

## Student Sample: Grade 12, Informative/Explanatory

The essay that follows was written for an Advanced Placement U.S. history class. The student had unlimited time to write and likely received feedback and instructional support while creating the essay. (Essay ©2009 by The Concord Review, Inc. Reprinted with permission.)

### **In the Wake of the Spanish Lady: American Economic Resilience in the Aftermath of the Influenza Epidemic of 1918**

*Whatever does not kill me makes me stronger.*<sup>1</sup>  
—Friedrich Nietzsche

America in the years leading up to 1918 was as confident in its medical ability as it had ever been. In only one century, it had seen the successful vaccination, containment, or cure for the notorious menaces of smallpox, anthrax, rabies, meningitis, typhoid, malaria, yellow fever, diphtheria, cholera, and tetanus.<sup>2</sup> Due to the new strides in bacteriology, germ theory, and sanitation, as well as new methods devised to control food-, water-, and insect-borne diseases, Americans were experiencing an era of unprecedented health. Whereas in all previous wars, more American soldiers were lost to disease than in action, American troops in World War I saw an all-time low in the number of deaths due to disease. Army camp inspections, carried out by William Henry Welch, the respected doctor and assistant to the Army Surgeon General, revealed that, though camps were overcrowded, “the health of the army proved to be as good as any reasonable doctor could expect.”<sup>3</sup> Unfortunately, the new light that had been shed on disease control did not apply to air-borne viruses. Because neither antibiotics nor a way to control the spread of air-borne diseases had been invented yet, America was as vulnerable to the deadly grip of influenza that would befall it in 1918 as Medieval Europe had been to the Bubonic Plague of the 14th century.

More people died of the Spanish Flu in the 10 months that it devastated the world than had died of any other disease or war in history. A commonly cited estimate of deaths is 21 million worldwide, yet prominent demographer Kingsley Davis estimates that the disease killed approximately 20 million in the Indian subcontinent alone.<sup>4</sup> The actual number of deaths will never be known, but the modern estimate is somewhere between 50 and 100 million.<sup>5</sup> If an equal percentage of the world population died today, that would be close to 2 billion victims.<sup>6</sup> A bare minimum of 550,000 Americans, or .5 percent of the American population, died in the apocalyptic pandemic.<sup>7</sup> Yet, due to some historical and demographic particulars of the 1918 flu, the American economy—which nearly collapsed in some areas during the outbreak—was not crippled in any lasting way.

The flu is not generally thought of as a killer. Instead, it is perceived as a pesky annual virus, slightly more troublesome than the common cold, but nothing serious. In reality, the average yearly flu is an extremely virulent disease, infecting anywhere from 30 to 60 million Americans annually, of whom about 36,000 die (usually the very old or the very young).<sup>8</sup> It mutates so frequently that humans are never fully immune to it, so a yearly vaccine must be produced to counteract it, whereas most viruses require only one vaccination in a lifetime.<sup>9</sup> The killer flu of 1918, dubbed the Spanish Flu or the Spanish Lady, was a particularly deadly mutation of this influenza virus.<sup>10</sup> In comparison to the .1 percent of infected who die of the annual flu, it killed 2.5 percent of those who contracted it.<sup>11</sup> This mutation had a propensity to cause pneumonia, untreatable at the time, and clogged its victims’ lungs with bloody sputum until their faces turned dark purple and they died of suffocation.<sup>12</sup>

The origins of the Spanish Flu are uncertain, but most experts believe that the first wave in the U.S. emerged in Fort Riley, Kansas, on March 11, 1918, when one of the men came down with a milder form of the mysterious illness.<sup>13</sup> As of the next day, 414 soldiers had contracted the virus, and by the end of the week at least 500 were sick.<sup>14</sup> In total, 48 men died from the first influenza-pneumonia strain by the time it had run its course in the camp—too low a number to merit any concern in the medical community in 1918.<sup>15</sup> Even though the virus struck at least 13 other military camps, there was sparse evidence that civilians were similarly affected, and, besides, disease was a fact of life in any military camp.<sup>16</sup> So, little attention was directed to the budding pandemic. America instead focused on the new draft calls, the war in Europe, the suffragette movement, and the Bolshevik tumult in Russia, while ignoring the mild outbreak of a hard-to-identify flu.<sup>17</sup>

