In the fall of 1918, the world war that had claimed the lives of nearly 16 million people in Europe was nearing its end. But a worldwide epidemic—a pandemic—was replacing it as a major killer. During 1918 and 1919, between 50 and 100 million people around the globe fell victim to a rapidly spreading and untreatable strain of influenza. In fact, more people died in Europe from the flu, up to 40 million, than from the war itself. Within months, the flu had killed more people than any other illness in recorded history.

Originating in Europe, exactly where is unknown, the powerful strain of the virus appeared in the United States during the latter part of the summer of 1918. The affect of the pandemic on the U.S. population was severe. Some estimates suggest that 675,000 Americans died and more than 25 percent of the population became infected. In contrast, today, the Centers for Disease Control and Prevention estimates that influenza infects between 5 and 20 percent of the population and kills 36,000 Americans per year.

Contemporary federal government records from the Army and the Bureau of Indian Affairs add a human dimension to the statistics. The first signs of a problem occurred on the Boston Commonwealth Pier, where the residing Army medical doctor recognized symptoms of serious illness in the returning troops. As a precautionary measure, the majority of the men were transferred to Camp Devens, Massachusetts, to be thoroughly examined and isolated from the public. Nonetheless, the disease migrated south to Philadelphia following well-traveled transportation routes, where on a single day (October 6) 289 deaths were reported. On October 8, B. M. Holden, an Army depot quartermaster in Philadelphia, wrote to Col. L. A. Nicolson in Washington, D.C., illustrating the extent of the outbreak. His letter, featured in this article, offered staggering statistics, “Spanish influenza hampering operations of depot. 11 Commissioned Officers and 1,489 employees absent… situation not improving.”

Rampant in urban areas, the flu spread quickly and efficiently. The virus did not discriminate. It was possible to become infected by walking down the street, riding public transportation, using public facilities, or going to work. Even family life was affected. As isolation became a growing “solution,” more and more family members were contracting the disease and spreading it through their immediate surroundings. Schools and churches shut down. Markets closed. Everyday life was severely altered.

The flu, however, was not restricted to the densely populated eastern seaboard. It spread across the continent, to the distant parts of Alaska and the Native American reservations of the West. According to government records, the experience in these reservations paralleled that of military camps in the East. The combination of isolation and remote location created and sustained many problems including a lack of resources, limited medical attention, unsanitary conditions, and more.

Officials at Bureau of Indian Affairs headquarters in Washington, D.C., recognized this dilemma. They sent mass telegrams reporting the pandemic and issued warnings. For example, on October 11, the director of the BIA, Commissioner Cato Sells, sent the featured telegram to many reservation superintendents throughout the country, stating, “Spanish influenza of virulent type spreading over country with alarming rapidity … many superintendent [sic] reporting serious conditions.” He recommended regulating temperature, avoiding overcrowding, enforcing isolation or quarantine, and encouraged all to “cease all activities not urgently required.”
Less than one month later, another BIA employee, Special Supervisor Lorenzo Creel, submitted a general report to his supervisor describing conditions similar to those that Sells had warned superintendents about. In his three-page, typewritten report, Creel told of his experience to Col. L.A. Dorrington, special agent in charge of the Reno Indian Agency. Creel explained that he left for Virginia City the morning of November 8 after having been called out of bed the night before for consultation. Upon his arrival, the county clerk and chief of police escorted Creel to two nearby Indian camps, during which he was given a timeline of the pandemic in the area. He learned that the disease was introduced by an Indian who contracted it in the potato fields of Dayton, a few miles away, before returning to the camp where he died. A total of five deaths had occurred, and the majority of the Indians present were affected in one way or another. The few uninfected Indians treated and cared for the ill.

Creel’s report included four photographs, one of which is available online from the National Archives at www.archives.gov/exhibits/influenza-epidemic/records-list.html. The images and the captions that Creel wrote revealed a variety of conditions, both good and bad, at the Virginia City reservations. On the last page of his report, Creel stated “never before have I been up against such a situation and powerless to do anything or suggest anything for relief.” His frustration reflected that of most Americans in 1918-19 as a result of the flu pandemic.

