles focused on what individuals could do to prevent exposure or reduce the risk of spreading the disease, but none of these 514 stories (with one exception) called for collective action before the flu hit locally. See, for example: "Prevent Spread of Influenza," *The Evening Mis-sourian* [Columbia, Missouri], September 20, 1918, 4.

6. "Spanish Influenza Is Coming," *The Ogden [Utah] Standard*, September 27, 1918, 4.

7. It is possible that in some cities, public health officials were making plans for the arrival of the Spanish flu, but this activity went unreported.

8. Even a cursory review of flu coverage from the remaining uninfected areas is enough to see a major shift beginning in very late September and accelerating quickly in early October as over the space of roughly a week, the magnitude of the crisis became generally visible and cities scrambled to prepare. See also: Nancy K. Bristow, *American Pandemic: The Lost Worlds of the 1918 Influenza Epidemic* (New York: Oxford University Press, 2012), 108–17.

human-interest story, or focused on trivia or presented flu stories as straight news or fodder for jokes. When viewed as a whole, it appears reporters and editors consistently recognized something unusual was happening but were unable to recognize its implications for weeks. Two pages from a single paper illustrate the range of coverage well. On September 20, roughly three weeks after the Spanish flu entered the United States, the *New York Tribune* ran a cluster of five flu stories on page 9. The largest, about three hundred and fifty words, ran under the headline “FD. Roosevelt Has Pneumonia after Influenza Attack.” The first part of the story, taken from a wire service report, focused on Roosevelt’s slow recovery. Tacked to the end were three paragraphs noting over forty new flu cases in the city and briefly describing Health Department plans for an anti-sneezing campaign to contain it. Two other stories, both less than two hundred words, reported forty-eight flu deaths in New England during the previous day and five thousand cases in treatment at Camp Devens, outside Boston, where six died overnight. Finally, two blurbs, one noting nine hundred cases in treatment at Newport, Rhode Island, and the other noting about one thousand cases in hospital at Great Lakes Naval Training Station in Illinois, rounded out the coverage. None of these stories showed significant concern or called for further action. On page 3 of the same paper, a writer joked, “The Spanish Influenza is probably plain grip [another name for flu] with a little bum tomato sauce on it.”⁹

Normally, the approach of an epidemic of high morbidity and uncertain mortality brings signs of anxiety and calls for action. It would, for example, be unusual to find a reporter joking in print about, say, typhoid during an outbreak or to read about a group of physicians ignoring the approach of a cholera epidemic.¹⁰ It would be equally unusual to find widespread news reports about the rapid approach of either of these unaccompanied by any acknowledgment of the threat

9. “FD. Roosevelt Has Pneumonia after Influenza Attack”; “Influenza Causes 48 Deaths in Day in New England”; datelines “Newport, R.I., Sept. 19” and “Great Lakes, Ill. Sept 19”; “In Low Gear,” 3.

10. In the early twentieth century, the approach of well-known epidemic killers such as typhoid or cholera filled the papers with anxiety and calls for action. Newspapers also document a rapid response from local public health officials. See “Protect New York against Asiatic Cholera,” *The Day Book* [Chicago] September 29, 1914, 31, for a typical news report, or “Asiatic Cholera Reaches All Lands and Kill Victims Quickly,” *El Paso Herald*, January 16, 1911, 6, for a typical informational story. More generally, see Margaret Humphreys, “No Safe Place: Disease and Panic in American History,” *Am. Lit. Hist.*, 2002, 845–57 or Alan Kraut, *Silent Travelers: Germs, Genes, and the “Immigrant Menace”* (New York: Basic, 1994).

locally. Yet despite significant press coverage of the flu's approach, this was the norm in the uninfected areas with regard to the Spanish flu throughout September.¹¹ Cognitive inertia not only explains the jokes, which began in the summer before the flu was especially deadly but trickled on for weeks after that was no longer the case, but also the public's slowness to grasp the implications of the news they were reading and reporters slowness to find a coherent framework for understanding the significance of the news they were reporting.

The results were tragic. Because the Spanish flu was "A Danger Too Late Realized," public health officials in cities and towns across the United States lost weeks of preparation time.¹² Although the flu was unstoppable, both prevention and treatment would have benefited from an opportunity to prepare in advance of the epidemic's arrival. A 2007 study of the public health response in forty-three American cities found "a strong association between early, sustained, and layered application of non-pharmaceutical interventions and mitigating the consequences of the 1918–1919 influenza pandemic in the United States."¹³ Unfortunately, until the beginning of October when roughly half the country had been exposed, public health officials responded to the flu only after it hit and even then, the initial response was slowed by confusion and misunderstanding brought on by the inability to escape old habits of thought.

THE GREAT PANDEMIC

The influenza pandemic of 1918–19 killed more people more quickly than any other event in the history of the world. Striking in four waves between January 1918 and March 1920, the flu killed perhaps fifty

11. For sample jokes and puns, see: "The Lansdowne Letter," *New York Tribune*, February 17, 1918, 5; "The time has passed. . . ." *The Bourbon New* [Paris, Kentucky], February 22, 1918, 2; "Bob Got Influenza," [ad] *The Coconino Sun* [Flagstaff, Arizona], April 5, 1918, 5; "Winter," *New York Tribune*, July 1, 1918, 14; "Medical Notes," *Evening Public Ledger* [Philadelphia, Pennsylvania], July 9, 1918, night extra, 10; Arthur "Bugs" Baer, "When the Harvest Moon Is Twinkling," *The Evening World* [New York], August 28, 1918, final ed., 10; "The Spanish Influenza . . ." *The Central Record* [Lancaster, Kentucky], September 26, 1918, 7.