As expected, the flu subsided quickly with a forgettable number of casualties. Unforeseen, however, was the deadlier second wave that would emerge that August to explode in September with

unprecedented virulence. Influenza viruses thrive in cold, dry weather, which is why flu season tends to be during the winter.<sup>18</sup> The fact that it exploded like it did in August, which is neither cold nor dry, makes this flu remarkable. The epidemic first struck Camp Devens, an overcrowded military camp thirty miles from Boston, on September 8 after brewing in Europe for about a month.<sup>19</sup> From there, it spread to the rest of the United States in an unsettlingly erratic manner, hitting most of the East coast, then some of the Midwest and the Gulf Coast region, then the West coast, and ultimately striking the interior.<sup>20</sup> Although at times slow in reaching certain regions, the Spanish Flu was horrifyingly thorough in its damages.

Nearly every city in the United States was affected economically by the flu in the short-term. In many places, the workforce was paralyzed because 21-to-29-year-olds suffered the greatest casualties.<sup>21</sup> So many people died at uncommonly young ages that the average life expectancy dropped 12 years, from 51 in 1917 to 39 in 1918.<sup>22</sup> Whether or not the infected had been young, healthy, and robust prior to contracting the flu was of little consequence. The military, which consisted of a particularly young, healthy, and robust demographic, was hit the hardest of any social group in America: 40 percent of the Navy and 36 percent of the Army developed the flu in 1918.<sup>23</sup> With victims' average age being 33, the volume of death claims by flu victims blind-sided the life insurance companies.<sup>24</sup> One life insurance company handled \$24 million worth of unanticipated death claims for 68,000 deaths.<sup>25</sup> The fact that the majority of victims were in the prime of their lives defied actuarial projections, confusing insurance companies, destroying families, and disrupting the economy at large.

In the most severe stages of the flu, the “essential services” of cities verged on collapse as policemen, firemen, garbage collectors, telephone operators, and even the doctors, nurses, and social workers who were struggling to fight the flu, were absent from work.<sup>26</sup> The Bureau of Child Hygiene strove to handle an overwhelming population of orphans as the fathers and mothers of America, those in the most vulnerable age-range, were decimated by influenza.<sup>27</sup> Employment standards plummeted, the only requirement in some places being “two hands and willingness to work.”<sup>28</sup> Worst off of any “essential service” were the processors of the dead. As morgues filled up, in some places with bodies stacked three and four high, corpses accumulated in the streets, spreading bacteria and the residual influenza virus.<sup>29</sup> In some situations, the dead were left untended, festering in their homes for days.<sup>30</sup> The primary emergency during the flu was in these “essential services,” which could not have held out much longer than they did. While those services continued functioning, even at a minimal level, the rest of the economy was able to rebound to normal capacity within three years, the “Roaring Twenties” as evidence of this resilience. Despite the chaos, the nation persisted.

In *The Review of Economic Statistics* of December 1919, the year 1919 was deemed a “year of readjustment,” one in which the United States was healing from the tensions of 1918.<sup>31</sup> According to the article, in 1918, “industries were straining their energies to meet the unusual demands occasioned by the war,” yet it should be noted that the strain was also partially due to the Spanish Flu.<sup>32</sup> In one county in West Virginia, during the fall of 1918, the three months of flu had left 6,000 ill, of whom 500 died.<sup>33</sup> This sapped the county economy to near-collapse as 80 percent of the labor force fell ill.<sup>34</sup> Coupled with the large population overseas for the war, situations like this compromised cities across the nation, especially with Surgeon General of the Army William Crawford Gorgas shipping thousands of America’s fittest young doctors and nurses to Europe, where he believed they were most necessary.<sup>35</sup> The doctors and nurses who continued to serve at home, like many of the civilians who remained, were generally too old, or too young, or too disabled to adequately respond to the Spanish Flu.<sup>36</sup>

