

The Other Forgotten Pandemic: Canada and the Spanish Flu in 1920

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Abstract

The 1918-19 pandemic of the Spanish flu, which killed 30 to 50 million people worldwide, has had a profound effect on the way we deal with and react to epidemics. When Canada is faced with an outbreak of the flu, SARS, or any other flu-like disease, the media and the medical community refer to the that pandemic. Although for years historians ignored or downplayed its significance (American historian Alfred Crosby called it the “forgotten pandemic”¹), today there are scores of publications about it. What has been left out of the historiography, however, is the return of the Spanish flu in February 1920. This “really forgotten” pandemic also killed thousands of Canadians and left tens of thousands sick. The Spanish flu return in 1920 has not only been forgotten, but its existence raises questions surrounding the response of the newly-formed Federal Department of Health (created in mid-1919), as, very strangely, there is no record of the epidemic in the Departmental reports of this period.

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1. Introduction

On June 6, 1919, Canada’s Governor General, the Duke of Devonshire, gave royal assent to “An Act respecting the Department of Health”, which, for the first time, meant that the federal government was going to have a single department directly involved in public health in Canada. Before that, federal health responsibilities, such as they were, had been divided among fifteen different departments. The new act was a result of criticism of the lack of federal involvement in the response to the 1918-19 “Spanish” influenza pandemic, which took the lives of 30-50,000 Canadians.² In a report to the War Committee of Cabinet, Vincent Massey (who would become Canada’s first Governor General) was blunt:

The recent epidemic of Spanish influenza points to the need for a federal health authority. Throughout this crisis there was no organization competent to handle the problem on a national scale. The control of the disease was necessarily left to local boards, many of them ill-informed and all of them inevitably lacking in co-ordinated effort.³

Massey then went on to say what the federal government could and should have done:

First, it could have issued warnings and advice to the various provincial officers. Second, it could have given specific directions and ensured that a uniform, coordinated plan was followed. Third it could have guaranteed that proper information was circulated and that ‘quack’ doctors and bad science were not allowed to exert undue influence on either the public or the official responses of local governments. Fourth

it could have led the fight to 'isolate the influenza and discover preventative sera'. Fifth and last it could have monitored the disease, compiled statistics and tracked its spread across the country.⁴

His recommendations were accepted by the federal government and then approved in October 1919 by the newly-formed Dominion Council of Health, a federally created body consisting of federal and provincial representatives, forming part of the Federal Department of Health. The Council agreed:

...that in the event of another flu outbreak, the federal department's initial task would be to disseminate information about the nature of the disease so as to counteract any false theories.... Second it would be made known there was no vaccine against influenza but there was a vaccine that seemed (to doctors at the time) to guard against complications from pneumonia. The council also established specific recommendations for treatment that would alleviate any confusion in future: "The patient should of possible go to bed, send for a physician, and remain in bed until all acute symptoms are over"... The first order of business during a recurrence of the pandemic would thus be public education.⁵

Less than four months later, Canada was hit by still another wave of influenza, one not as severe in terms of deaths as in 1918-19. This wave was, however, serious enough in some communities to require, once again, a major response including closures and a call for volunteers. This outbreak of influenza involves a mystery of sorts, for there is no mention of the flu in any of the Departmental reports of this period—even though the possibility of a flu outbreak was one reason for the creation of the Department.

Although it was for decades left out of the historiography, there are now scores of publications about the 1918-19 influenza pandemic, the so-called "Spanish" flu, in Canada.⁶ Some date back to 1919 before the outbreak in 1920, most being published in the last three decades; but only a handful mention the outbreak in 1920. While the return of the epidemic has not been entirely ignored, there is a puzzling silence in the historiography. In April, 1920, just as the 1920 wave ended, an editorial in the *Canadian Medical Association Journal* acknowledged that the flu was back:

Although the number of cases of pneumonia in the present epidemic is much smaller than in 1918, yet its incidence has been all too frequent, and whilst on the whole the severity of the disease has been less, the large number of fatalities bears witness to its virulent and often intractable character.⁷

Nearly a century later, in 2012, Fahrni and Jones mention twice the flu's return in *Epidemic Encounters*:

Montrealers experienced a second wave of epidemic influenza in the winter of 1920: between January and April of that year, 4,336 contracted it and 431 died. Less dramatic than the autumn 1918 wave, that of 1920 was nonetheless serious. It also appears to have been a more 'typical' influenza epidemic in that it was deadlier for infants and the elderly than for young adults.⁸

Also in *Epidemic Encounters*, Dubois and Goulet go into more detail as they examine the spread of flu in Quebec:

The 1920 wave killed 1,855 people and resulted in 9,346 cases of influenza, for a mortality rate 2.93 times greater than the average for flu deaths registered from 1915 to 1917. Less severe than the preceding wave, the 1920 wave has also been much less thoroughly documented.⁹

In "The reporting of the influenza pandemic, 1918-1920 in Hamilton, Ontario", John Rankin mentions only once the return of the disease in 1920:

Even in February 1920, when there were 3505 active cases, the press had little to say about influenza, returning instead to its previous method of reporting the number of cases without any editorial stance.¹⁰

Lux also mentions flu deaths in 1920 in both her article on the University of Saskatchewan and in her article on the provincial response to the flu.¹¹ These are the only mentions of the return of influenza in Canada in 1920. Thus while the return of the epidemic has not been entirely ignored, there is a rather perplexing silence in the historiography. Furthermore, there has been no study done on the nation-wide impact of the epidemic. This study will begin to fill that gap.

Research for this project focused primarily on a systematic survey of newspapers across Canada from January, February, and March of 1920 from Kingston, Toronto, Regina, Calgary, Vancouver, Halifax, and Winnipeg. The focus of this study is not on the number of people who died, but the general impact of the disease on communities as well as the response of the municipalities, provinces, and the federal government.

In most places, the epidemic began in late January, in some mid-February, and continued until early to mid-March. As early as February 5 there are reports about the epidemic state of the disease. The flu spread from the United States through Canada via the border city of Windsor, Ontario, with some reports claiming the disease came straight from Chicago.¹² In Halifax, Nova Scotia, however, the flu may have come from a ship of labourers from China (derogatorily referred to as “Coolies”).¹³

While the consensus in most cities was that the epidemic in 1920 was a milder form of the deadly outbreaks of 1918 and 1919, the effect on Canada was nonetheless substantial. Thousands of Canadians died and a countless number of families were all taken ill with the disease at once. As in 1918 and 1919, the majority of deaths linked to Spanish flu were due to its complications, namely pneumonia, rather than the disease itself. The lack of volunteer nurses to care for flu and pneumonia patients compounded this problem. A number of cities shut down public spaces entirely.

2. Response of the Federal Department of Health

How did the newly-formed Federal Department of Health respond to the epidemic? In its first meeting in October 1919, the Dominion Council of Health formed a plan that would be carried out in the event of a return of the Spanish flu, including the registration of volunteers and the expansion of hospital facilities, stating that “the first order of business during a recurrence of the pandemic would... be public information.”¹⁴ On February 5, 1920, the Department recognized that the flu was back, according to the large Toronto newspaper *The Globe*: “based on information received from all parts of the country, the Federal Department of Health gives the information that influenza is undoubtedly an epidemic in a considerable number of centres in Canada.”¹⁵

This is all puzzling, to say the least, because the Dominion Council of Health does not reference influenza at all in the minutes for its meeting in May 1920 (just months after the epidemic had ended).¹⁶ The 1920 annual report of the Federal Department of Health makes no mention of an epidemic of influenza, either.¹⁷ Reports from the various newspapers, laying out plans in preparation for another epidemic of influenza, show that the plan outlined by the Dominion Council of Health was carried out. However, decisions regarding this plan, such as the formation of emergency hospitals and the registration of nurses, were made on the municipal and provincial levels. Furthermore, in some cities, there was a great deal of misinformation and disagreement among doctors about the true nature of the disease. This calls into question the effectiveness of the dissemination of information by Federal Department of Health. There are references to statements of “federal health authorities” in the papers, but how the department really responded is unclear. What is quite clear, however, is that the data does not match up with the official reports.