12. "Topics of the Times," *New York Times*, September 27, 1918, 2.

13. H. B. Lipmann and H. Markel, "Nonpharmaceutical Interventions Implemented by US Cities during the 1918–1919 Influenza Pandemic," *J. Am. Med. Assoc.*, August 8, 2007, 298, 644–54, looked at the public health response in forty-three cities and conclude that early and sustained efforts to fight the flu saved lives. For details of the civic response in these and seven additional cities, see: <http://www.influenzaarchive.org/index.html>.

million people, the vast majority of whom died between September and December 1918. Epidemiologists estimate roughly 30 percent of the world's population contracted the flu before the pandemic faded in 1920. About 2.5 percent of them died as a result.¹⁴ Its place of origin is debatable, but it seems likely the Spanish flu began in Kansas in January 1918.¹⁵ The influenza virus, which has lived in humans since ancient times, mutates frequently and this Kansas variant proved far more communicable but only slightly more deadly than its predecessors. Over the next few months, the first wave worked its way quietly from the center of the country to the coasts.¹⁶ By April, it reached Europe, then somewhere in western France in early August, it mutated again, this time into a horror.

This new iteration was astonishingly deadly. Other flu pandemics killed approximately one of every one thousand infected, this flu killed roughly twenty-five per thousand infected. The second wave was also at least as contagious as the first. Toward the end of August, it began to move around and out from the Atlantic rim with amazing speed. Before the end of the month, major outbreaks began almost simultaneously on three continents. The port cities of Brest in France, Boston in the United States, and Freeport in Sierra Leone each experienced eruptions within days of the others.¹⁷ Partly World War I, which moved millions around the globe with a speed and urgency never seen before, accounted for the pace of the flu's travels, but more generally, it was a result of the revolution in global transport brought

14. There is a vast literature on the Spanish flu. The work that did the most to reawaken scholarly interest in the flu is: Crosby, *America's Forgotten Pandemic*. Among the best recent treatments are: Dorothy Pettit and Janice Bailie, *A Cruel Wind: Pandemic Flu in America, 1918–1920* (Murfreesboro, Tennessee: Timberlane Books, 2008); Carol R. Byerly, *Fever of War: The Influenza Epidemic in the U.S. Army during World War I* (New York: New York University Press, 2005); John M. Barry, *The Great Influenza the Epic Story of the Deadliest Plague in History* (New York: Penguin Books, 2004) and Gina Kolata, *Flu: The Story of the Great Influenza Pandemic of 1918 and the Search for the Virus That Caused It* (New York: Farrar, Straus, and Giroux, 1999). For a global perspective, see: *The Spanish Influenza Pandemic of 1918–19 New Perspectives*, Routledge Studies in the Social History of Medicine 12 (London; New York: Routledge, 2003).

15. For a good brief summary of the debates over the origins of the flu, see: John M. Barry, "The Site of Origin of the 1918 Influenza Pandemic and Its Public Health Implications," *J. Transl. Med.*, 2004, 2, 3, available at: <http://www.translational-medicine.com/content/2/1/3> and Pettit and Bailie, *A Cruel Wind*, 230–35.

16. Pettit and Bailie, *A Cruel Wind*, 37–76.

17. Crosby, *America's Forgotten Pandemic*, 37–40.

by steel and steam in the late nineteenth century.¹⁸ The next four months were the deadliest in world history. With the exception of Australia, which managed to avoid an outbreak until January 1919 and a few isolated islands with strong quarantines that avoided it altogether, no place on the planet was safe that fall.¹⁹

From the beginning of the second wave in late August through the first half of September, victims multiplied with exponential-like speed within affected areas of the eastern United States and scattered pockets of infection appeared elsewhere, mostly in cities and military bases, but the majority of the country remained unaffected. There was no clear line of advance as the flu moved inland. The nation's transportation networks were so interconnected, it was impossible to stop its spread or predict where it might strike, and, surprisingly, until late September, few outside the affected areas cared very much. By then, it was too late to matter, the flu was everywhere.

From September through December, it seemed most of the world was either falling victim to the flu or recovering from the onslaught. After a brief respite nationally in December, a significantly smaller third wave flared in January 1919 and lingered until March. A fourth wave appeared briefly in 1920 before antigenic drift and developed immunities carried the Spanish flu to relative harmlessness.²⁰ In the United States, outbreaks normally lasted about six weeks from the time the flu first became noticeable to when the last cases began to taper off. In-between infection rates typically varied between 25 and 40 percent of the local population. Approximately 20 percent of those infected experienced a relatively mild version similar to a regular infection, the remaining 80 percent generally experienced more intense flu symptoms such as fever and severe body aches coupled with respiratory problems all lasting a few days to a week or more followed by death or a prolonged recovery.²¹

18. Crossing the Atlantic westbound by sail took a bit more than thirty days on average. By the late nineteenth century, fourteen days were considered average using steam and six days were possible but expensive. Peter J. Hugill, *World Trade since 1431* (Baltimore: Johns Hopkins University Press, 1993), 127–28.

19. K. David Patterson and Gerald F. Pyle, "The Geography and Mortality of the 1918 Influenza Pandemic," *Bull. Hist. Med.*, 1991, 65, 4–21.

20. For a clear and accessible description of the influenza virus and explanation of antigenic drift and shift, see: Landis MacKellar, "Pandemic Influenza: A Review," *Popul. Dev. Rev.*, September 2007, 33, 429–51.