When the epidemic reached cities with a deficient work force and incompetent, sparse medical care, the critical damage to the economy was compounded by restrictive public health ordinances. In an effort to restrict exposure to the virus, the Surgeon General had issued public health ordinances that prohibited most public gatherings and required gauze masks to be worn at all times.<sup>37</sup> In Philadelphia alone, it is estimated that theaters, cinemas, and hotels lost \$2 million to the flu from the ordinances, while saloons lost \$350,000.<sup>38</sup> These ordinances turned out to be fairly pointless: even in places that strictly adhered to the recommendations of the Surgeon General the case and death rates were no lower than those in lenient cities.<sup>39</sup> On a smaller scale, tobacco sales dropped off about 50 percent in places that strictly required cotton face masks because men could not smoke while wearing masks.<sup>40</sup> These masks turned out to be completely ineffective, because the weave of the gauze proved too porous to stop a virus, usually a tiny sphere with a diameter of about 1/10,000 of a millimeter.<sup>41</sup> The futile public health ordinances and gauze masks temporarily damaged business during the flu crisis, yet the economy rebounded.

When contagious diseases attack a society, it tends to hit the poorest sector of economy the hardest. One of the reasons for this is that they are more prone to infect people who have cramped

living quarters, poor hygiene, inadequate water and food supplies, and exposure to parasites—some of the consequences of poverty.<sup>42</sup> Because the working class would be disproportionately affected by disease, the work force would be disproportionately affected by disease, the work force would be disproportionately diminished in the lowest-paying, most essential jobs during an epidemic. By contrast, the Spanish Flu, being an air-borne disease (and thus not preventable through good hygiene and health), affected all sectors of the economy equally. It killed vast numbers of people, but, as noted by historian Alfred W. Crosby, it “ignored the differences between rural and urban, patrician and peasant, capitalist and proletarian, and struck them all down in similar proportions.”<sup>43</sup> Because it was so unbiased in its selection, no social hierarchies were overturned, nor were any particular divisions of employment gutted of laborers. Influenza’s only prejudice was that it ravaged the young, healthy age-range—something fairly irrelevant to economic status—and thus the only long-term economic imbalance was proportional: there were fewer people to work and fewer people sharing in the wealth.

Although the Spanish Flu killed a lower percentage of the population than it affected and lasted for a shorter period of time, the economic benefits of the epidemic can be compared to those of the Black Death. One of the peculiar positive effects of the Black Death, according to historian Norman Davies, was that it marked “the decisive point in the decline of the feudal system in Western Europe.”<sup>44</sup> Although social upheaval may have already been gaining momentum, the deadly epidemic that killed approximately one-third of Europe allowed formerly impoverished and powerless serfs to assert their independence.<sup>45</sup> With an absence of competition in the work force and a high demand for menial labor, serfs were able to gain comparative economic freedom with rising pay.<sup>46</sup> This escalation of the price of labor and goods during the plague is echoed in the aftermath of the Spanish Flu epidemic. *The Review of Economic Statistics* of December 1919 observes the post-influenza wage inflation, noting that the “efficiency of labor, unfortunately, has not materially improved and is still generally below the pre-war level,” yet “rates of wages have remained high during 1919 and have continued to rise rather than decline.”<sup>47</sup> *The Review* also remarks on the oddity that “unemployment has not developed, in spite of the demobilization of the army; and in many sections labor is still reported to be scarce.”<sup>48</sup> The unusually high wages and low labor supply despite the re-absorption of troops into the work force could be attributed to the fact that so many people had succumbed to the pandemic on the home front that the re-entry of troops had normalized, rather than overwhelmed, the labor market.

