The Spanish Influenza Pandemic of 1918: A Defining Characteristic in the Life and History of the American Family

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Figure 1. A barber wears a mask while at work to stay healthy. According to a young university student, individuals in flu masks reminded him of members of the Ku Klux Klan (“Local Barber—Cincinnati, OH” CDC, cdc.gov).
The Spanish Influenza Pandemic of 1918
A Defining Characteristic in the Life and History of the American Family

Ellie Vance

Pandemics. As a society, we are obsessed with them. The latest media and literature spins tales of zombie apocalypses or dangerous viral outbreaks that sweep across the globe, infecting millions. Fortunately, in our day, global pandemics have remained largely in the world of fiction. However, in 1918, just over one hundred years ago, the things of today’s fiction were a reality. In the fall of 1918, a young American university student recorded in his journal, “there’s lots of excitement about the Spanish influenza. They say it is coming west. I don’t believe it will hurt us.”1 Little did he know that the Spanish influenza would indeed be coming west, and when it finally struck American soil, the outbreak left a path of death and despair in its wake. Within a few short months, the Spanish influenza took the lives of 675,000 American men, women and children—nearly three percent of the population at the time.2 Although the flu pandemic significantly impacted the American population, this important event is often neglected in history books. It is usually summed up in mere sentences, sandwiched between extensive chapters about the First World War and the Great Depression. Despite this lack of coverage, it is imprinted in the memories, lives, and experiences of

those left behind. Each and every grieving family experienced the outbreak differently in terms of social, emotional, and economic standing, which had the strongest impact on young children. The Spanish influenza pandemic of 1918 changed the structure of American families and became a defining characteristic in the lives of its survivors.

For a century, the 1918 flu pandemic has remained buried in the past, remembered primarily by its survivors. In recent years, however, epidemics including the Bird Flu in 2005 and the Swine Flu scare in 2009 have sparked a renewed interest in the Spanish influenza outbreak. Historians and medical professionals alike have sought to understand the social, demographic, and economic impacts of the flu, as well as understand how to prevent similar outbreaks in the future. In the past decade alone, a wealth of scholarly works have been created regarding this matter, examining the history and impact of the dreadful outbreak from many angles. According to historian Howard Phillips, in order to fully understand the pandemic’s “complex, interconnected character, it must be viewed through numerous lenses at the same time.”3 One lens that has not been extensively reviewed by historians is that of the American family. In a historiographical piece on the Spanish influenza, Phillips asked, “how did they [survivors of the flu] cope . . . with the death of a spouse, a child or a parent? What was the fate of the millions of widows and widowers and the hundreds of millions of orphans suddenly created by a pandemic like the Spanish Flu?”4 Phillip’s question is one that remains largely unanswered.

The impacts of the Spanish flu on the American family have yet to be examined in a comprehensive work. Historian Esyllt W. Jones, who studies the impact of the Spanish flu on families in Canada, suggests that there are “strong indications that the epidemic altered family configurations,”5 however, “the long-term impact of the disease [on families] has not been given a great deal of attention by historians.”6 Thousands of Americans lost loved ones during the Spanish flu pandemic, which forever changed the lives of these families. Almost overnight, father, mothers and children perished, transforming spouses into widows and children into half or full orphans. Their grief was surely immeasurable, but, as

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5. Esyllt W. Jones, Influenza 1918: Disease, Death, and Struggle in Winnipeg (Toronto: University of Toronto Press, 2007), 141.
6. Jones, Influenza 1918, 141.
Phillips noted, “though grief cannot be measured, the number of those grieving can, and how such grieving influenced their lives, subsequently can, at least be recognized.” Although each and every grieving family experienced the effects of the pandemic in their own unique way, the Spanish Influenza changed the structure of the American family and influenced children socially, economically and financially. It was a defining event in the history of the American family.

**Historical Background of the Spanish Influenza Pandemic of 1918**

Although the exact origins of the 1918 flu pandemic have been heavily contested, by the autumn of 1918, close to a third of the world's population had become infected. The United States reported its first case in March of 1918 and the virus quickly swept across the nation. By October 1918, the flu had reached epidemic proportions, not only in the United States, but across the globe. It was a pandemic in every sense and there was no stopping it. A vaccine to protect against influenza had not yet been developed and there were no antibiotics available to treat the infected. American newspapers encouraged their readers to avoid contact with crowds, stay indoors, quarantine those that were sick, and wear protective face masks (Figure 1). The press even warned against the dangers of spreading the sickness through kissing. It was certainly a frightening time, but some found ways to make light of the situation. A newspaper article in the *Cleveland Plain Dealer* examined the pros and cons of kissing and found that “after due consideration . . . we'll all simply have to take our chances.” Meanwhile, a university student in Montana lamented the fact that with the onset of the flu, there would be “no more dates” as “the girls at the dorm are all quarantined.”