21. Bristow, *American Pandemic*, 44–45.

Organizing to treat the flu had much more in common with disaster relief than traditional public health work and in most cities, some combination of the Red Cross, the Board of Health, and Mayor's office led the way.²² Regardless of who was in charge, authorities typically responded by shutting schools and churches, banning public gatherings, and sometimes criminalizing behavior like coughing or spitting in public. Many cities established temporary hospitals to consolidate the worst cases and allow more efficient use of doctors and nurses. To assist treating patients at home, quickly established "motor corps" of volunteers drove doctors and nurses to the homes of flu sufferers. Some cities established a central number that sufferers could call for assistance and used groups like the Boy Scouts or other volunteers to canvass neighborhoods to find those too sick to seek help. Several of these measures, such as the creation of flu hospitals, would have been significantly easier to organize before the flu hit rather than after and all would have been more effective in the first days if greater awareness of the threat had existed.²³

When it came to treatment, nurses mattered more than doctors. There was no cure and treatment consisted primarily of bed rest, so a caregiver's duties consisted mainly of keeping patients clean, lightly fed, well hydrated, and comfortable. None of this took much training to do adequately, but it could take a great deal of time which made family, friends, and neighbors the most logical choices to carry most of the burden of providing for the care and comfort for patients and nurses the ones to provide the training and oversight.

Overall, approximately six hundred and seventy-five thousand American died from the flu during the pandemic, about five hundred thousand more than in a typical year. The cause of death was usually pneumonia brought on by the flu. Aside from its ubiquity, one of the more frightening aspects of this flu was the fact so many of the dead were young and recently healthy. Nearly half of all deaths from the

22. Approximately one-third of all practicing physicians in the United States entered the military. Writers of the time and since have used this to argue that war left most communities more vulnerable to the flu. This ignores the tremendous increase in the number of nurses and the size of the Red Cross caused by the war. Fighting the flu was essentially a natural disaster, a Red Cross strength, and between 1915 and 1918, membership in the American Red Cross rose from 22,000 to almost 21 million while the number of chapters increased from 145 to over 3,000. Foster Rhea Dulles, *The American Red Cross: A History* (New York: Harper & Brothers, 1950), 87 and 151.

23. For the response in fifty U.S. cities, see: <http://www.influenzaarchive.org/index.html>.

pandemic in the United States were among those between twenty and forty years of age.²⁴

THE FLU AND AMERICAN SOCIETY

Influenza is an ancient disease. Until the 1930s, people identified it by its symptoms rather than its cause. The terms “influenza” and its synonym “grippe” both entered English usage before the American Revolution as descriptors for an ailment involving some combination of fever, chills, joint pain, headache, body aches, and fatigue.²⁵ The onset could be sudden or slow and once established, the disease typically ran its course in two to four days. Recuperation could take twice that or be nearly instantaneous. Intensity could vary from no worse than a cold to near complete debilitation. The flu has been endemic in most parts of the world for centuries and because it is highly communicable, it can easily flare into an epidemic. In North America, this typically happens in fall and winter. Although epidemics are common, pandemics are rare, occurring when the virus undergoes a major mutation that makes immunity gained from exposure to previous strains irrelevant.²⁶ Prior to the 1918–19 outbreak, the last pandemic occurred in 1889–91 when the “Russian flu” struck, before that one had come in the 1830s. Although much more serious than a normal outbreak, all previous pandemics were far less devastating than that of 1918.

In 1918, no one knew what caused influenza. Prior to the late nineteenth century, most physicians blamed it on bad air or overcrowding. As a result of the growing acceptance of the pathogenic theory of disease (germ theory) in the mid-nineteenth century, western physicians began to argue for a definition of influenza based on its cause (a specific but at then unknown microorganism) rather than its symptoms. This theory received a significant boost in 1892 when Dr. Friedrich Johann Pfeiffer of the Institute for Infectious Diseases in Berlin announced he had discovered the bacteria he believed to be responsible for influenza. Pfeiffer was mistaken; a virus causes influenza, a fact that remained uncertain until 1933.²⁷ But work by Pfeiffer and those

24. Bristow, *American Pandemic*, 4.

25. The *Merriam-Webster Dictionary* and *Oxford English Dictionary* list the first known recorded use of “influenza” in 1743 and “Grippe” in the 1770s.

26. For a good overview of the flu, see: <http://www.niaid.nih.gov/topics/flu/understandingflu/>.

27. Kolata, *Flu*, 63–64.

like him shifted Americans' understanding of the disease. By the start of the twentieth century, the idea of flu as a unique illness caused by a specific type of microorganism dominated in the press, but the earlier notion of flu as a catch-all term for a general malaise of indeterminate origin still had a partial hold on how Americans saw the flu.²⁸

A search of American newspapers for the forty years prior to the 1918 outbreak indicates Americans were familiar with the flu but except for the 1889–91 pandemic paid it little attention. The most frequent mentions of the flu show up in advertisements where influenza was included as one of a list of common afflictions treated by a variety of over the counter remedies such as “Rexall Cold Tablets,”²⁹ “Dr. Wm Hall’s Balsam for the Lungs,”³⁰ “Chamberlain’s Cough Remedy,”³¹ or “Bromo Quinine.”³² Aside from ads for cure-alls, newspapers published occasional articles ranging from a few dozen to a few hundred words that divide neatly between news and general interest stories with the occasional poem or cartoon rounding out mentions of the flu.³³ The news reports were most common and typically consisted of little more than notices informing readers of places in the United States or abroad where the flu had become epidemic³⁴ or sometimes chatty snippets on the sports or society pages relating who had contracted influenza.³⁵ Both types of coverage continued virtually unchanged in tone through September 1918.