In the years following 1918, the influenza pandemic, though surely seared in the memories of those it personally affected, quickly subsided from national consciousness.<sup>49</sup> Even during the epidemic, the flu was rarely mentioned in the papers or truly noticed on a national level. As noted by Crosby, “*The Reader’s Guide to Periodical Literature*, 1919-1921 has 13 inches of column space devoted to citations of articles about baseball, 20 inches to Bolshevism, 47 to Prohibition, and 8 inches to the flu.”<sup>50</sup> As the United States emerged victorious from the devastations of World War I, the brief but deadly nightmare of the Spanish Flu was lost to the national memory. The war had put pressure on Americans to sacrifice as much as possible: the government urging people to grow what food they could, eat less meat and fewer luxury foods, buy war bonds, and serve in the army as required by the draft. Wartime America was dealing with death on a regular basis as the war casualties continued to grow, ultimately reaching approximately 117,000 deaths—about 53,000 in battle, the remainder due to disease.<sup>51</sup> With such a high proportion of war losses due to disease and the influenza deaths accompanying the hardships on the home front, the flu must have seemed so intricately enmeshed in the reality of war that it became unremarkable.

After the war had ended and the flu had essentially run its course in most places, the thrifty attitudes about consumption enforced by the war effort and the strict public health ordinances were immediately discarded. Americans had a brief attention span for such restrictions—they were only heeded during the war for patriotic reasons or in the midst of a deadly, dramatic pandemic. *The Review of Economic Statistics* of December 1919 remarked that “extravagant expenditure, both public and private, is found on every hand.”<sup>52</sup> San Franciscans—who endured the worst hit of the Spanish Flu on the West Coast—had complied with the October-November 1918 masking ordinance that had required gauze masks be worn at all times.<sup>53</sup> Yet, a mid-December masking recommendation of that same year met the fierce opposition of 90 percent of the city and was struck down by the San Francisco Board of Supervisors.<sup>54</sup> The intolerance for what were thought at the time to be potentially life-saving health measures reflects the prevalent mood at the time of impatience with inconvenience that trumped even fear of death.

Perhaps the Spanish Flu would have drawn more attention if only it had left the scar of a long depression in its wake. Yet, after the crippling 10 months of the flu, the American economy was not only

undamaged, but booming. Following the “year of readjustment” of 1919, the United States experienced a sunny era of unprecedented prosperity.<sup>55</sup> The national income, which had remained stagnant from 1890 to 1918, rose more than \$200 per capita and laborers enjoyed a workday diminished from 12 to eight hours, as well as a paid annual vacation.<sup>56</sup> With the advent of mass-production due to the innovations of the assembly line and expanded industrial exploitation of electricity, productivity soared to unheard-of levels.<sup>57</sup> In the mere 30 years between 1899 and 1929, industrial production expanded by 264 percent.<sup>58</sup> All of this was accomplished by a manufacturing labor pool that, according to historian William E. Leuchtenburg in his book *The Perils of Prosperity*, contained “precisely the same number of men in 1929 as it had in 1919.”<sup>59</sup> The workforce to attain these new heights was the same workforce that been described in 1919 as generally sufficient, yet which was in many sectors “still reported to be scarce.”<sup>60</sup> In the same way that the Renaissance thrived in the wake of the Black Plague by benefiting from capital redistribution to a greater demographic, the destruction of the Spanish Flu had opened up a decade of culture and materialism to a population that benefited from the resulting availability of jobs and higher wages.

With thousands of the fittest soldiers, doctors, and nurses overseas and the stress of coping with wartime and its strict economic regulations, a flu epidemic was the last thing that Americans of 1918 needed, or expected. It was especially traumatic when even the enormous strides that had been made in recent years in the medical community were insufficient to control this epidemic of a traditionally unobtrusive disease. Disturbingly, young, healthy adults were the most likely to succumb to the virus and die of a violent, delirious pneumonia. With the backbone of the economy debilitated and inept medical care, U.S. society could have collapsed. However, the flu lasted for a short enough time that it did not permanently disable the workforce. Also, because the primary target was an age-group rather than a class, the virus infected different socioeconomic sectors evenly. As a consequence, though in many places the workforce was reduced to the point of near-collapse, the population retained its socioeconomic balance. Finally, because the flu took place for 10 months during and after World War I, the most devastated demographic was replaced by the return of soldiers who could then be reabsorbed easily into society, thereby alleviating the labor-pool crisis. From the perspective of its victims and their loved ones, the 1918 influenza was a tragedy; however, viewed within an economic paradigm, the Spanish Lady smoothed the transition from the turbulence of the 19th and early 20th centuries into the prosperity of the 1920s.

