

# An Epidemic without Enmity: Explaining the Missing Ethnic Tensions in New Haven's 1918 Influenza Epidemic

Julia F. Irwin

Volume 36, Number 2, Spring 2008

Public Health in the City

URI: <https://id.erudit.org/iderudit/1019167ar>

DOI: <https://doi.org/10.7202/1019167ar>

[See table of contents](#)

Publisher(s)

Urban History Review / Revue d'histoire urbaine

ISSN

0703-0428 (print)

1918-5138 (digital)

[Explore this journal](#)

Cite this article

Irwin, J. F. (2008). An Epidemic without Enmity: Explaining the Missing Ethnic Tensions in New Haven's 1918 Influenza Epidemic. *Urban History Review / Revue d'histoire urbaine*, 36(2), 5–17. <https://doi.org/10.7202/1019167ar>

Article abstract

Although much of the historiography of urban public health documents scapegoating of immigrant and working-class civilians during onsets of epidemic disease, the 1918 influenza epidemic in New Haven, Connecticut, suggests a very different story. A large number of industrial working-class Italians made up a significant proportion of the city's population. During the epidemic, Italians succumbed to influenza at nearly twice the rate of other residents. But, contrary to historiographic expectations, the New Haven story is one narrated by piercing silences and a distinct *lack* of hostility towards the immigrant community. These silences must be understood as a product of the period's political and social context. Influenza struck New Haven during the closing months of the First World War, a period marked by calls for unity, cooperation, and fierce patriotism. As Anglo citizens emphasized Americanism and assimilation, the Italian community's middle-class leadership largely acquiesced. Italian editors, physicians, business-owners, and other professionals used the epidemic period to construct a new public face of the Italian community as a modernized, patriotic, and responsible ethnic group. Simultaneously, New Haven's nationally renowned public health officials embraced a wartime vocabulary of voluntarism and civic obligation to alter civilian behaviours. They encouraged education and gentle persuasion in hygiene over more forceful coercion. Together, these community responses to influenza helped to quell potential hostilities. However, they also masked persistent inequalities in Italian health and limited the potential for real urban reforms of immigrant housing and health. Italian- and English-language publications demonstrate the diverse meanings of the influenza epidemic for different groups within the city. They also illustrate the many ways these groups used the epidemic to construct new definitions of citizenship and proper behaviour.

## *An Epidemic without Enmity: Explaining the Missing Ethnic Tensions in New Haven's 1918 Influenza Epidemic*

*Julia F. Irwin*

*Although much of the historiography of urban public health documents scapegoating of immigrant and working-class civilians during onsets of epidemic disease, the 1918 influenza epidemic in New Haven, Connecticut, suggests a very different story. A large number of industrial working-class Italians made up a significant proportion of the city's population. During the epidemic, Italians succumbed to influenza at nearly twice the rate of other residents. But, contrary to historiographic expectations, the New Haven story is one narrated by piercing silences and a distinct lack of hostility towards the immigrant community. These silences must be understood as a product of the period's political and social context. Influenza struck New Haven during the closing months of the First World War, a period marked by calls for unity, cooperation, and fierce patriotism. As Anglo citizens emphasized Americanism and assimilation, the Italian community's middle-class leadership largely acquiesced. Italian editors, physicians, business-owners, and other professionals used the epidemic period to construct a new public face of the Italian community as a modernized, patriotic, and responsible ethnic group. Simultaneously, New Haven's nationally renowned public health officials embraced a wartime vocabulary of voluntarism and civic obligation to alter civilian behaviours. They encouraged education and gentle persuasion in hygiene over more forceful coercion. Together, these community responses to influenza helped to quell potential hostilities. However, they also masked persistent inequalities in Italian health and limited the potential for real urban reforms of immigrant housing and health. Italian- and English-language publications demonstrate the diverse meanings of the influenza epidemic for different groups within the city. They also illustrate the many ways these groups used the epidemic to construct new definitions of citizenship and proper behaviour.*

*L'historiographie de la santé publique urbaine documente souvent les accusations envers immigrants et classes ouvrières, boucs émissaires auxquels l'on attribuait le blâme pour maints assauts de maladies épidémiques. Toutefois les détails historiques de l'épidémie de grippe espagnole de 1918 qui eut lieu à New Haven, Connecticut, suggèrent une trajectoire narrative différente. Les ouvriers et travailleurs industriels de souche italienne constituaient une proportion importante de la population de la ville. Au cours de l'épidémie, les habitants d'origine italienne succombaient à la grippe presque deux fois plus souvent que les autres citoyens. Mais contrairement aux prévisions historiographiques, l'histoire des événements de New Haven est racontée avec des silences perçants, ainsi qu'avec une absence d'inimitié*

*envers la communauté immigrante. Ces silences doivent être compris comme étant un produit du contexte socio-politique de cette période. En effet, la grippe espagnole frappa la ville de New Haven durant les derniers mois de la Première Guerre mondiale, un temps marqué par des appels à l'unité et à la coopération, et par un patriotisme féroce. Pendant que les citoyens "Anglo" soulignaient l'Américanisme et l'esprit d'assimilation, les chefs bourgeois de la communauté italienne acquiescèrent largement. Éditeurs, médecins, propriétaires d'entreprise, et autres professionnels utilisèrent la période d'épidémie pour construire une face publique nouvelle de la communauté italienne, celle d'un groupe ethnique modernisé, patriotique, et sérieux. En même temps, les officiels de la santé publique de New Haven, renommés au niveau national, adoptaient en ce temps de guerre un vocabulaire martial, un langage de volontarisme et d'obligation civique afin de modifier les attitudes des citoyens. En matière d'hygiène, ils encourageaient l'éducation et la persuasion modérée plutôt qu'une plus ferme coercition. Prises d'ensemble, les réponses communautaires à la grippe espagnole aidaient à réprimer de potentielles hostilités. Cependant, ces réactions masquaient aussi les inégalités qui avaient persisté au niveau de la santé publique de la communauté italienne, et limitaient le potentiel pour de vraies réformes urbaines du logement et de la santé publique de la population d'immigrés. Des publications en langue italienne et anglaise démontrent les sens divers que prenait l'épidémie de grippe parmi différents groupes citadins. Celles-ci servent également à illustrer les maintes façons dont ces groupes utilisaient l'épidémie afin de créer des définitions nouvelles de citoyenneté et de comportement correct.*

In the autumn of 1918, as troops in Europe waged the final battles of the First World War, city health officials in New Haven, Connecticut—and worldwide—began to confront a virulent and highly infectious strain of influenza. With over a thousand reported deaths and thousands more reported infections among the population by the spring of 1919, the influenza epidemic affected both New Haven's rich and poor, from the largely Italian industrial working class to members of the socio-economic elite at Yale University. Yet as health professionals anticipated, mortality statistics showed that Italians had died at nearly twice the rate of Anglo residents, and at higher rates than any other immigrant group in the city.<sup>1</sup> These rates confirmed for many public health officials the theory that Italians, as a 'race,' succumbed to influenza and pneumonia at a rate disproportional to other ethnic groups.<sup>2</sup>

Medical historians have long argued that the public associations made among immigrants, poverty, and disease cause community tensions to escalate during urban epidemics.<sup>3</sup>

## *An Epidemic without Enmity*

Given the perception of innate Italian susceptibility to influenza during the era and the low socio-economic status of Italian immigrants in New Haven, the historiography of epidemic disease would predict hostility towards New Haven's Italian community from the city's Anglo majority. Yet the influenza epidemic in this industrial city provides a counter-example, showing a distinct lack of community tensions, despite many potential points of ethnic and class conflict. At the peak of the epidemic, New Haven's small yet burgeoning Italian middle class used public discussions of the epidemic to construct a new public face of the Italian community as modernized and patriotic. This effort, coupled with a community-wide emphasis on wartime unity and a subsequent move towards less coercive forms of public health authority and control, made the local response to the epidemic a story of cooperation and compliance, rather than scapegoating and hostility.

Scholars of the 1918–1919 influenza pandemic have until recently ignored ethnicity as a category of analysis and have neglected the voices and experiences of non-native populations.<sup>4</sup> Newer works have begun to interrogate class and ethnicity in relation to influenza in Canada, Japan, New Zealand, and other areas, but little work has been done in analyzing ethnicity and influenza response in cities of the United States and most of North America.<sup>5</sup> The case of New Haven during the First World War demonstrates that ethnic and class identities must be considered in analyzing the influenza pandemic, for they contributed to diverse individual and community understandings of the disease and its social implications. Further, this focus illustrates that the conceptual links between immigrants and epidemic disease are not the same for influenza as they are for other urban epidemics such as cholera or typhoid.