General interest pieces typically informed readers about the origins or historic treatments of influenza, the origins or meaning of medical terms such as “epidemic” or “influenza” or “quarantine” and the like.³⁶ Occasionally, a reader might find a story related to the diagnosis and

28. For conflicting attitudes about the cause of influenza, see: Richard Cole Newton, “How We Can All Avoid the ‘Grippe’,” *Ladies Home J.*, October 1908, 25, 34 [bad air, closed spaces] and Emelyn Lincoln Coolidge, “The Sick Child—Influenza or Grip,” *Ladies Home J.*, November 1909, 26, 68 [micro-organism].

29. *The Big Stone Gap* [Virginia] *Post*, January 2, 1918, 1.

30. *The Highland* [County, Ohio] *Weekly News*, April 27, 1882, 7.

31. *The Bemidji* [Minnesota] *Daily Pioneer*, February 8, 1918, 6.

32. *The Evening World* [New York], February 12, 1918, 10.

33. “This Horrid May,” *Springfield* [Ohio] *Daily Republic*, May 5, 1888, 8 (poem); “True Humility,” *The Washington* [DC] *Times*, December 15, 1895, 17 (cartoon).

34. See, for example, “Pacific Coast Items,” *Sacramento Daily Record-Union*, February 18, 1885, 3; “Epidemic of Influenza Feared,” *New York Tribune*, January 20, 1906, 11.

35. See, for example, “No Let-Up in Influenza,” *St. Paul Globe*, March 17, 1895, 6.

36. See, for example, “Treatment of Epizootic Influenza,” *The Weekly Kansas Chief* [Troy, Kansas] November 25, 1880, 4; “Pinkeye,” *The Iola* [Kansas] *Register*, July 13, 1883, 6, “Causes of Influenza,” *Truth* [Salt Lake City, Utah], April 28, 1906, 11.

treatment of the flu in animals, very few writers thought it necessary to inform readers about either symptoms or treatment in humans. In the aggregate, the dominant impression from the flu coverage for the forty years before October 1918 was that writers assumed readers were familiar with the flu and viewed it as an occasional inconvenience to be avoided not a disease to be feared.

The first wave of the Spanish flu moved so unobtrusively across the United States during the winter and spring 1918 that it is detectable only in retrospect. It is impossible to know when and where the Spanish flu began, but plausible evidence suggests it originated in January 1918 when an epidemic of influenza struck Haskell County, Kansas, hard. Like the second wave of the Spanish flu, this one was extremely contagious and it killed more young, previously healthy adults than a typical flu. Even more compelling, Haskell County was isolated with no reports of influenza entering the area from the outside, so this new strain seems to have begun there. Additionally, although Haskell County was sparsely populated, people, horses, swine, and birds all lived in close proximity, which made it easier for a mutated animal influenza to infect humans. What is nearly certain is that this flu spread from there to Camp Funston (now part of Fort Riley), Kansas, where, in March and April, it left eleven hundred of the roughly twenty-six thousand troops training there hospitalized and thirty-eight dead.³⁷ This event attracted slight attention from the press, perhaps, as some authors have suggested, out of concern for civilian morale during wartime or more likely because the outbreak was unsustained and the lack of any detectable spread beyond the camp gave it a low news value.³⁸

Despite the limited coverage of the outbreak at Camp Funston, the press took a far greater than usual interest in influenza that winter and spring largely out of concern over its impact on the war.³⁹ Until June, most of the focus was on the health of soldiers in the United States. The War Department issued weekly reports on the health of troops

37. Barry, *The Great Influenza*, 90–97.

38. Ibid. *Public Health Reports* published weekly summaries on the prevalence of disease in the United States. Beginning in late 1917, the editors began to include coverage of disease reports in the areas around military bases. The only reported case of influenza in any of the zones around any base in March 1918 was one case of flu in the Norfolk County [Virginia] Naval District zone. *Public Health Reports*, March 22, 1918, 33, 579.

39. Of more concern to the military was the epidemic of horse influenza that reportedly killed about one-third of army horses during an epidemic between January and March.

stateside and many papers published these, usually without commentary. The reports were generally little more than aggregate statistics on the number and type of illnesses in National Guard and regular army camps. Throughout March and April, an attentive observer would have noticed influenza, mumps, and bronchitis were always the three most important contributors to the “admission [to hospital], noneffective, and death” rates by a wide margin. Throughout April, several releases noted the increased rates of pneumonia were the result of complications from influenza, which was reported to be epidemic in some southern camps, and bronchitis. Nonetheless, the War Department reports were reassuring, often taking care to note that overall, the health of troops was very good and reminded readers that deaths from disease in the camps were quite low, given the hundreds of thousands in training at any given time.⁴⁰

It is impossible to know when the Spanish flu reached Europe. Influenza was still diagnosed by its symptoms and multiple strains exhibiting the same general effects were in motion in both Europe and the United States along with various unrelated illness that also presented flu-like symptoms. The earliest press reports of the American troop buildup in Europe made little mention of influenza, but when they did, they treated it as one of the everyday hardships faced by Allied troops whether behind the lines or at the front. For example, in January, at roughly the same time, the Spanish flu was likely emerging in Kansas. Heywood Broun, a reporter with the American army in France, published a one-thousand-two-hundred-word story on the struggle to organize U.S. troops who were finally beginning to arrive in France in large numbers.⁴¹ Most of the article focused on our logistical problems and the helpfulness of our French allies in providing a wide range of equipment and supplies. In a lengthy aside on the health and morale of the troops, Broun notes that “influenza is extremely prevalent” among American soldiers. Another story, six weeks later, included a single reference to influenza as one of many complicating factors faced

40. See, for example: “Pneumonia Claims Lives of 121 Soldiers,” *Evening Public Ledger*, [Philadelphia], April 4, 1918, postscript ed., 7 or “237 Deaths in Week in Army Camps Here,” *New York Tribune*, April 5, 1918, 6; “Report to Surgeon General Shows Health Conditions Good in Army Camps,” *Warren [Minnesota] Sheaf*, April 17, 1918, 4; “The Health of Troops,” *Perrysburg [Ohio] J.*, April 25, 1918, 6.