The provincial governments seem to have been much more organized and prepared for the return of the flu than the federal government. Beginning on January 27, 1920, the provincial government of Ontario began planning as to how the epidemic of influenza would be dealt with should it return. Nurses, doctors, and social workers held a meeting with the Provincial Board of Health and various other groups to discuss what actions should be taken. Plans for organization and communication among the various groups, the centralization of service and direction in Toronto, and modes of informing the public were created.¹⁸ The Alberta provincial government had, from time to time since November of 1919, circularized the various local health officials throughout the province on the question of whether the flu would return.¹⁹ Furthermore, decisions on the formation of emergency hospitals, the registration of nurses, closures, etc., were all made on provincial and municipal levels. It is unclear how much guidance the provinces received from the Federal Department of Health; but given the dearth of references to the epidemic in the Departmental papers, it seems that the provinces were left to make their own decisions regarding the spread of the disease.

3. Impact on Communities and Media Reporting of the Flu

Reporting of the influenza epidemic varied from province to province and from city to city. Generally, newspapers used the epidemic of 1918 as a point of comparison to the city’s current situation in February 1920. As in 1918 and 1919, newspapers across the country underrepresented the severity of the disease, making it difficult to get a true

sense of its impact. In many cases, no matter how many people in the city contracted influenza, the newspapers downplayed the impact of the disease—despite the fact that public places were shut down or that schools were closed. In every city, time and time again, the disease is noted as being of “a particularly mild type”—but that is only in relation to the 1918 epidemic.

There was debate in some cities, notably Calgary and Regina, whether the sickness that became epidemic in 1920 was truly a return of the Spanish “flu”. In Regina, the newspaper *The Leader* was criticized for mislabeling and misreporting the disease:

Indirectly, reports have reached *The Leader* from several sources to the effect that people are accusing the newspapers of suppressing information relative to the extent and nature of sickness in Regina at the present time. One individual is reported to have indulged in a very violent tirade against the newspapers and the doctors because, as he alleged, they sought to minimize the “epidemic” and to create the impression that the prevailing sickness this year was not the Spanish influenza of a year ago, whereas he was kept rushing from one deathbed to another.²⁰

The fact that they put “epidemic” in quotation marks is significant. As was often the case in 1918 and 1919, the Regina press refused to name the sickness for what it really was, Spanish influenza, and instead used terms such as “the present malady” or “the present sickness”. There was a similar situation in Vancouver, British Columbia. Although the Vancouver newspaper *The Sun* repeatedly claimed a lack of an influenza epidemic in British Columbia, according to a report in two other newspapers on February 18, this was not the case: “Victoria appears to head the list for the whole Dominion with a record of 325 cases of influenza during the week. This is the official number reported to the provincial board of health by Dr. A. G. Price, medical health officer for the city.”²¹ Thus it is clear that in both Vancouver and Regina, the severity of the disease was downplayed.

Although the flu of 1920 was a milder form of the disease that struck the country in 1918 and 1919, it had a great impact. In Cobalt, Ontario, almost a quarter of the population had contracted the flu.²² In the Anderson Township, outside Windsor, 50 percent of the population took ill with the disease.²³ As early as February 1, it was estimated by physicians that the total number of cases in Windsor was more than two thousand. In that city, one doctor stated that he made sixty-five visits on one Sunday (February 1) and a majority of those visits included multiple members of the family being ill with the “scourge” at once.²⁴ In some smaller cities and townships, the Spanish flu was actually more virulent and epidemic in 1920 than in 1918. In Scarborough, Ontario, on February 12, the township’s medical officer of health declared that there was more sickness than there had been at any time in the township for the past decade.²⁵ A day later, near Fredericton, New Brunswick, in a town called Penniac, there were some cases of Spanish influenza reported to be of the most virulent type that had ever been reported in the province.²⁶