Notes

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**Note about the featured documents:**
The letter from B. M. Holden to Col. L.A. Nicolson comes from the series Correspondence, 1917-1920, in Records of the Office of the Quartermaster General, Record Group 92; National Archives, Mid-Atlantic Region (Philadelphia). The telegram from Cato Sells comes from Records of the Reno Agency, in the Records of the Bureau of Indian Affairs, Record Group 75; National Archives-Pacific Region (San Francisco).

Col. L.A. Nicolson,
Operating Division, Office Quartermaster General.
Washington, D.C.

EPIDEMIC SPANISH INFLUENZA HAMPERING OPERATIONS OF DEPOT  
ELEVEN COMMISSIONED OFFICERS AND FOURTEEN HUNDRED EIGHTY NINE  
EMPLOYEES ABSENT TODAY. OF THE LATTER ELEVEN HUNDRED  
SEVENTY SEVEN WORK IN FACTORIES. SITUATION NOT IMPROVING.

HOLDEN.
1. Discuss with students the terms “epidemic” and “pandemic.” Then, conduct an informal survey, asking students what they know about influenza, how it spreads, its symptoms, etc. Next, divide students into groups of three or four and ask them to take on the role of government officials who have just been made aware of an influenza outbreak. Ask them to create a list of five strategies they would implement to alert the public and help stop the spread of the illness. Invite a representative from each group to share their lists with the class. Finally, ask students to consider how their lists might change if the year were 1918.

2. Distribute copies of the two featured documents to students. Invite one student to read them aloud while the others follow along. Lead a class discussion about the documents using the following questions: What types of documents are they? What are the dates of the documents? Where were they created? Who were the intended recipients? Who created them and for what purpose? What strategies were the creators of the documents using to alert others to the crisis? What do these documents reveal about the flu pandemic of 1918? What do they suggest about the actions taken by government officials to prevent the spread of the illness?

3. Provide students with additional information about the influenza pandemic of 1918 from the background essay, and instruct them to explore “The Deadly Virus: The Influenza Epidemic of 1918” online exhibit from the National Archives at www.archives.gov/exhibits/influenza-epidemic. Assign students to write an encyclopedia entry of 500-1000 words for the Influenza Pandemic of 1918.

4. Inform students that in the two decades following World War I, many people in the United States supported isolationism. Assign students to define “isolationism,” and ask them to consider the role played by both World War I and the influenza pandemic on this attitude. Lead a class discussion about how events influence attitudes.

5. Remind students that the documents they studied in activities two and three related to the Influenza Pandemic of 1918 are federal government records from various military offices, the Bureau of Indian Affairs, the Public Health Service, and the Food Administration. Ask students to consider what other organizations—particularly local ones—might hold records related to this pandemic. Invite student pairs to conduct research on how the Influenza Pandemic of 1918 affected their community. Encourage them to explore records held by local historical societies, newspapers, cemeteries, and places of worship. Direct students to create an exhibit highlighting their findings.

6. Remind students that preventing the spread of the seasonal flu and avian flu continues to be a high priority of health officials and others. Divide students into four groups and assign each group one of the following issue areas:

   a. Key facts about the flu
   b. Preventing the flu
   c. What to do if you get the flu
   d. Avian flu

Direct student groups to the Influenza section of the Centers for Disease Control’s (CDC) website at www.cdc.gov/flu. Ask them to locate, read, and summarize the information presented about their issue area. Encourage one representative from each group to present the group’s findings to the rest of the class. Additional information about the avian flu is available at www.pandemic.gov.

7. Inform students that in 2005-6, researchers at the Centers for Disease Control successfully reconstructed the influenza virus that caused the 1918-19 flu pandemic. Encourage them to read the CDC’s Question and Answer page about this project at www.cdc.gov/flu/about/qa/1918flu/pandemic.htm and write 2 to 3-page position papers expressing their opinions on the value and risks of such research.