41. Heywood Broun, “French Render First Aid to Our Unprepared Army,” *New York Tribune*, January 10, 1918, 1.

by American officers as the United States prepared to enter the fighting.⁴² Overall, reporters were far more concerned with the impact of the flu on the German army than the American.

From May to early September, press reports focused on European outbreaks. Articles presented differing interpretations on the severity of the flu, and speculated on whether this malady was actually the flu or some related disease, but the volume of coverage left little doubt that something unusual was happening. Headlines like “Why Does Hun Delay?”⁴³ “Epidemic Attacks Spain,”⁴⁴ and “Mysterious Plague Is Sweeping Spain”⁴⁵ first alerted Americans to the change in late May. Just days later, press reports also noted similar outbreaks in northern China and New York City.⁴⁶ Early in June, reporters began to refer to the malady in quotes as the “Spanish influenza” as a way to distinguish it from less contagious strains.⁴⁷ By the end of the month, the quotation marks began to disappear and by the middle of July were gone entirely. Even as the name was becoming established and for several months after several authors noted its origins were uncertain. The Spanish, like most English language commentators, most frequently blamed the Germans or the trenches.⁴⁸

At home as months went by without serious disease outbreaks in the often-overcrowded training camps that worry sank from sight in the papers. Throughout July and August, most stories focused on how influenza was weakening the German war effort. Many of the stories were short, often just a few sentences reporting that “Epidemic of Influenza Makes All Berlin Sneeze,”⁴⁹ or “Influenza Attacks Troops

42. “Pershing Is Busy Weeding Out Physically Unfit, Incompetent,” *El Paso Herald*, February 26, 1918, Home ed., 5.

43. *The Washington [DC] Herald*, May 27, 2.

44. *Evening Public Ledger* [Philadelphia], night extra, 4.

45. *The Bemidji* [Minnesota] *Daily Pioneer*, May 28, 1.

46. “Mysterious Disease Sweeps North China,” *The Evening World* [New York City] final ed., 4; “City Feels Blight of Spanish Grip,” *The Sun* [New York City] June 2, 1918, 2.

47. One of the most repeated myths about the Spanish flu is that it became known as “Spanish” because as a neutral country, the Spanish press was uncensored so the epidemic there received extensive international coverage and thus the two became linked in the popular mind. I found slight evidence of this in the U.S. press. The earliest reports do reference Spain, but only because the epidemic does seem to have hit there hard before moving to Germany and England. During the summer of 1918, American papers gave far more coverage to the flu in Germany than in Spain.

48. See, for example, “Blame U-Boats for Epidemic,” *Evening Public Ledger* [Philadelphia], May 30, 1918, night extra, 1.

49. *New York Tribune*, June 17, 1918, 3.

of Kaiser,”⁵⁰ or “Epidemic Delays German War Plan.”⁵¹ As frequent were references within more general stories speculating on the reasons for the delay in the next German offensive or reasons for declining German morale that included influenza among the causes.⁵² Many of these accounts also note the unusual severity of the disease because of poor nutrition and fatigue as well as the problems treating civilian flu suffers owing to the shortage of doctors.⁵³

Interspersed with stories about the flu in Germany were occasional reports of outbreaks elsewhere. In addition to the news of epidemics in North China and New York City, there were reports of flu in Morocco, England, Puerto Rico, Hawaii, and Ireland.⁵⁴ Only rarely in the news of the suffering of the Spanish, Germans, British, Chinese, Americans, Puerto Ricans, or Irish was there any suggestion that the flu was likely to spread, much less so that extra-ordinary precautions might be needed to contain it. Insofar as concern over the spread of influenza showed up at all, it was connected to fears of lost productivity in war industries or of what might happen if allied armies experience an epidemic after German forces recovered.⁵⁵ A few times that summer, there were reports of efforts by federal or state health officials to stop the flu from entering the United States, but they were uncommon enough that the likely effect was to cause a reader to assume inspection and quarantine happened rarely.⁵⁶

Until late August, press coverage was both fairly accurate and the stories it told fit well with existing conceptions of the flu. Influenza was one of the handful of diseases which was a noticeable but largely insignificant problem in stateside training camps. The flu that circulated through Europe that spring and summer was unusually contagious and debilitating but still within the broad range of the commonly accepted

50. *Bisbee [Arizona] Daily Review*, June 27, 1918, 3.

51. *The Sun*, June 29, 1918, 1.

52. See, for example, “Quiet on All Fronts Says A.P. Review,” *Bisbee [Arizona] Daily Review*, June 30, 1918, 1.

53. See, for example, “Influenza Epidemic Delays German Drive,” *The Sun*, June 27, 1918, 1.

54. “Plague Spreads,” *The Tacoma [Washington] Times*, June 3, 1918, 3; “Influenza Epidemic Is Sweeping Britain,” June 22, 1918, 4; “From Trench and Camp,” *The Evening Missourian [Columbia]*, June 28, 1918, 4; “Epidemic in Porto Rico,” *The Washington [DC] Herald*, July 1, 1918, 1; “Influenza in Oahu Camps,” *The Maui News*, July 5, 1918, 5.