In 1918, New Haven was the thirty-ninth largest city in the United States, composed of 162,000 inhabitants, over twenty per cent of whom were Italian immigrants and their children, and who were largely impoverished and segregated within specific wards of the city (see figure 1). By this period, however, some members of the Italian community had begun to establish the financial and cultural capital that accelerated their upward mobility into the small but influential Italian petite bourgeoisie. These bankers, small-business owners, editors, and other professionals had started to move to more prosperous areas of the city, but physical and social ties with the larger Italian community remained strong.<sup>6</sup> Through the Italian-language press, these community leaders embraced the epidemic moment to encourage other Italians to adopt U.S. biomedical theories and practices and to demonstrate Italian respectability and patriotism to the Anglo community.

At the same time, New Haven's Department of Health and the Yale University School of Public Health, which were tightly connected, possessed significant cultural and legal authority, locally and nationally. Indeed, the chair of Yale's School of Public Health, Charles-Edward Amory Winslow, was a pre-eminent national figure in the field of public health, and con-



**Figure 1: Map of New Haven Connecticut, divided by ward, 1917. Members of the city's Italian community lived primarily in the tenth and eleventh wards, geographically and culturally isolated from the Yale University campus and much of the rest of the city. Charles-Edward Amory Winslow, *Health Survey of New Haven* (New Haven: Yale University Press, 1917).**

sulted widely regarding influenza and other public health concerns.<sup>7</sup> In response to the epidemic, New Haven public health officials emphasized methods of education and persuasion to transform civilian behaviours, turning to older methods of physical coercion only when voluntary compliance failed.<sup>8</sup> Winslow and other health officials relied on a prevailing discourse of wartime sacrifice, cooperation, and civic obligations in their public statements on influenza and in the regulations they endorsed to confront the disease. The war against influenza did not develop in a vacuum, and relied on the rhetoric and propaganda crafted to mobilize Americans for the war in Europe.<sup>9</sup>

Italian middle-class aspirations, an emphasis on community cohesion, and a less coercive public health force worked together to quell ethnic and class tensions in response to influenza. However, a lack of hostility did not signify the development of real inter-ethnic esteem and support. The New Haven experience with influenza, much like the Winnipeg experience

that Esyllt Jones has examined, “can be seen as a lost opportunity for the development of cross-class and cross-ethnic bounds.”<sup>10</sup> Anglo New Haven residents essentially disregarded ethnicity in their many public discussions of influenza and did not actively blame Italians for spreading the disease. Nonetheless, they responded in paternalistic and racialized ways to the Italian community’s disparate mortality rates, suggesting a lack of real cohesion with the Italian community and complicating the expressed public health emphasis on voluntary compliance. Italian middle-class leaders demonstrated considerable agency in their attempts to reform and reimagine the larger Italian community as a group of respectable immigrants. Yet in so doing they sacrificed the opportunity to demand real and needed improvements in Italian housing and health services. Through readings of public health reports, Anglo and Italian newspapers, and other forums of public discussion, this paper examines community responses to the 1918 influenza pandemic in a large, industrial, and multi-ethnic city, exploring the meanings behind a significant lack of social unrest in the face of a deadly contagious disease.

### **Public Health Confronts Influenza**

The 1918–1919 influenza epidemic devastated New Haven, as it did many parts of the country. The disease’s surprising virulence proved an unwelcome test to Frank Wright, the health officer of New Haven’s Department of Health. In the years preceding the epidemic, Wright and the Department of Health had worked closely with C.-E. A. Winslow and Yale’s School of Public Health, striving to modernize the city’s public health machinery. In fact, influenza struck New Haven a year after Winslow published his *Health Survey of New Haven*, a comprehensive report detailing the state of public health in the city and making recommendations for improvement based on the tenets of contemporary bacteriological science and epidemiology, such as pasteurizing milk, inspecting tenements, restaurants, and privies, and improving surveillance and reporting of infectious diseases.<sup>11</sup>

Even with the host of new approaches to controlling microbes and disease, influenza stymied New Haven’s Department of Health. Wright and Winslow struggled to find effective means of control, and implemented a number of responses, from legislation to vaccination, to try to prevent the mysterious and devastating illness. Deviating from traditional methods of epidemic control like forced hospitalization and expanded police power, New Haven’s public health officials recommended voluntary compliance as a first measure, hoping to quash the potential for hostility. However, health officials demanded the right to use physical compulsion when necessary, and thus affirmed their authority through both gentle and forceful coercion. New Haveners seem to have largely accepted this expanded authority as a necessary response to the peril of disease during this “crisis of contagion.”<sup>12</sup>

Influenza first appeared in Connecticut in September 1918, probably entering the state via the busy ports of New London.

By mid-September, the first influenza cases and deaths had already been reported to New Haven’s Department of Health. While the deaths of sixteen residents would be reported to the Department of Health that month, by October the number soared to 505 reported deaths with thousands ill. By the end of 1918, the Department had received reports of 796 deaths, joined by an additional 139 during the first half of 1919.<sup>13</sup> Looking over the statistics in 1919, Wright acknowledged, “This great number of deaths, about one third as large as the total from all causes for a whole year under normal conditions, is by itself startling, but,” he continued, “the calamity is appalling when we realize that over sixty per cent of the deaths were of persons between the ages of twenty and forty, the most useful and valuable ages of life.”<sup>14</sup> Unlike the normal influenza that posed little more than a bother to the city every year, Wright claimed, the 1918–1919 epidemic disproportionately affected labourers, parents, and taxpayers—the individuals on whom the city relied to function. To prevent further spread of the disease, health officers argued, New Haven residents must no longer regard influenza as a mere winter nuisance; rather, it had to be considered an acute, infectious disease that required legislation, reporting, and education in new behaviours.

In the early stages of the epidemic, health officials in New Haven hoped to alleviate public fear. Recalling an earlier epidemic, the department’s *Monthly Bulletin*, a popular journal intended for the larger public, assured readers, “As a word of comfort, a physician in this city who has for years been one of the foremost men in his profession and in the opinion of the Health Department is probably better able to make a comparison than anyone else, states that the suffering and death rate of the epidemic of 1889 was very much worse than that at present.”<sup>15</sup> Yet concurrent to this publication, health officers in Connecticut laboured to halt the disease. As a first response, the Department of Health enacted a spate of new legislation, a measure not uncommon in the face of acute epidemic diseases such as smallpox and typhoid.<sup>16</sup>

The new legislation favoured voluntarism rather than coercion and compulsion. This gentler approach to sanitary compliance helped deter any potential criticism or objection to expanded public health powers, and echoed contemporary wartime appeals to Americans to alter their behaviours willingly for the strength of the nation, to act out of patriotism rather than in response to force. In October, the department passed an ordinance requiring proper ventilation of streetcars and theatres in the city. While many towns’ health departments opted to close theatres and schools, New Haven’s health officers thought it unnecessary, but cited the necessity of individual compliance and caution.<sup>17</sup> The state Department of Health passed legislation that tried to ensure that theatregoers obeyed new sanitary regulations, and required theatres to show slides during movies warning, “Health Authorities will close this theatre unless spitting, coughing or sneezing is omitted during performances.” Those who disobeyed the

## *An Epidemic without Enmity*

orders were to be forcibly removed from the theatre.<sup>18</sup> Other laws passed in October included a “drastic order,” as the *New Haven Journal-Courier* described it, that forbade public gatherings without permission from the Department of Health had been given the authority to enforce the new hygienic laws.<sup>19</sup> Although officials encouraged voluntary compliance with their recommendations, they justified the use of police power to those who shirked their civic duties.

Although the Department of Health made influenza a reportable disease on 19 September 1918, ignorance of the law, a lack of respect for the department’s authority, and sheer overwork caused many physicians and members of the public not to report those suffering from influenza.<sup>20</sup> In response to increased regulations, a few individuals criticized the clout that members of the Department of Health had assumed. Norris G. Osborn, the editor of the *New Haven Register*, critiqued the department’s domineering stance. “The general public is not unreasonable,” he asserted. “It needs simply to be led instead of driven by men who too often forget that the authority they exercise is delegated and can be withdrawn.”<sup>21</sup> The department acknowledged such criticisms, but it emphasized the difficulty of trying to educate citizens who were unwilling to surrender willingly to health officers’ expertise. “The average human being,” noted the Department of Health’s epidemiologist J. G. Henry, “is careful of his clothing, his money, his social standing, religion, politics, etc., but is more careless of his health than any other animal.”<sup>22</sup> The Department of Health found it difficult to persuade residents by legal measures, and chose to rely primarily on education and persuasion.