#### Endnotes

<sup>1</sup> Friedrich Nietzsche *Twilight of the Idols, or, How to Philosophize with a Hammer* (Oxford: Oxford University Press, 1988) p. 5, [http://books.google.com/books?id=oh4q25gwKOGC&pg=PR3&dq=twilight+of+the+idols&sig=6sr5p PhV2ST 4tHWj\\_CbRqJ-5Ty4#PPA5,M1](http://books.google.com/books?id=oh4q25gwKOGC&pg=PR3&dq=twilight+of+the+idols&sig=6sr5p PhV2ST 4tHWj_CbRqJ-5Ty4#PPA5,M1)

<sup>2</sup> Alfred W. Crosby. *America's Forgotten Pandemic: The Influenza of 1918* 2nd ed. (Cambridge: Cambridge University Press, 2003) p. 10; *The American Experience: Influenza 1918*, Program Transcript, PBS, <http://www.pbs.org/wgbh/amex/influenza/filmmore/transcript/transcript1.html>

<sup>3</sup> Crosby, p. 3

<sup>4</sup> *Ibid.*, pp. 206, 207

<sup>5</sup> Sverre-Erik Mamelund, “Can the Spanish Influenza Pandemic of 1918 Explain the Baby Boom of 1920 in Neutral Norway? Population English Edition, 2002) Vol 59, No. 2 (March-April, 2004) p. 232, <http://links.jstor.org/sici?sici=1634-2941%28200403%2F04%2959%3A2%3C229%3ACTSIPO %3E2.0.CO%3B2-Z>

<sup>6</sup> John M. Barry, *Great Influenza: The Epic Story of the Deadliest Plague in History* (New York: Penguin Group, 2004) p. 238

<sup>7</sup> *Ibid.*, p. 238

<sup>8</sup> Tim Appenzeller, “Tracking the Next Killer Flu,” *National Geographic* (October 2005) p. 12

<sup>9</sup> *Ibid.*, p. 12

<sup>10</sup> It is generally thought that the Spanish flu got its name because Spain, being a neutral country in the World War I, did not censor its newspapers, so the mortality rates were exposed to the world. It is certain that the flu did not originate in Spain, though it is not certain where it did originate. Most experts agree that it probably began in America. *Ibid.*, p. 12

<sup>11</sup> 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) p. 7

<sup>12</sup> Barry, p. 243

<sup>13</sup> Mary Ellen Snodgrass, *World Epidemics: A Cultural Chronology of Disease from Prehistory to the Era of SARS* (Jefferson, North Carolina: McFarland & Company, Incorporated, 2003) p. 272

<sup>14</sup> Ibid., p. 272

<sup>15</sup> Crosby, p. 19

<sup>16</sup> The flu was not made a reportable disease in many cities until the second wave of the epidemic was already in full swing because the medical community was reluctant to accept that influenza had reached such proportions. This partially accounts for the incomplete civilian records concerning the flu, in contrast to the records of controlled populations, like the military and prisons, which kept strict medical records of any and all diseases in the community. Kolata, *Flu*, p. 10

<sup>17</sup> Crosby, pp. 17, 18

<sup>18</sup>Gina Kolata, "Why winter for the flu? A virus has its reasons; [4 edition]," International Herald Tribune (December 6, 2007) p. 5 <http://proquest.umi.com/pqdweb?index=1&did=1393874091&SrchMod e=1&sid=2&Fmt=3&VInst=PROD&VType=PQD&RQT=309&VName=PQD&TS=1197252984&clientId=14764>

<sup>19</sup> Ibid., p. 4

<sup>20</sup> The American Experience: Influenza 1918, Maps, PBS, <http://www.pbs.org/wgbh/amex/influenza/maps/index.htm>