55. See, for example, “Influenza Now Allies’ Bogy,” *Evening Public Ledger [Philadelphia]*, July 8, 1918, 5; “Influenza Epidemic Attacks England,” *The Sun*, July 1, 1918, 1; “Nature Herself Seems to Tire of War and Bloodshed,” *The Washington [DC] Times*, July 2, 1918, final ed., 1; “The Spanish Epidemic of Influenza and Its War Aspects,” *The Sun*, July 9, 1918, 8.

56. “U.S. Guards against ‘Spanish Influenza,’” *The Corpus Christi Caller*, July 3, 1918, 4.

understanding of how flu acts, especially given conditions in Europe after four years of total war. After the flu turned deadly and entered the United States in late August, the focus of press coverage shifted to the United States. While it remained largely accurate in terms of the number of sick and dead, it is clear from the lack of concern that very few, neither reporters or physicians nor the general public, understood the implications of what was happening until after they experienced the flu first hand.

Part of the problem was the timing. The deadly second wave landed in the United States within a week or two of its appearance in France. By this time, Americans had been reading the occasional report about a more serious but still not overly deadly outbreak for months. This gave the average American two compatible frameworks for understanding the flu. The first was the long established view of the flu as an inevitable but minor burden. The second, which began to appear in the spring of 1918 and continued through September, was that the Spanish flu was undeniably more contagious and possibly more debilitating than a typical outbreak but only because wartime conditions allowed it to thrive. Both frameworks were reasonable and after late August, both were wrong but still they provided the context in which most Americans interpreted the new outbreaks and their power was such that for the critical month of September, the vast majority of Americans failed to see that the flu had changed.

WAITING FOR THE SPANISH FLU

In most of the United States, there was a gap of a month or more between when the flu entered the country and when it hit locally. The deadly second wave took root in the United States in late August at a time when the flu seemed to be fading in Europe and the disease problems some feared early on in the stateside camps had not materialized, so for all of August and the first half of September, relatively few flu stories appeared in American papers.⁵⁷ Beginning in mid-August and continuing into early September, the papers carried a few reports of

57. A search of roughly 175 newspapers located 109 pages with one or more references to influenza in July 1918, 52 pages in August, and over 500 in September. In October, the number was over four thousand five hundred. In contrast in 1917, there were roughly ten pages per month with one or more references to influenza during these months. In 1918, pages frequently had multiple flu-related stories on a single page. Articles that used the term "flu" or "grip" rather than "influenza" were not captured in this search owing to the number of nonrelevant or duplicate results.

infected ships reaching the United States, but it was unclear from these reports if the flu had gained a foothold. Beginning early in September, the outbreaks in Boston and New York began to show up in the press. These reports were inconsistent, as if reporters did not know what to make of events, and not widely carried in papers outside the east coast. Three stories published on September 12 in the *New York Tribune* illustrate this coverage well. Two stories appeared on page 3, one—"Spanish Influenza Here, Officials Fear"—noted there was "little means of combating the disease except by absolute quarantine, and that obviously is impossible" while the other reported "Quarantine Established against Influenza Here." One of the page 3 articles described the flu as "new. . . to American physicians," while on page 8 of the same paper, another article indicated "Spanish influenza is just the famous Russian influenza of 1889-'90 back again."

Even though the flu would not reach the majority of the country until approximately the end of September, by the middle of the month, flu reporting became a daily or near daily event in cities and towns across the United States. Because most papers received their national and international news from the wire services, the approach of the flu looked much the same from place to place. A close examination of newspaper coverage in Springfield, Missouri, a city that experienced its first reported flu death on September 30, provides a representative example of flu reporting for the full span of time between when it first appeared and when it seemed to be everywhere.

Situated in the southwest corner of the state in the Missouri Ozarks, near the center of the Springfield Plain the city, like most of the Ozarks, remained somewhat isolated until the late-nineteenth century when the railroad began to pull the whole region more firmly into the national market. By the turn of the century, small farms, small towns, and mixed agriculture characterized this part of the Ozarks and in 1918, with a population of roughly thirty-eight thousand, Springfield was the undisputed regional market center and the largest city for over 150 miles in any direction.

Two railroads served the city, as did two newspapers, the *Springfield Missouri Daily Republican* (the morning paper) and the *Daily Leader* (the afternoon paper) as well as eight theaters, twenty-eight saloons, sixty-six churches, eighty-four physicians, and two permanent hospitals.⁵⁸

58. Springfield City Directory, 1918.

As a result of the war, the city hosted a large and active Red Cross unit whose members supported a small temporary hospital near the railroad station for soldiers passing through.⁵⁹

Springfield was a fairly typical city for its size and time. Agriculture provided the foundation for a diverse economy with a mix of firms of all sizes scattered across a host of manufacturing, trade, and service industries. The city's best-known business, the Springfield Wagon Company, had a national reputation and Heers, the local department store, was developing into a regional chain. Government played a somewhat larger role in Springfield than in many similar-sized cities since it served as the county seat as well as hosting a state Normal School, and a Federal Circuit Court.