While closures were not as common as in 1918, they still occurred. In Theodore, Saskatchewan, schools were closed and turned into hospitals.²⁷ In Belleville, all public places including schools and churches were closed for three weeks. In Alberta, schools across the province were closed due to the sickness of students as well as teachers. In Erskine, a small community outside Calgary, all schools, churches, and public places were closed.²⁸ In Calgary, children were banned from attending movie theatres before 4:20 p.m.²⁹ Public dancing was also forbidden in a number of cities and towns across Canada. For example, in Huntsville, Ontario, all public places of amusement were closed, and public dancing was forbidden,³⁰ and in Brockville, Ontario, all dancing was prohibited.³¹

Quarantining and other restrictions were also used to try to abate the spread of influenza. In Calgary, the health inspector rigidly enforced his demands upon restaurants and “eating houses” that every utensil be thoroughly scalded.³² The Alberta provincial government stipulated that all patients with Spanish flu or “epidemic influenza” had to be quarantined and their houses and premises disinfected.³³ The health department requested cooperation with theatre managers for “flashing health hints” on the screens as well as disinfecting and ventilating the premises.³⁴ In Dominion City, Manitoba, several families were quarantined and public meetings were prohibited.³⁵ In Calgary, cards were printed and displayed in street cars, theatres, stores, and other public places, warning the public as to the danger of “careless” coughing and sneezing.³⁶ In Regina, Saskatchewan, the board of health closed moving picture houses and theatres to children under seventeen years old during the epidemic of “the present sickness.”³⁷ The spread of the disease was so serious that on February 6, “in an endeavor to keep the “flu” from entering Quebec district the Civic Health Bureau has decided to request all wholesale and retail dealers in Quebec district to refrain from sending and receiving travellers to and from Montreal, Ontario, and the West.”³⁸

The need for nurses was one of the most important topics in the newspapers during the influenza epidemic. In almost every newspaper for the majority of the month of February, there were several calls for nurses in every issue of the paper. In Windsor, as early as February 1, doctors and nurses were working night and day, the ever-increasing number of cases outpacing their efforts.³⁹ In Calgary, a call for nurses was made almost every day in the press from

February 2nd up to the end of the month. The need for and lack of nurses was the “greatest worry” for the city’s health board, as it was in 1918-1919.⁴⁰ The situation was desperate: “The nurses are going day and night, striving to attend to all the calls that come in, and are beginning to show the effects by their tired and worried looks.”⁴¹ The lack of volunteers in Toronto became such a problem that the medical officer of health asked clergy of all denominations to make a special plea from the pulpits to recruit volunteer nurses to go to the homes of the needy and poor.⁴² He also scathingly denounced the people of “so-called ‘Christian Toronto’” because, he claimed, in a city of half a million people, only a handful of volunteers came forward to help those in “dire need and dire distress.”⁴³ In many other towns and cities, the call for volunteer nurses and “practical women” was equally as desperate.⁴⁴ In Rockyford, a small community outside Calgary, Miss Edna Carter, the school teacher, assumed the duties of nurse upon the closing of the school by the health inspector, and nursed alone, in the absence of other volunteers, for several days and nights.⁴⁵ There are several reports from across the country of doctors, nurses, and ambulance drivers working “night and day” for days on end.⁴⁶

4. Conclusion

Through looking at the newspapers, it becomes startlingly clear that a less virulent form of Spanish flu swept Canada in the February of 1920. While the epidemic was not as deadly as its predecessors in 1918 and 1919, it forced sectors of entire cities to close, and a number of cities were shut down entirely. Close to the same number of people died in Ontario of influenza and pneumonia in February 1920 as in the first and deadliest month of the 1918 epidemic (2,315 deaths in 1920 and 3,060 in 1918).⁴⁷ Across the country, entire families fell ill with the disease. There was debate about the true nature of the disease: whether it was it the Spanish flu, bronchial pneumonia, or simply the common cold. However, it is quite apparent that the Spanish flu, as well as its symptoms and oft-deadly grip, did return to Canada in 1920.

The silence in the historical record about this return of the Spanish flu provokes many questions about the newly-formed Department of Health. Why did a federal health department, created in part to deal with influenza epidemics, apparently do so little when the disease struck months after it was created? For now, the issue remains a mystery. If these questions can be answered, new insight will be provided into the creation of the new department and the federal perception at the time of its role in Canadian health policy.

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- 5 Ibid., 178.
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