Public health authorities used rhetoric of patriotism and civic obligation—common during the war period—as a means to persuade people to follow new hygienic doctrines. In a half-page announcement in its *Monthly Bulletin*, the New Haven Department of Health concluded the discussion of influenza with the command, “It is each person’s privilege to protect himself and his duty to protect others.”<sup>23</sup> Preventing the spread of influenza, like buying Liberty Bonds or conserving meat, wheat, and sugar, represented a vital part of the war effort.<sup>24</sup> As the Connecticut Department of Health stated, “Any persons suffering with this disease who unnecessarily exposes others at this time, is guilty of a most unpatriotic act.”<sup>25</sup> When legislation failed, public health tugged at individual consciences and nationalist sentiment instead.

The city’s three main hospitals—New Haven, Grace, and St. Raphael—all suffered from overcrowding and overworked staff, exacerbating the shortage of medical workers caused by many serving in the war. New Haven Hospital, which had formally incorporated with the Yale School of Medicine in 1917, experienced relatively few economic challenges in response to the epidemic, complaining primarily of staff shortages. However, both Grace Hospital, a homoeopathic institution, and St. Raphael’s, a private Catholic hospital, provided services free to most patients and relied primarily on donations to operate; the epidemic drained their finances significantly.

“The recent epidemic,” Grace Hospital’s superintendent wrote, “taxed us almost beyond endurance, both physically and financially, and we hope we may in some way be able to secure the money to put things on a very firm basis.”<sup>26</sup> Both Grace and St. Raphael reported the deaths of student nurses, and all three hospitals discussed the difficulties of offering care to both military men and civilians.<sup>27</sup> Although the Red Cross and the United States Public Health Service provided the state of Connecticut with 101 nurses and forty-eight physicians, New Haven had to rely mostly on its own health professionals and on civilian volunteers, who took up nursing duties and completed such tasks as driving medical professionals to their appointments.<sup>28</sup>

C.-E. A. Winslow worked alongside the city Department of Health throughout the epidemic, and influenced many of its decisions from his post at Yale University. Winslow’s endorsement of a less coercive, less militarized public health response also reached beyond New Haven and influenced public health policies elsewhere in the United States. New York’s Governor Alfred E. Smith named Winslow to chair his Committee on Epidemic Influenza, an organization composed of prominent health professionals throughout the Northeast, which met several times during the epidemic. This group considered a number of preventative measures for influenza, and drafted a memorandum of recommendations for health departments. These included the suggestion not to enforce the wearing of masks by civilians (a law many other cities would adopt), support for legal measures to prevent the further spread of influenza, and a policy to promote home care, rather than sending patients to overburdened hospitals.<sup>29</sup> Winslow brought many of the organization’s recommendations to New Haven, and convinced local public health authorities to avoid forced hospitalization, masking, and closing of businesses that had caused discontent in other cities.<sup>30</sup>

Although Winslow, Wright, and other health officials largely discouraged martial measures as a first response to influenza, two novel control strategies illustrate that the endorsed idea of voluntary compliance was in reality a more complex construct. In October, Winslow initiated a vaccination campaign for industrial labourers, targeting sites such as the Winchester Repeating Arms Company and the Marlin Rockwell Company. He offered free “vaccination of employees who wish to be inoculated.” However, the vaccine was, according to Frank Wright, “experimental, as far as the laboratory is concerned,” the product of a research project recently undertaken at Yale School of Medicine’s Brady Laboratory.<sup>31</sup> While officials admitted the experimental nature of the vaccine, they did not disclose this to the public, and neglected to mention that vaccination researchers had not even established the viral agent responsible for influenza.

More significantly, although the vaccinations were ostensibly voluntary, it is difficult to imagine how workers could refuse vaccines from a nationally renowned health professional while under the gaze of their supervisors. Further, Winslow targeted

labourers at munitions factories, staffed largely by Italian immigrants. The power relations in place during the vaccination campaign restricted genuine opportunity for consent, illustrating the significant authority and command that health professionals held during the epidemic.

Simultaneously, the New Haven Department of Health began screening all schoolchildren kept home from school for diphtheria, warning that rates might rise rapidly alongside influenza. From 1 October until the end of the year, the Department of Health took approximately five thousand nose and throat cultures from schoolchildren, and located 225 carriers, who underwent repeated tests and medical surveillance until health officers or nurses considered them no longer contagious. Wright celebrated the Department of Health's work, proclaiming, "We are firmly of the belief that by the active measures adopted and by the follow-up work at the home, an outbreak of diphtheria has been averted."<sup>32</sup>

Although it used the influenza epidemic to justify such policies, the Department of Health had already been searching for a way to implement diphtheria testing in the years before the influenza crisis. Public health officials had wanted to test diphtheria carriers, but could not muster enough public support.<sup>33</sup> Influenza gave health officers the justification for experimenting with vaccines and for testing carriers, both of which, in the past, had raised the ire of residents who considered such policies a breach of individual liberty. Health authorities expanded their powers dramatically in response to influenza and helped to legitimize new forms of cultural authority by discarding more coercive measures. In the public sphere, to which I now turn, New Haven residents seemed largely willing to consent.

### ***Influenza in the Anglo and Italian Presses***

The influenza epidemic struck a city starkly divided along ethnic and class lines. In 1918, New Haven's Italian population remained largely segregated from the city at large, with the majority of the 34,000 residents living in the tenements of the city's tenth and eleventh wards. These immigrants came mostly from the rural areas of southern Italy surrounding Naples, often migrating as extended families or even as entire villages, attracted to work in the city's munitions, tool, and rubber factories. In New Haven, many Italians remained incredibly close, both geographically and culturally, and lived together in predominantly Italian areas like Wooster Square and the Hill Section. However, this depiction of ethnic community masks class and regional variations that divided the Italian community. By the start of the First World War, a small percentage of the Italian population had gained the capital and resources that allowed them upward mobility into New Haven's middle class. Regional variations in culture and economic status further split northern and southern Italians.<sup>34</sup>

Despite their numbers, most Italians remained largely politically disenfranchised compared to the city's Anglo majority, and many Anglo citizens perceived Italians as racially or culturally inferior. As Robert Dahl proclaimed in his study of New

Haven, "In a nation where some citizens had great power, high prestige, and enormous income, [the Italian] was often at the bottom of the pile."<sup>35</sup> Town-gown relations further exacerbated the divide between working-class Italians and elites. During the epidemic, Yale University, a centre of significant power and influence in New Haven, quarantined itself and "refused to let any of the students speak to any citizen unless he had a special pass."<sup>36</sup> Yale's president remarked in his annual report that Yale had had plenty of nurses to care for its sick students—in spite of the shortage in the city at large—and celebrated the fact that only three students had died.<sup>37</sup> The disparities of health, wealth, culture, and power in New Haven were great in 1918, and had the potential to ignite at the onset of a crisis like influenza.

Rather than generating noticeable conflict, however, influenza fostered a striking *lack* of discord between these communities. During the epidemic, and especially in its early stages, both Anglo and Italian newspapers published extensively on the disease and its social consequences, producing a wealth of reports, editorials, advertisements, and images. In 1918, a New Haven resident had the choice of reading two major daily English-language newspapers – the New Haven *Register* and *Journal-Courier*, a small Anglo daily, the New Haven *Union* – and one major Italian-language weekly, *Il Corriere del Connecticut*.