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11. “Through the Periscope: To Kiss or Not to Kiss,” *Cleveland Plain Dealer*, 6 November 1918, p. 13, col. 3.
Jokes aside, the flu was a serious problem with serious consequences. Nearly fifty million people perished worldwide, including approximately 675,000 American citizens. The flu infected people of all ages. However, those in the prime of their lives—aged twenty to thirty-nine—suffered the highest mortality rates. The deaths of these young adults created widows and widowers, as well as “half-orphans,” and children with neither a father or mother. The innocent children left behind were perhaps the flu’s greatest victims. Reports of parental death and orphaned children left to fend for themselves filled the pages of newspapers. An article in the Washington Times reported that “one of the most pitiful cases is that of the eight children of Mr. and Mrs. William Bowles. . . . the mother died last Sunday and the father Wednesday afternoon of the influenza.” However, the plight of the Bowles’ children was common. In New York City alone, the flu produced nearly 31,000 orphans in just a matter of weeks. The ravages of the flu struck nearly every city across the nation and penetrated the homes of both city-dwellers and rural farmers alike, taking fathers, mothers, brothers, and sisters to the grave.

Many families considered 1918 to be a terrifying time, but it was also a time of great generosity. Families and communities reached out to support each other, building strong relationships founded on trust and care. A survivor of the Spanish flu named Clella Brantley Gregory recalled her father helping the afflicted members of their community by milking cows, caring for farm animals and ensuring there was enough drinking water and a wood supply to keep families warm through the winter. Although choosing to help others meant risking his own life and his family’s, Eli Brantley pushed forward regardless of the consequences. In addition to Mr. Brantley’s example, thousands of Americans sought to help those suffering from influenza. People were kind and “they proved it. . . when neighbors would go in and take care of those afflicted with the disease, never for a moment thinking about their own health.” Everyday heroes became an irreplaceable source of relief for suffering families.

17. Clella B. Gregory, “I Survived,” interview by Centers for Disease Control and Prevention, CDC.
The Flu’s Effects on Family Structure

During the pandemic and the years after its passing, families and neighbors struggled to find an answer to the difficult question: “what to do for the children made orphans by the Spanish Influenza?” According to historian Esyllt W. Jones, friends and community members were important factors in addressing this question. Some individuals, such as Mrs. John C. McInnis of Worcester, Massachusetts, simply heard about the plight of the orphans and decided to take action. Mrs. McInnis opened her modest home to the “babies [that were] not wanted,” and created a make-shift orphanage for children whose parents had perished in the influenza outbreak. With the aid of the Worcester Women’s Club, Mrs. McInnis raised enough money to support local children impacted by the flu and cared for the little ones in her home-based orphanage (Figure 2). This illustrates that in the aftermath of the Spanish influenza pandemic, community members came together to care for orphans and were crucial to their survival.

Although many extraordinary women like Mrs. McInnis undoubtedly changed the lives of these orphaned children for the better, “the first and most important source of assistance was the family network.” Families were forced to piece together their lives following the deaths of loved ones, and the extended family played an essential role. Relatives were primarily responsible for the wellbeing of their family members and frequently took in widows and children. Caroline Wernecke Pharris, whose father died from the flu, was sent to live

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20. Jones, Influenza 1918, 142.
23. Jones, Influenza 1918, 142.
with her grandparents at a young age. She recalled that “my grandparents were good to me,” and their support allowed her to grow up in a family-centered home.25 Extended family played an essential role in the wellbeing and care of flu orphans.