<sup>21</sup> Crosby, p. 21

<sup>22</sup> Laura B. Shrestha, "CRS Report for Congress: Life Expectancy in the United States," (Domestic Social Policy Division, 2006) p. 31, <http://www.ncseonline.org/NLE/CRSreports/06Sep/RL32792.pdf>

<sup>23</sup> Kolata, *Flu*, pp. 6, 7

<sup>24</sup> Crosby, p. 312

<sup>25</sup> Ibid., p. 312

<sup>26</sup> Ibid., p. 75

<sup>27</sup> Ibid., p. 75

<sup>28</sup> Ibid., p. 75

<sup>29</sup> Ibid., p. 76

<sup>30</sup> Ibid., p. 76

<sup>31</sup> Joseph S. Davis, "Economic Conditions Since the Armistice," *The Review of Economic Statistics* Vol 1, Monthly Supplement (December 1919) p. 9, <http://links.jstor.org/sici?sici=00346535%28191912%291%3C9%3A%3A%3E2.0.CO%3B2-0>

<sup>32</sup> Ibid., p. 9

<sup>33</sup> Snodgrass, p. 276

<sup>34</sup> Ibid., p. 276

<sup>35</sup> Barry, pp. 142, 143

<sup>36</sup> Ibid., p. 143

<sup>37</sup> Crosby, p. 74

<sup>38</sup> Ibid., p. 87

<sup>39</sup> Ibid., p. 74

<sup>40</sup> Ibid., p. 104

<sup>41</sup> Barry, pp. 359, 103

<sup>42</sup> Kolata, Flu, p. 47

<sup>43</sup> Crosby, p. 323

<sup>44</sup> Norman Davies, *Europe: A History* (New York: Oxford University Press, 1996) p. 412

<sup>45</sup> Ibid., p. 412

<sup>46</sup> Ibid., p. 412

<sup>47</sup> Ibid., p. 412; Davis, p. 10

<sup>48</sup> Davis, p. 10

<sup>49</sup> Crosby, p. 314

<sup>50</sup> Ibid., p. 314

<sup>51</sup> The Great War: Resources, WWI Casualty and Death Tables, PBS, [http://www.pbs.org/greatwar/resources/casdeath\\_pop.html](http://www.pbs.org/greatwar/resources/casdeath_pop.html)

<sup>52</sup> Davis, p. 9

<sup>53</sup> Crosby, pp. 70, 108-110

<sup>54</sup> Ibid., pp. 70, 108-110

<sup>55</sup> Davis, p. 10; William E. Leuchtenburg, *The Perils of Prosperity: 1914-32* (Chicago: The University of Chicago Press, 1958) p. 178

<sup>56</sup> Leuchtenburg, pp. 178-179

<sup>57</sup> Ibid., p. 179

<sup>58</sup> Ibid., p. 180

<sup>59</sup> Ibid., p. 179

<sup>60</sup> Davis, p. 10

## **Bibliography**

Appenzeller, Tim, "Tracking the Next Killer Flu," *National Geographic* October 2005, pp. 8-31

Barry, John M., *Great Influenza: The Epic Story of the Deadliest Plague in History* New York: Penguin Group, 2004

Crosby, Alfred W., America's Forgotten Pandemic: The Influenza of 1918 2nd ed., Cambridge: Cambridge University Press, 2003

Davies, Norman, Europe: A History New York: Oxford University Press, 1996

Davies, Pete, The Devil's Flu: The World's Deadliest Influenza Epidemic and the Scientific Hunt for the Virus That Caused It New York: Henry Holt and Company, LLC, 2000

Davis, Joseph S., "Economic Conditions Since the Armistice," The Review of Economic Statistics Vol. 1, Monthly Supplement (December 1919) pp. 9-13, <http://links.jstor.org/sici?sici=00346535%28191912%291%3C9%3AIR%3AOTY%3E2.O.CO%3B2-O>