Exploring the facets of influenza that the papers considered relevant provides a lens to examine the cultural differences in the ways that Anglo and Italian New Haven residents responded to the disease and, more broadly, the gaps between the two communities. On another level, the papers illustrate the strategies that middle-class Italian leaders employed to construct a new, public face of the Italian community. *Il Corriere's* middle-class editors used culturally sensitive methods to introduce Italian readers to U.S. public health ideas. Editors and other members of the small Italian petite bourgeoisie also published pieces in both *Il Corriere* and the Anglo papers that emphasized the patriotism and respectability of the Italian community. These methods had multiple purposes, which ranged from celebrating Italian pride and urging Italian adoption of Anglo public health methods to highlighting Italian worth for the Anglo community. Middle-class Italian editors and business owners used influenza and its connections to wartime patriotism and assimilation in an attempt to create new perceptions of the Italian community among outsiders and to put forward a new sense of Italian civic responsibilities.<sup>38</sup>

### ***Statistics and Obituaries***

During the first few weeks of the epidemic, influenza rivalled the war in Europe as headline news in New Haven's English-language dailies. On most days in October, front-page stories listed the previous day's reported cases and deaths, generally omitting personal details regarding the deceased. Headlines announced news such as, "Influenza Hits Highest Point Here,"

## *An Epidemic without Enmity*

"Death Rate Is Double That of Last Year," and "About 100 New Cases in City Epidemic Wave."<sup>39</sup> These articles typically quoted Health Officer Frank Wright for the most recent statistics, and listed the number of cases at St. Raphael, Grace, and New Haven hospitals. While the *Register* and *Union* tended to report on influenza locally, the *Journal-Courier* also listed mortality and morbidity rates in New England's military camps and throughout other major metropolitan areas, publishing many stories from Washington DC and New York. Obituaries, too, tended to be impersonal and formal. Typically, they included the deceased's name, address, and next of kin, and the location of funeral services and internment. As the epidemic raged, some prominent local individuals received longer and more personal commemorations; for the most part, however, obituaries simply served as a public notice of death and funeral arrangements.

Whereas the English-language newspaper articles tended overwhelmingly to discuss local and national mortality statistics, rather than more personal stories, *Il Corriere's* focus on influenza told a much different narrative. Acknowledging its readers' interest in the health and well-being of other Italian immigrants in the area, *Il Corriere* published a special section in each edition entitled "News from the Colonies." There, New Haven's Italians could read about the ravages of influenza in nearby cities populated by Italians, including Bridgeport, New London, Stamford, and Boston. A story about New Britain, for example, mentioned that "the Lodge of V[ittorio] E[manuele] III and Stars of Italy, in the last three months (October, November, and December) has paid to its brothers benefits for death and sickness the sum of \$2,152.65, leaving us with around one thousand dollars."<sup>40</sup> *Il Corriere's* celebration of the *colonia's* fraternal organizations, one of the Italian community's strongest forms of social insurance in times of sickness, represented a claim of significant community strength, in spite of influenza's devastations and the lack of public support from the city itself.<sup>41</sup>

Unlike the Anglo newspapers, which commonly published mortality statistics and epidemiological data, most of *Il Corriere's* pieces on influenza were extended, florid, and emotional obituaries that commemorated lives lost and extended sympathies to survivors:

Monday night, after 7 days of illness, a dear girl of only 15 years old, *Antonetta Costantino*, took her last breath, in the arms of her woeful mother. She was the daughter of our dear friend Francesco Costantino, of N. 874 Grand Avenue, well known and esteemed in our colony. Nothing could be done to save the life of the beautiful, intelligent, and virtuous girl, for all the attempts at caring for her were useless, as were the resources of the medical arts.

Immense is the pain and the torture of her parents of the deceased girl and of her younger brothers, relatives, and friends.

The funeral took place Friday in the Church of San Michele, with numerous floral tributes, demonstrating the esteem and sympathy shown to the Costantino family . . .

To the afflicted and inconsolable father, and to the woeful mother of the dear deceased go, from all our hearts, our sincere condolences and profound sentiments.<sup>42</sup>

Elaborate obituaries in *Il Corriere* offered an official commemoration of the dead, a forum that the Anglo press largely denied to immigrants. Further, they provided a space to celebrate Italians who had contributed to the glory of the *colonia*. Reports memorialized two musicians in the Grenadier band, a "heroic" soldier "whose chest was well decorated with medals of honor," and the "courageous and honest" editor of *Il Corriere's* sister paper in Boston, *La Notizia*.<sup>43</sup> Celebrating prosperous and prominent citizens from the region's Italian community, *Il Corriere* reported on influenza in a way that upheld national pride and identity and erased regional and class differences among Italians in New Haven.

### **Public Health Information**

In addition to reporting death rates and obituaries, newspapers commented on the changing public health policies in response to the epidemic. On 15 October the *Journal-Courier* disparaged the "rigid regulations" passed by the Department of Health, but also informed readers of "the Co-operation of Mayor and Police Secured in Fight Against Influenza's Ravages."<sup>44</sup> In addition to publishing news about public health policies, the *Journal-Courier* used its editorial page to criticize the Department of Health. One writer questioned public health officials' decision not to close schools and theatres, asking, "Would it not be a good idea for the city authorities to consult doctors about this step?" Another complained, "The health authorities are slow. Why wait until the epidemic is at its height before taking drastic measures?"<sup>45</sup> The *Journal-Courier's* editorial page provided citizens a forum to criticize the local Department of Health, which greatly expanded its powers throughout of the epidemic.

The New Haven *Register*, too, published information about new public health policies such as vaccination, but used health professionals' statements to assure readers of the safety and efficacy of the Department of Health's policies. A Department of Health notice in the *Register*, for example, promised, "Doctors have every reason to believe that the new vaccine is going to prove effective and that the epidemic has probably passed the high point," but suggested that vaccinations had the potential to save more lives.<sup>46</sup> The *Register* also supported health officers' explanations for the actions they had decided to take in response to disease. When a "prominent bacteriologist" criticized the Department for letting schools and theatres remain open, calling the decision "nothing short of criminal . . . when there is the danger of contaminating thousands of the people of the city," the *Register* quickly published a response from Health Officer Wright supporting the measures the department had implemented. Hoping to maintain public confidence, Wright stated, "Although the epidemic is bad here, New Haven is many percent better off than other towns and cities in the state."<sup>47</sup> The *Register* reinforced the Department of

Health's decisions, publishing health officers' assurances to readers that they had influenza under control.

Rather than repeating the decrees and advice of New Haven's public health officers, *Il Corriere* chose to quote Italian physicians and health officials in the region. Discussing public health measures in nearby Stamford, *Il Corriere* specifically highlighted the nationality of the city's health officer, reminding readers that "Doctor J. J. Costanzo, our countryman, who occupies the important position of sanitary officer of the city, recommends that the population of Stamford be calm and not get alarmed about influenza, because when all citizens observe the sanitary rules and maintain high morale, the battle can be said to be half won."<sup>48</sup> By referencing Stamford's Health Officer Costanzo, rather than the local Health Officer Frank Wright, *Il Corriere* acknowledged the faith many Italians held for health professionals with similar national backgrounds. Yet in encouraging composure and attention to modern practices of hygiene, *Il Corriere's* editors endorsed the same actions as the Department of Health, and, consequently, the virtues of American medical sciences.<sup>49</sup> *Il Corriere* also published a lengthy article by E. A. Scalzilli, an Italian physician from Boston, on the "Nature, Transmission, Diffusion, Prevention, and Symptoms of Influenza." Scalzilli's article offered Italian readers many of the same facts that New Haven's Department of Health had published in English newspapers, and detailed contemporary understanding on disease etiology and prevention.<sup>50</sup>

By providing this public health education in Italian, and, more significantly, from respected Italian physicians, *Il Corriere* offered its readers information that had been readily available to Anglo New Haven residents through English-language public health publications. Simultaneously, *Il Corriere's* middle-class editors reinforced American medical theories and practices. They took steps to encourage a smooth transition from traditional Italian understandings of disease to Anglo health norms and methods, and saw culturally sensitive instruction as a way to modernize the Italian community.

### **Advertising and Notices**

In the Anglo papers, state and local health agencies pushed their agendas through advertising and press statements. The Red Cross advertised that it needed men to work as orderlies and announced "A Patriotic Task for New Haven Women," both trained and untrained, to work as nurses and "to inspire coolness and courage and sacrifice on the part of American women." Other notices requested that citizens volunteer their cars to drive nurses around the city, and urged telephone users, "The number of calls must be reduced during this emergency . . . telephone user can help relieve the situation by making only the most urgent and necessary calls" (see figure 2). The Department of Health also combined visual images and patriotic sentiment to promote sanitary practices. In one such spot, a caption reading "Coughs and Sneezes Spread Diseases—as Dangerous as Poison Gas Shells," con-

## **AN URGENT APPEAL TO ALL TELEPHONE USERS**

The Spanish Influenza has caused a very serious shortage in our operating force. The operators who are still on duty are unable to give proper attention to other than such calls as are essential to war work, sickness or public welfare.

The number of calls ~~must~~ be reduced during this emergency. Each telephone user can help relieve the situation by making only the most urgent and necessary calls.

The full cooperation of all our subscribers is counted upon during this serious situation.