While the aid of extended families was essential to the care of flu orphans, there were many who had no family to turn to. America’s large population of immigrants fell into this category. At the turn of the twentieth century, the United States experienced an explosion of immigration from across the globe. America’s extraordinary economic opportunities combined with Europe’s political unrest contributed to a considerable percentage of this mass migration. Ellis Island, a major immigration port, estimated that near the turn of the century, over twenty-seven million immigrants entered the United States.26 These immigrants left everything behind—including their extended family—to come to a land of freedom and opportunity. When the Spanish influenza struck in 1918, first-generation flu orphans had no extended family nearby who could lend support. Since their relatives lived in foreign countries, these orphans were left to the mercy of private charities. Kind strangers adopted some orphans of immigrants, including siblings Elizabeth Jane and Edward Murray.27 Elizabeth and Edward, twins born in Australia in 1914, were the children of poor immigrants who came to America in 1916.28 Their parents died of the Spanish Flu in 1918, and with no family living in the United States, the two toddlers were utterly alone. Mabel J. Ricker and her husband “heard of the children whose lives had been darkened” and sprang into action.29 The Rickers adopted the twins and raised them as if they were their own.30

Following suit, other couples and families decided to adopt flu orphans. Countless newspaper articles reported adoptions from kind strangers who strove to make a happy home for the unfortunate children. An elderly man who lost his son in the Great War met two little orphans, and, driven by “an

28. 1920 U.S. Census, population schedule, Grinnel Township, Poweshiek, Iowa, ED 124, p. 64, sheet 11A, Ricker Family; database with images, Ancestry (http://ancestry.com); NARA.
30. 1920 U.S. Census, p. 64, sheet 11A; Ancestry (http://ancestry.com : accessed 18 October 2018); NARA.
intangible bond of sympathy,” reported “I’m going to adopt you both and give you a real home. Since my boy has ‘gone west,’ I’m a childless father. You are fatherless and motherless. Wouldn’t you like to live at my house?” The two youngsters found a “real” home with this elderly man.

Adoption provided stability for some orphaned children, but there were thousands of others who lacked kind strangers to come to their aid. Some of these children worked hard to stay with their siblings, despite the economic hardships that this entailed. The Bowles family is one example of this extraordinary phenomenon. Mr. and Mrs. Bowles died just days apart and left eight young children parentless. Rather than face separation at orphanages, the Bowles siblings decided to stick together and fend for themselves. The 1920 census reported seven of the eight children living together and Catherine Bowles—age eighteen—presiding as the head of the household. She played the violin at a cafeteria in order to support her younger siblings, all of which were still in school. The youngest Bowles child, Joseph, lived at the nearby St. Ann’s Infant Asylum. At scarcely two years of age, his older siblings likely found it difficult to care for him and turned to charity for support. Joseph, however, was only temporarily separated from his older siblings. At some point, Joseph left the orphanage, and in 1930, resided with four of his older siblings. Older siblings likely sacrificed time and education in order to care for their younger siblings. These difficulties, however, appeared to be worthwhile in order to stay together.

Like young Joseph Bowles, there were thousands of children who spent their formative years in orphanages. An orphanage in New York told the story of a young orphan boy named William: “William is an orphan, having lost both his

parents during the recent influenza epidemic. He is a child who never knew what it was to want for anything and never did his happy parents dream that their only child would someday be an inmate of an orphanage.”

As a direct result of the 1918 flu pandemic, orphanages across the country experienced a huge influx of new orphans. An orphanage in Pennsylvania claimed, “the epidemic of influenza in the fall continues up to the present to complicate and increase our work.”

Due to high demand, orphanages appeared to spring up overnight and existing organizations were filled to capacity. As most orphanages were unfunded by the government, churches and aid societies stepped up to the plate. Churches built orphanages and religious leaders of many different traditions sought to provide for both the spiritual and temporal needs of the children in their care (Figure 3).

With the breakdown of family structures, churches and orphanages sought to build an environment where children were cared for and nurtured—both physically and spiritually.

**Emotional Consequences for Children**

Despite the stability and care provided by orphanages, nothing compared to the love provided by a mother or father. A newspaper reported that “many of the children do not know that their mother or father, or both are dead. Many times in their sleep, some of the little ones can be heard calling for their mothers.”

It is evident that the loss of parents at a young age had a substantial effect on

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the emotional well being of flu orphans. One flu orphan, reminiscing about a father who had died before she could remember him, reflected, “there are no happy memories of being with my father, only pictures and family stories. I’ve been told what a wonderful man he was, but couldn’t he have lived a little longer? Here I am, almost 90, and I still think of ‘what might have been.’” Even nearly a century after her father’s passing, this now-elderly flu orphan continued to struggle with her tragic loss.