Springfieldians first read about the flu epidemic on June 30. On that morning, the *Republican* carried a front-page banner headline "EPIDEMIC IN GERMANY DELAYS OFFENSIVE." Like most of the flu-related reporting in the *Republican*, the story came with an Associated Press (AP) byline. In addition to the epidemic of influenza, the report also notes the "prevalence of typhoid, dysentery, and other diseases" which had combined to incapacitate large parts of the German army. The next story appeared on July 5 in the *Leader*. Located above the fold on page 5, between a story about a traffic fatality and a court case over an increase in city water rates, its location and tone belied its alarming headline—"Influenza Epidemic Threatens to Spread Over the Entire World." The three-hundred-and-fifty-word article, which carried a London, July 4 dateline, asked if the world stood on the brink of an influenza pandemic and then summarized the spread of the "obnoxious disease" from Spain to Germany to England. The writer recalled past pandemics and the mysterious ways flu travels. In places the tone bordered on jaunty. Nowhere did the author mention the possibility of fatalities. There was a weak joke about the German sounding "Pfeiffer's bacillus," the assumed cause of the disease, and the rumor that Germany developed the flu to sicken the world. The story concluded with the observation that "Everyone knows—to his sorrow—the symptoms of the disease" and reminded readers to "consult a physician and dose up with quinine immediately [if] they are felt coming one [*sic*]."

59. *Honor Roll of Greene County Missouri* (Chicago: Faithhorn Company, 1919), 28.

Despite these alarming headlines, the flu almost entirely disappeared from the Springfield papers from early July to mid-September. The only other significant mention before the disease turned deadly came in a August 22 *Daily Republican* report, about an outbreak of influenza at an American destroyer base in Ireland.⁶⁰ The description of the flu in the two-hundred-and-fifty-word story was largely congruent with reports that had been appearing in other American papers for months. According to the author, the disease was “not dangerous if taken in hand quickly enough” and caused no lasting harm at the base but was, for most sufferers, significantly more debilitating than a typical strain of influenza. The only way this story contradicted significantly the descriptions in the dozens of earlier reports from Europe came when the writer noted that while the flu was generally believed to attack those who were already weakened by poor food and rough living the stricken American soldiers and sailors were “probably the best fed persons in Europe.” Even with this indication that those in peak health might be hit hard, there was no suggestion that flu was anything more than a temporary inconvenience.

As with much of the rest of the country, regular coverage of the flu began in Springfield on September 14. On that day, the *Republican* carried an AP story about a request and warning from the Surgeon General Dr. Rupert Blue, the head of the U.S. Public Health Service (USPHS).⁶¹ On the previous day, Blue, alarmed by reports of flu in Boston and other areas, had sent telegrams to state health boards requesting a report on the presence of the flu in their area. He also took the opportunity to warn the public that this flu struck more quickly and violently than past outbreaks and recommended those stricken “go to their homes at once, get to bed without delay and immediately call a physician.”⁶² Blue’s description of both the disease and treatment would have been familiar to anyone who had ever experience a severe attack of the flu or been following reports from Europe over the previous few months.

That day’s *Leader* made no mention of Blue’s efforts but did report Springfield was flu-free.⁶³ The same article also reported that “eastern

60. “Influenza Breaks Out in American Destroyer Base,” *Springfield Missouri Daily Republican* (SMDR), August 22, 1918, 5.

61. “Army Surgeon Advises as to Spanish Influenza,” 4.

62. Ibid.

63. “No Spanish Flu Is Reported Here,” *Daily Leader* (DL), September 14, 1918, 1.

coast cities” had been exposed, that Boston was in the midst of an attack, and that “so far efforts to cope with it have failed.” On a positive note, the writer also noted that the strain in the United States was not as severe as that which had swept through Europe. In addition, the *Leader* ran the first of three extensive articles by Woods Hutchinson, an English physician and popular medical writer.⁶⁴ The tone and content of all three were similar. Hutchinson explained in general and reassuring terms how quarantine worked and why modern quarantine efforts were so much more successful than those of the past. Although each of the articles referred occasionally to the Spanish flu, all three were the type of general interest writing about the flu and medical issues that had appeared occasionally in American papers for at least forty years.

A good example of the *Daily Republican’s* pre-epidemic coverage appeared on Tuesday, September 24 and illustrates well the disconnect between the factual reports of the flu’s progress and any understanding that the flu might become a danger locally. Page 1 contained an indirect reference to the flu in the form of a notice concerning an announcement by Dr. William C. Gorgas, Surgeon General of the Army, that he was pleased with the health of American troops.⁶⁵ Page 2 called this bit of good news into question with a report that twenty-five training camps were currently infected with Spanish Flu, up significantly from the three and then eight reported in the previous week’s editions.⁶⁶ Page 3 contained assurances from “Medical officers” that the epidemic in Newport was nearing the end, while page 8 carried a death notice for Hershel Martin, the first Springfieldian known to die of the Spanish influenza.⁶⁷

Martin, a twenty-six-year-old sailor, died of influenza-induced pneumonia at the Great Lakes Naval Training Station. Located about thirty miles north of Chicago, Great Lakes was one of the navy’s largest facilities. It housed about forty-five thousand sailors that fall and after the first case was reported on September 9, the flu spread among

64. “Epidemics of Disease in Armies and among Nations Controlled By Quarantine,” *DL*, 5; “Spanish Influenza Can Be Controlled by Correct Quarantining,” September 15, 1918, 14; “Necessary Precautions Will Check and Prevent Spread of Bad Epidemic,” September 18, 1918, 6.

65. “Surgeon General Pleased With Health of Soldiers,” *SMDR*.

66. “Spanish Influenza Makes Appearance in 25 Camps,” *SMDR*.