**The Southern New England Telephone Co.**

*Figure 2: Notices such as this one urged community cooperation and patience during the epidemic, citing the importance of personal conservation of utilities and resources in a period of war and sickness. New Haven Register, October 20, 1918.*

nected the need to obey proper hygienic behaviours to helping win the war. Unlike health professionals' press statements, on which journalists could comment, depending on their views of the Department of Health, printed notices in English-language newspapers directly endorsed public health's agenda, and appealed to readers to do their part in helping to reduce the epidemic's scourges.<sup>51</sup>

Commercial interests advertised similarly in both the Anglo and Italian newspapers, and adopted new strategies in response to influenza by capitalizing on public panic. In an issue of *Il Corriere* in which the only article that addressed influenza proclaimed "Spanish influenza, thank heavens, has lost its vigor," one patent medicine advertisement pushed its product by warning, "Those knowledgeable in matters of public health are in agreement in saying that the epidemic is getting worse and that a panic could occur."<sup>52</sup> Likewise, on 5 November, two days after the *Register* declared the "Epidemic Done after Harvest of 5,577 Deaths," three advertisements for influenza appeared on one page alone, promoting the Fair Haven Drug Shop, Dr. True's Elixir, and Father John's Medicine as means to prevention and relief.<sup>53</sup> Advertisers continued to publish spots for influenza-preventing medicines as late as February, warning potential patrons not to "wait for your cold to develop into Spanish influenza or pneumonia."<sup>54</sup> Other ads promoted new uses for old products. Smo-ko Tobaccoless Cigarettes promised that influenza germs would be "smoked out," and LifeBuoy Health Soap promised to antiseptically clean hands, as recommended by health authorities.<sup>55</sup> Even as much of the New Haven weakened under the ravages of the epidemic, the business of killing germs thrived.<sup>56</sup>

Interest in attracting members of the Italian *colonia* and promoting Italian-owned businesses proved important for those buying advertising space in *Il Corriere*. One woman, fearing a loss of



## *An Epidemic without Enmity*

business after her husband's death, assured potential patrons that the family's funeral business remained in good hands:

The widow Signora Maresca, of the Office of the Undertaker on Grand Avenue, makes notice to the Colony that since the death of her beloved husband, none of her numerous patrons has had reason to criticize the undertaker's services, as her son has served with equal promptness, correctness, capacity, and order. And now that her son has had to be absent from the business because he was called to the military, the public can be assured that Signora Maresca will provide prompt and honest service.<sup>57</sup>

Using the spot to emphasize both her family's civic obligations and her own devotion to the family business, Maresca demonstrated her commitment to both the Italian community and the city at large during a profoundly turbulent period.

While commercial advertisements presented similar products in both the Anglo and Italian papers, state and local public health notices in English-language papers were notably absent from *Il Corriere*. In all three of New Haven's English-language newspapers, the Red Cross called for trained and untrained nurses and orderlies to assist in caring for influenza patients.<sup>58</sup> However, such advertisements did not appear in *Il Corriere*, despite the high mortality and infection rate in the Italian community. Such omissions suggest that public health agencies ignored the possibilities and value of hiring culturally sensitive, Italian nurses to help with increased caseloads, valuing only the abilities of Anglo volunteers.

Additionally, whereas New Haven's English papers discussed at great length the vaccination campaign led by C.-E. A. Winslow in New Haven's factories, *Il Corriere* never mentioned the program or the theories behind it, despite the fact that the vaccine campaigns targeted the factories where Italians primarily worked. In a period when anti-vaccination movements had flared in the country, the failure to explain public health policies to Italians through their own press illustrated a lack of cultural sensitivity and a failed commitment to communication by New Haven's public health authorities.<sup>59</sup> Further, Anglo authorities imagined Italians as uninformed consumers, tempted by patent medicines and ignorant of the advances of biomedical science.<sup>60</sup> Neglecting a large segment of New Haven's population, the Department of Health failed to be a true community agency. And while the Italian editors of *Il Corriere* helped to rectify the neglect of the Anglo authorities, their intent on emphasizing Italian pride and U.S. patriotism led them to remain silent on issues that affected the Italian community negatively. As evidenced in the two communities' presses, diverse responses to the epidemic, geography, language, and social practices segregated Italian and Anglo New Haven residents, while diverse class interests among Italians limited middle-class advocacy for Italian health and equality.

### **Silence and Community Relations**

Given the two points of potential conflict—the influence of the Department of Health and the health disparities between

native and immigrant communities—it is easy to imagine an escalation of ethnic tensions in response to the influenza epidemic. Yet silence, rather than accusation, best describes the response of native American New Haveners to Italians during the months that influenza ravaged the city. Absent are the cartoons, editorials, quarantines, and riots against Italians that studies of other acute infectious disease would predict. The specific historical context in which influenza struck New Haven, however, helps to explain this significant lack of enmity. The epidemic's major period of intensity, from September to December of 1918, coincided with the concluding battles of the First World War and the Armistice. The epidemic thus occurred in an atmosphere in which local, state, and federal governments emphasized patriotism and Americanization.<sup>61</sup> Both Anglo and Italian local leaders endorsed unity and cooperation, and New Haven residents seem to have acquiesced, celebrating community rather than turning to revolt against the Department of Health or the Italian community.

Newspaper editorial pages linked influenza response to civic duty, urging community cooperation as vital during a period of such great strife. The *Journal-Courier's* editorialist, mimicking Uncle Sam in challenging readers to consider their civic duty, queried, "What can YOU do to help relieve the epidemic?"<sup>62</sup> The *Register's* editorialists, too, encouraged patience and mutual thrift. Noting a decline in coal production because of influenza among miners, the *Register* condemned those New Haven residents who failed to conserve energy. "Already there are complaints that buildings are under-heated," the editorial commented, "but those who complain still keep the frame of mind they had when hard coal was plentiful and cheap."<sup>63</sup> Urging community cooperation and economic prudence in a time of war and disease, the English-language editorial pages encouraged readers to be patriotic and compliant.

Alongside the articles they published about the epidemic and the war, English-language papers urged readers to accept foreigners into their cities. As a *Journal-Courier* editorial suggested, "If they come here to exploit us, or if they come bearing disease, bodily or mental, they should be turned back. If they come here to become a part of us, to learn our language and respect our laws and customs, they should be welcome."<sup>64</sup> In October 1918, during the height of the epidemic, the New Haven War Bureau echoed the *Journal-Courier's* sentiments and organized a Committee on Americanization. The committee, populated by prominent Anglo citizens, sought to "inspire every person of foreign birth with the desire to be a loyal American."<sup>65</sup> The push for Americanization also incorporated New Haven's Italian community in many of the patriotic drives with which native-born were involved. "Signing a food pledge card or buying Liberty Bonds were activities that cut across class, ethnic, and geographical lines," writes Christopher Sterba in his history of Italians in New Haven. "The common national effort deepened the claims of Italians . . . to their adopted country."<sup>66</sup> In 1918, Anglo New Haven leaders emphasized cooperation



FIG. XII  
THEIR ONLY PLAYGROUND



FIG. XIII  
ONE OF THE CITY DUMPS

**Figure 3: Local public health publications, like C.-E.A. Winslow's *Health Survey of New Haven* (1917), depicted strong links between poverty and poor sanitation in the years preceding the war. These images, however, were noticeably absent in publications produced during the 1918 epidemic. Charles-Edward Amory Winslow, *Health Survey of New Haven* (New Haven: Yale University Press, 1917).**

and unity, ignoring the tensions between the two very different communities.