The pandemic left emotional scars that affected all survivors, even those who had not lost parents. In the words of historian Carla R. Morrisey, “a child did not have to lose parents to be forever marked by the Spanish Influenza.” Just living through the troubling time affected the long-term emotional health of survivors and their loved ones. Jeanne Shinnick was only eight when the Spanish Influenza reached her small hometown just outside of Philadelphia. Jeanne came down with the flu and recovered, but others in her community were not so lucky. Even though her parents survived, Jeanne, like so many other young children, witnessed the death and despair that accompanied the outbreak. She later described a childhood experience where she stood on the porch and looked across the street at her neighborhood. All of her neighbors had died and the local authorities had stacked the bodies in a large pile in the front yard (see Figure 4). Years later, her son Drew described his mother as a “professional worrier” and believed that the horrors of 1918 influenced this behavior. He claimed, “she was an eyewitness to the end of many worlds she lived in,” and the “event which I believe defined the woman who was

Figure 4. Scenes like this were common in the fall of 1918. Many young children—orphans or not—who witnessed the horror of widespread death were emotionally impacted for the rest of their lives. (“Demonstration at the Red Cross Emergency Ambulance Station in Washington DC during the influenza pandemic of 1918,” Library of Congress).

43. Pharris, “I Survived.”
to become my Mom . . . was the horrific 1918 pandemic.” This shows that the overwhelming presence of death in 1918 had a lasting emotional impact on children that would span for decades.

**Changing the Economic Trajectory of Life**

An important feature of the Spanish influenza pandemic was the long-term economic impact that it had on children. Caroline Wernecke Pharris was only an infant when her father Dr. Otto Wernecke, a prosperous dentist, passed away in December of 1918 (Figure 5). His wife, Mrs. Wernecke, was left to raise her three small children alone. When Otto died, “many people seemed to feel that since their dentist had died they didn’t have to pay the money they owed for dental work he had done.” Otto’s little family was left destitute and in order to support her children, Mrs. Wernecke found work in the millinery or hat-making business (Figure 6). In addition to this meager income, Mrs. Wernecke likely drew on community aid to support her young family. According to an aid society statistic, in the several years following 1918, the number of widows asking for assistance increased by nearly sixty percent. These funds were used to support families struggling after the loss of a male breadwinner.

Even with assistance, Mrs. Wernecke was unable to work and care for her children at the same time and sent her littlest ones to live with nearby relatives. Her youngest daughter, Caroline, never knew her father but claims that his death changed her life forever. Caroline wholeheartedly believed her “father’s death in the flu pandemic affected [her family] economically, emotionally, and socially” and that “the flu pandemic of 1918 drastically

46. Shinnick, “I Survived.”
47. Pharris, “I Survived.”
changed the trajectory of our lives.” Although Mrs. Wernecke worked hard to provide for her children, she did not earn enough to send them to college. Caroline had always dreamed of becoming a school teacher, while her brother Otto Jr. aspired to become an engineer. Unfortunately, because of their poverty following their father’s death, neither was able to attend college and fulfill their dreams. Likewise, another flu orphan recalled that “the devastation and poverty that pervaded [our] lives from that time on.” The pandemic changed the economic status of many orphans and half-orphans, not only temporarily, but in the following decades.

Conclusion

The Spanish Influenza pandemic of 1918 had significant effects on the American family. While it tore households apart, extended family and community members sought to recreate the stability of families by caring for widows, widowers, and their children. Relatives and community members provided crucial support structures to flu survivors, and although many consider 1918 to be a difficult time, it quickly became a year marked with generosity and love. American communities and religious organizations were united in fighting for the wellbeing of the families left behind. Innocent children were the most impacted victims of the flu and orphans were cared for by extended family, older siblings, orphanages, or adopted by kind strangers. Whatever fate had in store, family and community members strove to ensure that flu orphans were cared for. Even if children continued to live with their immediate families, the outbreak still left a tangible mark on their emotional wellbeing and economic status. Although “the circumstances of many must have been bleak, individual women, men and children

50. Pharris, “I Survived.”
51. Pharris, “I Survived.”
52. Lois Miller Stougard, “I Survived,” interview by Centers for Disease Control and Prevention, CDC.
displayed considerable resilience and courage.”\textsuperscript{53} The outbreak was a trying time, but one that was met with courage, strength and endurance—all of which became a defining characteristic of the American family.

\textsuperscript{53} Jones, \textit{Influenza 1918}, 163.