"FLU CASES DROP 143; PNEUMONIA KILLS 35: Eight More Deaths From Influenza, but Much Less Fatal Than in 1918-19. GERMS GO THROUGH STONE Dr. Cecil Warns to Keep Feet Dry and Call Physician at First Symptoms," New York Times (1857-Current file) New York, New York, January 31, 1922, <http://proquest.umi.com/pqdweb?did=109336533&Fmt=10&clientId=14764&RQT=309&VName=HMP>

Influenza 1918: The American Experience VHS, Directed by Rocky Collins, 1998; PBS American Experience, 2005

Kolata, Gina, 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

Kolata, Gina, "Why winter for the flu? A virus has its reasons; [4 edition]," International Herald Tribune December 6, 2007, p. 5 <http://proquest.umi.com/pqdweb?index=1&did=1393874091&SrchMode=1&sid=2&Fmt=3&VInst=PROD&VType=PQD&RQT=309&VName=PQD&TS=1197252984&clientId=14764>

Leuchtenburg, William E., The Perils of Prosperity: 1914-32 Chicago: The University of Chicago Press, 1958

Mamelund, Sverre-Erik, "Can the Spanish Influenza Pandemic of 1918 Explain the Baby Boom of 1920 in Neutral Norway?" Population (English Edition, 2002-) Vol. 59, No. 2. (March-April, 2004) pp. 229-260 <http://links.jstor.org/sici?sici=1634-2941%28200403%2F04%2959%3A2%3C229%3ACTSIPO%3E2.O.CO%3B2-Z>

Nietzsche, Friedrich, Twilight of the Idols, or, How to Philosophize with a Hammer Oxford: Oxford University Press, 1998, [http://books.google.com/books?id=oH4q25gwkOgC&pg=PR3&dq=twilight+of+the+idols&sig=6sr5pPhV2ST4tHWj\\_CbRqJ-5Ty4#PPA5,M1](http://books.google.com/books?id=oH4q25gwkOgC&pg=PR3&dq=twilight+of+the+idols&sig=6sr5pPhV2ST4tHWj_CbRqJ-5Ty4#PPA5,M1)

Shrestha, Laura B., "CRS Report for Congress: Life Expectancy in the United States," Domestic Social Policy Division. 2006, <http://www.ncseonline.org/NLE/CRSreports/06Sep/RL32792.pdf>

Snodgrass, Mary Ellen, World Epidemics: A Cultural Chronology of Disease from Prehistory to the Era of SARS Jefferson, North Carolina: McFarland & Company, Incorporated, 2003

The American Experience: Influenza 1918, Maps, PBS, <http://www.pbs.org/wgbh/amex/influenza/maps/index.html>

The American Experience: Influenza 1918, Program Transcript, PBS, <http://www.pbs.org/wgbh/amex/influenza/filmmore/transcript/transcript1.html>

"THE FOUR HORSEMEN," New York Times (1857-Current file) New York, New York: June 5, 1926 <http://proquest.umi.com/pqdweb?index=2&did=104208469&SrchMode=1&sid=3&Fmt=10&VInst=PROD&VType=PQD&RQT=309&VName=HNP&TS=1197088297&clientId=14764>

The Great War: Resources, WWI Casualty and Death Tables, PBS, [http://www.pbs.org/greatwar/resources/casdeath\\_pop.html](http://www.pbs.org/greatwar/resources/casdeath_pop.html).