Middle-class Italian community leaders and organizations actively promoted assimilation and inclusion, and suggested that Italians desired, above all else, to become good citizens. National groups like the Order of the Sons of Italy, well populated by community leaders in the New Haven *colonia*, vigorously advocated *Americanizzazione*, and worked to help Italians gain citizenship and equal rights.<sup>67</sup> Demonstrating Italians' civic duty and patriotism, the *colonia's* spokesmen publicly celebrated the service of their sons at war, promoting both themselves and their home country in New Haven's Anglo newspapers. On 13 October the *Register* published a half-page spread on the eighteen Italian fighters who had recently enlisted, celebrating their commitment to their new country. In the *Journal-Courier*, Pallotti Andretta & Company, an Italian banking firm, published a large spot that advertised its business, but that also celebrated the work of "Italy's brave sons who have risked their lives on many a battlefield," and encouraged Italians and Anglos alike to buy Liberty Loans to support the current drive.<sup>68</sup>

During the war, Italy and the United States were allied and faced a mutual adversary. As immigration historian John Higham has argued, "The struggle with Germany drained many internal antagonisms out of American society, turning them instead onto the common enemy."<sup>69</sup> The influenza epidemic evoked shared anxieties among both Italian and Anglo New Haven residents, who feared that the disease was a product of German biological warfare.<sup>70</sup> In a discussion on influenza in *Il Corriere*, the Italian physician Scalzilli mentioned

rumours that Germans had prepared "an insidious material able to immediately overwhelm its enemies." Although by 24 October health authorities in the *Register* were assuring readers that "Germans Didn't Bring Flu Germs," the publications suggest that common fears of German enemies existed among both Italian and native groups.<sup>71</sup>

The narrative of unity between Italian and Anglo communities that civic leaders propagated during the period, however, masked persistent inequality in their relationships. Paternalist and racialized assumptions about health and disease influenced Anglo response to the epidemic, while improving health played a key role in Americanization activities.<sup>72</sup> C.-E. A. Winslow's 1917 health survey of the city had argued, "Marked discrepancies between the death rates in the poorer and the more prosperous wards show how greatly elementary sanitation is needed in the tenements."<sup>73</sup> The disparate mortality rates from influenza between Anglo and Italian New Haven residents reinforced Anglo resident's racialized assumptions about Italian ways of living, bodies, and hygiene, and influenced the way that they responded to disease (see figure 3).<sup>74</sup> Looking back at the outbreak, visiting nurses noted the associations between Italians and disease, affirming, "It was inevitable that the track of the Influenza should lie along the same congested streets and in the same unsanitary tenements where we have been fighting Tuberculosis and Infant mortality these fourteen years."<sup>75</sup> Italians, according to contemporary medical thinking, were biologically and socially ill-equipped to combat influenza. Although health professionals did not blame them for bringing disease into the city, they nevertheless considered

Italians more likely to become infected and in dire need of American-style lessons in hygiene.

When public health authorities and the community discussed the possibilities of closing schools, many of the arguments for keeping them open rested on assumptions that poor children (of Italians and other immigrant families) would be safer at school than at home. As Superintendent of Schools F. H. Beede remarked, "It was felt,—wisely, I think,—that with well-ventilated buildings, with services of school nurses and physicians available, and with teachers fairly well informed on health conditions, the children were better off busily at work in school than playing on the street or kept at home in crowded tenements."<sup>76</sup> Implicit in Beede's statement was a connection of dirt and contagion to tenement living. Yet keeping students in schools and out of tenements not only kept them well; it aided in the process of Americanization. "The years of the school course," Beede remarked, "form a period in which the leaven is constantly at work and in which all children, day by day, are becoming a part of American life and growing in appreciative loyalty to American standards and ideals. Of all Americanization factors the public school is the greatest."<sup>77</sup> Beede, along with much of New Haven's leadership, thought that Italians were morally and hygienically inferior, and needed to be assimilated in order to meet the city's Anglo standards.

Anglo New Haven residents relied on Americanization and the schools' "civilizing" influence to tackle the health problems of the Italian population in their city, hoping that Anglo teaching might encourage hygiene and environmental reforms, offsetting the ethnic predisposition to influenza. At the same time, Italian community leaders stressed that Italians had made sacrifices to New Haven and to the nation more broadly. In their public emphases on Italian inclusion and assimilation, however, both Anglo and Italian leaders neglected the very real disparities in Italian living conditions. Strategies for assimilation overshadowed demands for tenement reform or for more equitable services from both communities, reducing the potential for hostilities yet sacrificing the potential for real change.

### **Conclusions**

On 31 October the *Journal-Courier* published a sketch of a skeletal woman carrying a dagger, her face covered by a large shawl, on which were written the words "THE FLU." The image's caption, which proclaimed "Another Enemy Retreats," compared the influenza epidemic to the German armies in Europe who would surrender within a fortnight. Although influenza would not concede so quickly, the image suggests the extent to which discussions and images of influenza and wartime culture tangled together in 1918 (see figure 4).<sup>78</sup> "Epidemics," writes Charles Rosenberg, "constitute a transverse section through society, reflecting in that cross-sectional perspective a particular configuration of institutional forms and cultural assumptions."<sup>79</sup> Likewise, New Haven residents' responses to the influenza epidemic provide a means to

ANOTHER ENEMY RETREATS



**Figure 4. Creating a link between the battle against influenza at home and the fight against the Central Powers abroad, cartoons such as this one celebrated the United States' strength and vitality against hostile enemies. *New Haven Journal-Courier*, October 31, 1918.**

understand their broader social and cultural relations in the autumn and winter of 1918. Although no city's history offers a wholly representative account of other urban experiences, New Haven's industrial economy and ethnic variety paralleled the landscape of many other urban centres in North America during the 1910s. Shocked by the devastation of influenza, residents of New Haven and many other cities experimented with many different responses, shared their successes and failures, and learned from the experiences of other urban communities.

Endorsing harmony, assimilation, and civic obligations, Anglo and middle-class Italian leaders helped to offset the potential tensions that the epidemic could have fuelled. Both communities seem to have consented to the expanded but less coercive powers of the Department of Health. Whether due to their fear of influenza, their trust in health officials' assurances, or their commitment to a wartime spirit of patriotic compliance, New Haven residents assented to the department's new policies and programs. In addition, the city's Anglo and Italian leaders urged Anglo residents to sweep aside ethnic prejudice and fears in favour of tolerance and inclusion. These urg-

## An Epidemic without Enmity

ings relied on a new public construction of Italians as modern, responsible, and patriotic American citizens, whose adoption of new civic and hygienic behaviours would offset their risk as vectors of contagion.

The lack of enmity, however, cannot be taken as an indication of seamless ethnic or class harmony, for such community spirit proved illusory. In using the epidemic moment to construct a vision of Italians as respectable citizens, middle-class Italian leaders ignored persistent inequalities in Italian health and thus sacrificed social justice demands in favour of crafting a narrative of Italian worth. The majority of Italians remained estranged from the city at large, and died at double the rate of their Anglo counterparts. Racialized assumptions about Italian health and heredity drove Anglo New Haven leaders to endorse hygienic reforms and Americanization as ways to offset higher mortality in the Italian population; Italian leaders echoed these demands to demonstrate their commitment to American methods and practices. Further, public health officials neglected to extend the same information to Italian and Anglo residents, and thus ignored the needs of a large part of New Haven's community. In endorsing integration over multiculturalism, both Anglo and Italian community leaders ignored very real cultural differences between the communities, and failed to make the city's health system responsive to all of New Haven's residents. Although influenza did not generate open hostilities in New Haven, the epidemic did little to patch the great rifts that kept the city divided.

### Acknowledgments

I am grateful to Naomi Rogers for her encouragement, her engagement with this paper, and her willingness to read and comment on multiple drafts. I am also indebted to Frank Snowden, Matthew Jacobson, John Harley Warner, and Glenda Gilmore, all of whom helped me to conceptualize more fully the links between disease, immigration, and the First World War era. I also wish to thank Stephen Prince and the two anonymous reviewers from the *Urban History Review* for their comments and suggestions, which helped me to clarify and expand my arguments. Finally, the financial support of the Yale University Graduate School and the Program in the History of Medicine and Science made the research and writing of this paper possible.