67. “Influenza Epidemic in Believed Nearing End” [*sic*]; Hershel N. Martin, “Dies of Pneumonia,” *SMDR*.

them quickly. Fifteen days later, Great Lakes had a reported four thousand and five hundred active cases and over one hundred dead.⁶⁸ Martin died on September 22 after a four-day illness.

Married with a young daughter, Martin had joined the navy just two months previously. Perhaps because his circumstances seemed especially tragic his death and funeral received extensive coverage in both papers. His funeral illustrated some of the potential difficulties in containing the flu. Martin's widow, who had moved to Waukegan, Illinois, with their daughter to be nearby while he completed his training, had become "ill with a severe cold, bordering on influenza" shortly before Martin's death and was still recovering at the time of the funeral.⁶⁹ She and her daughter returned to Springfield a few days before the funeral accompanied by one of Martin's sisters. Martin's father came into Springfield from Kahowka, Missouri, in the extreme northeast part of the state. The family delayed the service until Martin's mother and brother returned from California. His mother lived in Springfield but had been visiting another son in the military who was stationed near Los Angeles. The funeral was widely attended and Martin's body received a military escort to the cemetery.

On Thursday, September 26, the day Martin was buried, the *Republican* ran two flu-related AP stories on the front page. Like the coverage on the 24th, these stories combined factually accurate reporting with a lack of awareness that the flu might become a threat locally. On the right side of page 1 was a headline announcing "Great Lakes Station Has Influenza under Control" which acknowledged the severity of this strain but stressed the low death rate. On the left side was a longer story with a larger headline, "Officials Confer on Steps to Stop Spanish Influenza. With 5,000 More Cases in Army Camps and 155 Reported Deaths in One Day, Epidemic Assumes Alarming Proportions" which stressed that the flu was starting to slow the war effort. A story on page 8 described the as-yet unsuccessful efforts by the Governor of Massachusetts, Calvin Coolidge, to get the epidemic under control in that state.⁷⁰ The final sentence noted that over one thousand had died of the flu in New England during the previous ten days.

68. Barry, *The Great Influenza*, 201–2.

69. "Hershel Martin to Arrive Today," *SMDR*, September 24, 1918, 6.

70. "Massachusetts Alarmed at Spread of Influenza."

Nowhere in that day's paper was there any mention of the probability that the flu might reach Springfield.

As these stories illustrate, coverage increased with the spread of the flu and as it did the picture that began to emerge should have been worrisome. Despite this, awareness of the implications, especially locally, remained largely absent. Readers in Springfield, Missouri, and hundreds of other towns saw an increasing number of stories that should have been alarming yet almost nowhere in the press coverage were there any indications that those in the unaffected areas might face a significant risk.

In Springfield that attitude carried though into the first reports of the flu's arrival. On Monday, September 30, page 2 of the *Leader* featured two long articles related to the Spanish flu. On the right side was a report on the death of Dr. Glen Miller, the only practicing physician in Morrisville, a small town about twenty-five miles north of the city.⁷¹ Miller, age 37, had died of pneumonia brought on by Spanish influenza. A large part of the story focused on the hardships caused to the town by the loss of its only doctor. There was no mention of the additional tragedy of this occurring at the start of a potentially deadly pandemic. On the left side, a large headline announced, "Precautions Are Taken to Prevent Spread of Plague." The body of the article made clear however that the precautions, which consisted solely of a ban on open casket viewing and public funerals for flu victims, were being taken at the order of the state Board of Health as a military precaution since the flu had "made serious inroads among soldiers and others in the more populous sections of the east." The author did note that "several families in different parts of the city are suffering from the malady" but reported that "no drastic action will be taken by the city health department unless additional precautions are necessary." Even as Springfieldians discovered the flu had entered the city, they understood the danger only dimly, if at all. The tone of these reports, and the lack of public reaction they produced, indicate Springfieldians might at least recognize the possibility that flu had become a danger elsewhere but remained unable to imagine that the "Plague" which had become a threat to "soldiers and other in the more populous sections of the east" and was currently loose in the city might soon be a serious problem for them.

71. "Dr. Glen Miller Dies at Morrisville," *DL*, September 30, 1918, 2.

Throughout September, only one article from the sample of coverage in the uninfected areas called for any local public health response ahead of the flu's arrival. Coverage did, however, show the numbers of sick and dead were escalating throughout September and were unprecedented for influenza. Of the few stories that moved beyond reporting numbers and places, those that presented Spanish flu as more serious than normal outbreaks typically blamed wartime deprivations for this fact. Those that denied the danger did so either by reporting that the epidemic was on the wane or that it was not particularly dangerous to the healthy and vigilant. These reports did not dispute the numbers of sick and dead or that the flu struck the young and previously healthy particularly hard. The reason for the belief that the flu was not overly dangerous seems to be that it was flu and flu did not usually kill the otherwise healthy.

The most striking fact about public reaction to the Spanish flu during the month it was spreading fast—but before it reached the majority of the country—was that in city after city, people had ample warning that they stood in the path of a pandemic but failed to recognize the danger for weeks. Part of the reason for this failure goes back to the brief and sometimes contradictory nature of the reporting but more important was the common understanding of the flu as an unpleasant nuisance which, it seems, temporarily blinded Americans to the local implications of the numerous and increasingly worrisome news reports of the flu's spread.

The results were devastating. One month after the pandemic reached the United States, the physicians of the Green County Medical Society had done nothing to prepare for an epidemic that would leave perhaps one-third of the city temporarily incapacitated and over two hundred and fifty dead before another month had passed. Cognitive inertia cost them the opportunity to prepare and slowed the response during the first days of the epidemic. The same thing happened for the same reason in cities and towns across the United States.