## Annotation

The writer of this piece

- **introduces a topic.**
  - *More people died of the Spanish Flu in the 10 months that it devastated the world than had died of any other disease or war in history. . . . Yet, due to some historical and demographic particulars of the 1918 flu, the American economy—which nearly collapsed in some areas during the outbreak—was not crippled in any lasting way.*
- **organizes complex ideas, concepts, and information so that each new element builds on that which precedes it to create a unified whole.**
  - The information is organized logically (and, in places, chronologically). The introduction previews the content and then moves through several carefully sequenced categories of information, ending with a conclusion that summarizes the main points of the explanation.
- **develops the topic thoroughly by selecting the most significant and relevant facts, extended definitions, concrete details, quotations, or other information and examples appropriate to the audience's knowledge of the topic.**
  - Details: *In only one century, it had seen the successful vaccination, containment, or cure for the notorious menaces of smallpox, anthrax, rabies, meningitis, typhoid, malaria, yellow fever, diphtheria, cholera, and tetanus.<sup>2</sup> . . . The war had put pressure on Americans to sacrifice as much as possible: the government urging people to grow what food they could, eat less meat and fewer luxury foods, buy war bonds, and serve in the army as required by the draft.*
  - Examples: *It mutates so frequently that humans are never fully immune to it . . . The killer flu of 1918, dubbed the Spanish Flu or the Spanish Lady, was a particularly deadly mutation of this influenza virus.<sup>10</sup>*
  - Facts: *Following the “year of readjustment” of 1919, the United States experienced a sunny era of unprecedented prosperity.<sup>55</sup> The national income, which had remained stagnant from 1890 to 1918, rose more than \$200 per capita and laborers enjoyed a workday diminished from 12 to eight hours, as well as a paid annual vacation. <sup>56</sup>*
  - Quotations: *As noted by Crosby, “The Reader’s Guide to Periodical Literature, 1919–1921 has 13 inches of column space devoted to citations of articles about baseball, 20 inches to Bolshevism, 47 to Prohibition, and 8 inches to the flu.”<sup>50</sup> . . . All of this was accomplished by a manufacturing labor pool that, according to historian William E. Leuchtenburg in his book *The Perils of Prosperity*, contained “precisely the same number of men in 1929 as it had in 1919.”<sup>59</sup>*
- **uses appropriate and varied transitions and syntax to link the major sections of the text, create cohesion, and clarify the relationships among complex ideas and concepts.**
  - *Because neither antibiotics nor a way to control the spread of air-borne diseases . . . had been invented yet . . . Yet, due to . . . Instead, it . . . In reality . . . As of the next day . . . In total . . . Even though . . . So . . . As expected . . . However . . . From there . . . Although at times slow . . . Whether or not . . . In the most severe stages . . . As morgues filled up . . . In some situations . . . By contrast . . . But . . . Because it was so unbiased in its selection . . . This escalation . . . In the years following 1918 . . . As the United States emerged . . . After the war had ended . . . Yet . . . From the perspective of . . .*
  - *. . . there was sparse evidence that civilians were similarly affected, and, besides, disease was a fact of life in any military camp.<sup>16</sup> So, little attention was directed to the budding pandemic . . . With an absence of competition in the work force and a high demand for menial labor, serfs were able to gain comparative economic freedom with rising pay.<sup>46</sup>*
- **uses precise language, domain-specific vocabulary, and techniques such as metaphor, simile, and analogy to manage the complexity of the topic.**
  - *. . . bacteriology . . . diphtheria . . . sanitation . . . suffragette movement . . . pandemic . . . virulent disease . . . influenza viruses . . .*

- . . . as a killer . . . As a pesky annual virus, slightly more troublesome than the common cold . . . if only it had left the scar of a long depression . . . budding pandemic . . . In the same way that the Renaissance thrived in the wake of the Black Plague . . .
- **establishes and maintains a formal style and objective tone while attending to the norms and conventions of the discipline in which the student is writing.**
  - . . . there was sparse evidence that civilians were similarly affected, and, besides, disease was a fact of life in any military camp.<sup>16</sup> So, little attention was directed to the budding pandemic . . . With an absence of competition in the work force and a high demand for menial labor, serfs were able to gain comparative economic freedom with rising pay.<sup>45</sup>
  - When contagious diseases attack a society, it tends to hit the poorest sector of the economy the hardest. . . . By contrast, the Spanish Flu, being an air-borne disease (and thus not preventable through good hygiene and health) affected all sectors of the economy equally.
- **provides a concluding section that follows from and supports the information or explanation presented (e.g., articulating implications or the significance of the topic).**
  - From the perspective of its victims and their loved ones, the 1918 influenza was a tragedy; however, viewed within an economic paradigm, the Spanish Flu smoothed the transition from the turbulence of the 19th and early 20th centuries into the prosperity of the 1920s.
- **demonstrates good command of the conventions of standard written English.**