### Notes

1. I use *Anglo* throughout this paper to refer to New Haven residents born in the United States or who identified themselves primarily as part of the locally born population. Admittedly much of this identification was based on self-perception and self-definition against immigrant Others.
2. As the chair of Yale's School of Public Health, Charles-Edward Amory Winslow noted in his retrospective study of the epidemic that death counts were "lower than would be expected among persons of native, Irish, English and German stock, higher than would be expected among Russian, Austrian, Canadian, and Polish stock, and enormously high among Italians." Charles-Edward Amory Winslow and J. F. Rogers, "Statistics of the 1918 Epidemic of Influenza in Connecticut," *Journal of Infectious Diseases* 26, no. 3 (1920): 14. The existing records do not have any further breakdown of mortality or morbidity by ethnicity; indeed, the *perception* of Italian mortality and susceptibility to influenza seem to influence the impressions of public health leaders in Italy and nationally. Contemporary theories of innate racial difference supported the medical claim that Italians were inherently more susceptible to diseases such as influenza and pneumonia. See, for example, Michael M. Davis, *Immigrant Health and the Community* (New York: Harper, 1921); Robert F. Foerster, *The Italian Immigration of Our Times* (Cambridge: Harvard University Press, 1919).
3. Throughout the nineteenth and into the twentieth century, Anglo Americans often blamed impoverished and unassimilated immigrant groups for facilitating the spread of epidemic disease. At the same time, expanding powers of local and national public health professionals also generated public discontent. See Amy Fairchild, *Science at the Borders: Immigrant Medical Inspection and the Defense of the Nation* (Baltimore: Johns Hopkins University Press, 2003); Alan M. Kraut, *Silent Travelers: Germs, Genes, and the Immigrant Menace* (New York: Basic Books, 1994); Judith Walzer Leavitt, *Typhoid Mary: Captive to the Public's Health* (Boston: Beacon, 1996); Howard Markel, *Quarantine! East European Jewish Immigrants and the New York City Epidemics of 1892* (Baltimore: Johns Hopkins University Press, 1997); Nayan Shah, *Contagious Divides: Epidemics and Race in San Francisco's Chinatown* (Berkeley: University of California Press, 2001).
4. Alfred W. Crosby's *Epidemic and Peace* (re-released in 2003 as *America's Forgotten Pandemic*) endures as a comprehensive look at social and public health responses to the influenza epidemic in the United States. Alfred W. Crosby, *Epidemic and Peace* (Cambridge: Cambridge University Press, 2003). In the past half-decade, books on influenza have succeeded in the popular market as well, evincing growing interest in the pandemic. See John M. Barry, *The Great Influenza: The Epic Story of the Deadliest Plague in History* (New York: Viking, 2004); 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). The recent resurgence of writing on the pandemic, however, contributes to a much longer historiographical discussion of influenza. See Howard Phillips, "The Re-Appearing Shadow of 1918: Trends in the Historiography of the 1918–19 Influenza Pandemic," *Canadian Bulletin of the History of Medicine* 21, no. 1 (2004): 121–134.
5. Howard Phillips and David Killingray's edited volume on the global pandemic has significantly broadened the scholarly understanding of the disease and its social impact across continents. See Howard Phillips and David Killingray, eds., *The Spanish Influenza Pandemic of 1918–19: New Perspectives* (London: Routledge, 2003). Elyll Jones has explored the epidemic's diverse meanings to residents of Winnipeg. Her work analyzes class, ethnic, and gender tensions that arose in response to the influenza, and suggests that public health responses to influenza (in contrast to other epidemic diseases) helped forge new notions of immigrant assimilation. See Elyll Jones, "Searching for the Springs of Health: Women and Working Families in Winnipeg's 1918–1919 Influenza Epidemic" (PhD diss., University of Manitoba, 2003).
6. For information on the Italian community, see Christopher M. Sterba, *Good Americans: Italian and Jewish Immigrants during the First World War* (Oxford: Oxford University Press, 2003). Small pockets of other "new" immigrant groups, especially Russians and Poles, composed much of the rest of the industrial working class. By 1918, Irish- and German-Americans were quite integrated into the city's social and political networks.
7. For more on Winslow, see Reginald M. Atwater, *C.-E. A. Winslow: An Appreciation of a Great Statesman* (New York: American Public Health Association, 1957); Arthur Visellear, "C.-E. A. Winslow: His Era and His Contribution to Medical Care," in *Healing and History: Essays for George Rosen*, ed. Charles Rosenberg (New York: Science History Publications, 1979), 205–228; Arthur J. Visellear, "C.-E. A. Winslow and the Early Years of Public Health at Yale, 1915–1925," *Yale Journal of Biology and Medicine* 55 (1982): 137–151.
8. For a similar look at the move away from quarantine and forced hospitalization during the 1918 epidemic, see Elyll W. Jones, "Co-operation in All Human Endeavour: Quarantine and Immigrant Disease Vectors in the 1918–1919 Influenza Pandemic in Winnipeg," *Canadian Bulletin of Medical History* 22 (2005): 57–82.
9. For patriotic atmosphere, see David Kennedy, *Over Here: The First World War and American Society* (New York: Oxford University Press, 1980).

## *An Epidemic without Enmity*

10. Jones, "Searching for the Springs of Health," 277.
11. Charles-Edward Amory Winslow, *Health Survey of New Haven* (New Haven: Yale University Press, 1917).
12. For hostility in other cities, see Crosby, *Epidemic and Peace*; Richard H. Peterson, "The Spanish Influenza Epidemic in San Diego, 1918–1919," *Southern California Quarterly* 71 (1989): 89–106. Useful here is Linda Singer's concept of "epidemic logic." She suggests that the "crisis of contagion" prompts citizens to justify regulation and power of public health that, under normal circumstances, they would reject as an abuse of authority. See Linda Singer, *Erotic Welfare: Sexual Theory and Politics in the Age of Epidemic* (New York: Routledge, 1993).
13. *Annual Report of the Department of Public Health of the City of New Haven, Connecticut, for the Year Ending December 31, 1918*; *Annual Report of the Department of Public Health of the City of New Haven, Connecticut, for the Year Ending December 31, 1919*.
14. *Annual Report of the Department of Public Health, 1918*.
15. J. G. Henry, "Late Observations," *Monthly Bulletin of the Department of Health of New Haven, Connecticut* 45, no. 10 (October 1918): 8.
16. For legislation against infectious diseases, see John Duffy, *The Sanatarians: A History of American Public Health* (Urbana: University of Illinois Press, 1990).
17. Carl Irving Cohen, "The Development of Public Health in New Haven, 1638–1938" (MPH thesis, Yale University, 1939), 295–296.
18. "Influenza Epidemic of 1918–1919," Report of the State Department of Health, for the Months July 1918–June 1920, 299.
19. "Drastic Order by the Board of Health," *New Haven Journal-Courier*, 15 October 1918. For hygienic legislation, see Georgina Feldberg, *Disease and Class: Tuberculosis and the Shaping of Modern North American Society* (New Brunswick, NJ: Rutgers University Press, 1995); Nancy Tomes, *The Gospel of Germs: Men, Women, and the Microbe in American Life* (Cambridge: Harvard University Press, 1998).
20. On making influenza reportable, see Cohen, "The Development of Public Health," 295. The U.S. Public Health Service estimated that only about 40 per cent of cases in New England were reported to the state, making the published morbidity and mortality rates quite conservative. Henry, "Late Observations," 2.
21. N. G. Osborn, letter to Frank W. Wright, *Monthly Bulletin of the Department of Health* 45, no. 11 (November 1918): 2.
22. J. G. Henry, "Health Education," *Monthly Bulletin of the Department of Health* 45, no. 12 (December 1918): 2.
23. *Monthly Bulletin of the Department of Health* 46, no. 1 (January 1919): 8.
24. For rhetoric of civic obligation, see Kennedy, *Over Here*.
25. "Influenza Epidemic of 1918–1919," 297.
26. J. Alison Hunter, "Superintendent's Report," *Grace Hospital Annual Report, 1918*, 13. For more on the hospitals, see Gerald N. Burrow, *History of Yale's School of Medicine: Passing Torches to Others* (New Haven: Yale University Press, 2002).
27. *Grace Hospital Annual Report, 1918*; *New Haven Hospital Annual Report, for the Year Ending September 30, 1919*; *11th Annual Report of the Hospital of St. Raphael, December 31, 1918*.
28. "Influenza Epidemic of 1918–1919," 303.
29. C.-E. A. Winslow, "Governor's Commission on Epidemic Influenza, Memorandum," folder 1204 (1918), box 79, series III, C.-E. A. Winslow Papers, Manuscripts and Archives, Yale University, New Haven, CT. For other responses nationwide, see Crosby, *Epidemic and Peace*.
30. See especially Peterson, "The Spanish Influenza Epidemic in San Diego."
31. "To Vaccinate Soon against Influenza," *New Haven Union*, 16 October 1918; "Vaccination against Flu Begun Here," *Register*, 17 October 1918; "Vaccinate a Thousand a Day for Flu," *Register*, 21 October 1918.
32. "Report of the Health Officer," *Annual Report of the Department of Public Health of the City of New Haven, Connecticut, for the Year Ending December 31, 1918*.
33. For desire to test carriers, see Winslow, *Health Survey of New Haven*.
34. For the Italian community in New Haven before 1920, see Robert A. Dahl, *Who Governs? Democracy and Power in an American City* (New Haven: Yale University Press, 1961); Michael Johnston, "Italian New Haven: Building an Ethnic Society," *Journal of the New Haven Colonial Historical Society* 26, no. 3 (1979): 23–35; Morty Miller, "New Haven: The Italian Community" (senior essay, Yale University, 1969); Sterba, *Good Americans*.
35. Dahl, *Who Governs?* 33.
36. "Prevent Spread of Disease at Yale," *Union*, 2 November 1918.
37. *Annual Report of the President of Yale University, 1918*.
38. Despite the epidemic's virulence, New Haven's libraries and archives contain few personal mementos or writings on influenza; available manuscripts demonstrate a far greater concern with the European war. Although newspapers, like any other source, cannot give a full account of individual experiences with disease, they provide a window to view community responses to disease and to compare community cultures. Further, they capture the public image of communities and institutions that editors sought to construct for their readers. For the Italian community, especially, existing accounts are almost nonexistent. But Italian newspapers, Pietro Russo remarks, "played remarkable political and cultural roles of social and economic promotion, of conservation of traditions, of the strengthening of ties with Italy, and of the integration of immigrants into American society." Pietro Russo, "The Italian American Periodical Press, 1836–1940," in *Italian Americans: New Perspectives in Italian Immigration and Ethnicity*, ed. Lydio F. Tomasi (New York: Center for Migration Studies, 1985), 250.
39. "Influenza Hits Highest Point Here," *Register*, 4 October 1918; "Death Rate Is Double That of Last Year," 11 October 1918; "About 100 New Cases in City Epidemic Wave," *Union*, 3 October 1918.
40. "Cronaca delle Colonie," *Il Corriere del Connecticut*, 4 January 1919.
41. For mutual aid societies' importance in New Haven, see Johnston, "Italian New Haven," 29–31.
42. "Luctuosa," *Il Corriere*, 19 October 1918.
43. "Luctuosa: Antonetta Costantino," *Il Corriere*, 19 October 1918; "Luctuosa: La Morte di un Eroico Bersagliere," *Il Corriere*, 2 November 1918; "Luctuosa: Emanuele Lo Presti," *Il Corriere*, 4 January 1919.
44. "Drastic Order by Board of Health," *Journal-Courier*, 15 October 1918.
45. "An Epidemic Precaution," *Journal-Courier*, 16 October 1918; "More Prevention Demanded," *Journal-Courier*, 18 October 1918.
46. "Vaccinate a Thousand a Day for Flu," *Register*, 21 October 1918.
47. "Physicians Differ as to the Epidemic," *Register*, 12 October 1918; "Influenza," *Register*, 16 October 1918.
48. "Nessun Allarme Per l'Influenza, Dice Il Dott. Costanzo," *Il Corriere*, 19 October 1918.
49. On Italian health customs, see Kraut, *Silent Travelers*, chapter 5.
50. "L'Influenza 'Spanish Grippe': Natura, Trasmissione, Diffusione, Prevenzione, e Sintomi della Malattia," *Il Corriere*, 5 October 1918.
51. "Men of New Haven: Attention," *Register*, 27 October 1918; "Patriotic Task for New Haven Women," *Union*, 20 October 1918; "A Stern Task for Stern Women," *Journal-Courier*, 23 October 1918; "An Urgent Appeal to All Telephone Users," *Journal-Courier*, 21 October 1918.
52. "Contagio della Paura," *Il Corriere*, 23 November 1918.

## *An Epidemic without Enmity*

53. "Epidemic Done after Harvest of 5,577 Deaths," *Register*, 3 November 1918; advertisements, *Register*, 5 November 1918.
54. "Momento Opportuno," *Il Corriere*, 8 February 1919.
55. Advertisements, *Register*, 7 November 1918; *Journal-Courier*, 2 and 7 November 1918.
56. On the business of germs, see Tomes, *The Gospel of Germs*.
57. "Avviso al Pubblico," *Il Corriere*, 19 October 1918.
58. For Red Cross notices, see *Register*, 27 October 1918; *Union*, 20 October 1918; *Journal-Courier*, 22 October 1918.
59. For anti-vaccination campaigns, see Robert D. Johnston, *The Radical Middle Class: Populist Democracy and the Question of Capitalism in Progressive Era Portland, Oregon* (Princeton: Princeton University Press, 2003), chapter 12.
60. Some Anglo Americans criticized the articles in the Italian papers, considering them nothing more than patriotic publications, void of any substantial content. Contemporary commentators on the immigrant press acknowledged its importance to immigrant communities, but denigrated the actual content of the papers. As Robert Park suggested, "The ordinary immigrant newspaper is like a general store in a rural community. It offers to its public a multitude of things; but nothing distinctive, exotic, or stimulating." Such hostilities continued to pervade native American thought for decades to come; as late as 1938, one Anglo writer suggested that immigrant newspapers focused only on information related to the ethnic group they represented, and ignored "real" stories told by the American press. He wrote, "News of various local group activities occupy most of the space. Another feature common to all are news d[i]spatches from the native land, as well as from colonies on other parts of America, and editorials concerning local and national problems of the group. Little or no space is devoted to news of a general character." See Robert E. Park, *The Immigrant Press and Its Control* (New York: Harper, 1922), 113; Samuel Koenig, *Immigrant Settlements in Connecticut: Their Growth and Characteristics* (WPA Federal Writers' Project for the State of Connecticut, 1938), 56.
61. Despite national fears of increased immigration and related immorality, historian Christopher Sterba argues that New Haven represented a relatively stable spot by the end of the First World War. "In such a heavily working-class population, it might seem surprising that a strong proletarian voice did not echo through the *colonia*," he writes; yet, "there is little evidence of a radical presence in the three enclaves." Sterba, *Good Americans*, 17. On Americanization, see also Kennedy, *Over Here*.
62. "Can You Help?" *Journal-Courier*, 22 October 1918.
63. "Influenza among the Anthracite Miners," *Register*, 23 October 1918.
64. "The Language of America," *Journal-Courier*, 15 October 1918.
65. Director of New Haven War Bureau John C. Tracy to Henry W. Farnham, folder 1104 (24 October 1918), box 113, series II, Farnham Family Papers, Manuscripts and Archives, Yale University Library, New Haven, CT.
66. Sterba, *Good Americans*, 131.
67. For literature from the Sons of Italy during the period, see Baldo Aquilano, *L'ordine Figli D'Italia in America* (New York: Società Tipografica Italiana, 1925); Antonio Mangano, *Sons of Italy: A Social and Religious Study of the Italians in America* (New York: Missionary Education Movement of the United States of America, 1917).
68. "San Carlino Club Gives 18 Fighters," *Register*, 13 October 1918; "A Representation of the Italian Army Is in the United States," *Journal-Courier*, 4 October 1918.
69. John Higham, *Strangers in the Land: Patterns of American Nativism* (New Brunswick: Rutgers University Press, 1955), 215–216.
70. Such fears were not unwarranted; by the end of the war, Germany had defied international treaties by using chlorine and mustard gas warfare, making biological warfare a grave possibility. Robert Harris and Jeremy Paxman, *A Higher Form of Killing: The Secret History of Chemical and Biological Warfare* (London: Chatto and Windus, 1982), introduction, chapters 1 and 2.
71. "L'Influenza 'Spanish Grippe': Natura, Trasmissione, Diffusione, Prevenzione, e Sintoi della Malattia," *Il Corriere*, 5 October 1918; "Germans Didn't Bring Flu Germs," *Register*, 24 October 1918.
72. A guide for Italian immigrants published by the Connecticut chapter of the Daughters of the American Revolution, for example, sought to educate potential citizens about the rights and powers of boards of health and the dangers of quack doctors, among other health issues. See John Foster Carr, *Guida Degli Stati Uniti Per L'immigrante Italiano* (New York: Doubleday, Page, and the Connecticut Daughters of the American Revolution, 1910).
73. Winslow, *Health Survey of New Haven*, 4–5.
74. For Winslow's ethnocentric assumptions about differential racial susceptibility to influenza, see Ralph D. and Hudson Birden Arcari, "The 1918 Influenza Epidemic in Connecticut," *Connecticut History* 38, no. 1 (1999): 39.
75. *Fourteenth Annual Report of the New Haven Visiting Nurse Association*, 1918, 9.
76. Report of the Superintendent of Schools, *Annual Report of the Board of Education of the City of New Haven for the Year 1918*, 314.
77. *Ibid.*, 302.
78. *Journal-Courier*, 31 October 1918.
79. Charles Rosenberg, "What Is an Epidemic? AIDS in Historical Perspective," in *Explaining Epidemics and Other Studies in the History of Medicine*, ed. Charles Rosenberg (Cambridge: Cambridge University Press, 1992), 279.