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Regulating the 1918–19 Pandemic: Flu, Stoicism and the Northcliffe Press

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Abstract: Social historians have argued that the reason the 1918–19 ‘Spanish’ influenza left so few traces in public memory is that it was ‘overshadowed’ by the First World War, hence its historiographical characterisation as the ‘forgotten’ pandemic. This paper argues that such an approach tends to overlook the crucial role played by wartime propaganda. Instead, I put emotion words, emotives and metaphors at the heart of my analysis in an attempt to understand the interplay between propaganda and biopolitical discourses that aimed to regulate civilian responses to the pandemic. Drawing on the letters of Wilfred Owen, the diaries of the cultural historian Caroline Playne and the reporting in the Northcliffe press, I argue that the stoicism exhibited by Owen and amplified in the columns of The Times and the Daily Mail is best viewed as a performance, an emotional style that reflected the politicisation of ‘dread’ in war as an emotion with the potential to undermine civilian morale. This was especially the case during the final year of the conflict when war-weariness set in, leading to the stricter policing of negative emotions. As a protean disease that could present as alternately benign and plague-like, the Spanish flu both drew on these discourses and subverted them, disrupting medical efforts to use the dread of foreign pathogens as an instrument of biopower. The result was that, as dread increasingly became attached to influenza, it destabilised medical attempts to regulate the civilian response to the pandemic, undermining Owen’s and the Northcliffe press’s emotives of stoicism.

Keywords: Spanish Influenza, Emotions, Metaphor, Biopower, Neurasthenia

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On 24 June 1918 the war poet Wilfred Owen crawled into an army-issue bell tent in a windy field near Scarborough and began composing a letter to his mother, Susan. Then a 20-year-old lieutenant in the Second Manchesters, Owen had just been deemed fit for duty after a lengthy convalescence in Scotland following an attack of neurasthenia, a nervous condition brought on by the stresses and strain of trench warfare, but as Owen waited in north Yorkshire for the orders that would return him to northern France his thoughts were seemingly on another disease entirely.

‘STAND BACK FROM THE PAGE! and disinfect yourself’, he begins his letter to Susan Owen.

Quite 1/3 of the Batt and about 30 officers are smitten with the Spanish Flu. The hospital overflowed on Friday, then the Gymnasium was filled, and now all the place seems carpeted with huddled blanketed forms. . . . The boys are dropping on parade like flies in number.¹

At first glance, Owen’s bold capitals and self-conscious underlinings read like genuine alarm, but as the next passage makes clear Owen is being ironic and, far from taking the disinfectant measures seriously, considers the flu something of a joke.

The thing is much too common for me to take part in. I have quite decided not to! Scottie [a regimental friend], whom I still see sometimes, went under today, & my servant yesterday. Imagine the work that falls on unaffected officers.²

Owen’s wry remarks, though clearly calculated to amuse, were typical of British attitudes to the ‘Spanish flu’ that summer.³ Although in May the sudden emergence of flu in Madrid had made the front page of the Daily Express, by June it was regarded as little more than a footnote to war and had been relegated to the inside pages.⁴ As The Times’s medical correspondent put it:

The man in the street, having been taught by that plagosus orbilius, war, to take a keener interest in foreign affairs, discussed the news of the epidemic which spread with such surprising rapidity through Spain a few weeks ago, and cheerfully anticipated its arrival here.⁵

While these casual attitudes to the Spanish flu were understandable during the initial, mild summer wave of the pandemic, by the autumn of 1918 the flu had mutated into a far deadlier infection. Indeed, in Britain, it is estimated that sixty-four per cent of the estimated 228,000 deaths from the pandemic occurred in the last three months of 1918.⁶ Yet for all the destruction wrought by the Spanish flu, stoicism seems to have been the characteristic response even during the later waves of the pandemic. ‘Never since the Black Death has such a plague swept over the face of the world’, commented The Times in December 1918, ‘[and] never, perhaps, has a plague been more stoically accepted’.⁷

This supposed stoicism puzzled commentators at the time and has continued to puzzle historians since. Reflecting on his experience of the Spanish flu in 1935, Major

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² Ibid.
³ The flu’s nomenclature was due to the fact that Spain was a neutral country in WWI and foreign correspondents based in Madrid were not subject to the censorship rules that applied in other parts of Europe, meaning they could freely report the depredations of the epidemic. Niall Johnson, Britain and the 1918–19 Influenza Pandemic: A Dark Epilogue (London, New York: Routledge, 2006), 37.
⁴ Daily Express, 23 May 1918, 1; Daily Express, 29 May 1918, 1.
⁵ The Times, 25 June 1918, 9.
⁶ Johnson, op. cit. (note 3), 45–6, 73.
⁷ The Times, 18 December 1918, 5.
Greenwood, then Professor of Epidemiology and Medical Statistics at the London School of Hygiene, observed ‘there is some psychological interest in the fact...that actually the emotional impression created [by the pandemic] was fainter than that produced by much less grave epidemiological happenings’. 8 The American historian Alfred Crosby was similarly baffled by the paucity of references in contemporary American literature, dubbing the Spanish flu ‘America’s forgotten pandemic’. 9 More recently, the British medical historian and historical geographer Niall Johnson has characterised the flu as variously an ‘unregarded’ and ‘overshadowed’ killer in 1918, and a ‘bit player in...the larger story of the Great War’. 10 However, Johnson does not explore this insight further, regarding the war as merely one of the factors that caused the pandemic to be ‘overshadowed’ in 1918. 11

In this paper I want to move beyond this notion of overshadowing by examining the ways in which popular responses to the Spanish flu did, and did not, draw on the narratives of war and then emotional and biopolitical discourses – discourses that, I will argue, were governed both by the wartime propaganda effort and by medical attempts to police the civilian response to influenza. In particular I want to probe Owen’s expressions of disdain by asking how his stoicism was produced, what wider social and political purposes it may have served, and what emotions it may have masked. At the same time, I wish to examine the role of government, voluntarist organisations, and the mass media in the production not only of stoicism during WWI but the regulation of emotions such as dread and hatred. In so doing, I do not claim to be able to access Owen’s or other people’s past emotional experiences and ‘know’ their subjective content. Rather, my method seeks to relate emotional expressions and displays to then cultural and political discourses in an attempt to understand the meanings and functions they had for individuals at the time – an approach that has been termed ‘emotionological’. 12 Finally, I wish to suggest that these emotional scripts may have had an important influence on people’s subjective experiences of influenza, a disease whose protean symptomatology and metaphorical fecundity at once masked the Spanish flu’s ‘social’ impacts and gave the flu wide cultural currency.

Whereas in peacetime dread had posed little threat to the social order, I will argue that in 1914–18 it became an important instrument of social and political control. 13 In an effort

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11 Other factors cited by Johnson include the ‘mild’ nature of the initial wave of infections in the summer of 1918 and the fact that, in contrast to Spain where foreign correspondents were free to write about the flu’s depredations, the British phase of the epidemic went largely unreported by domestic newspaper correspondents. He also argues that, while the second wave of the pandemic was associated with high levels of mortality and would have ‘terrified’ Britons, ‘the lesser magnitude of the third wave...undermined the committing of the pandemic to memory’. Johnson, *op. cit.* (note 3), 165.
13 Joanna Bourke argues that the authorities made a similar effort to manage fear responses in World War II, virtually dissolving the distinction between the home and military fronts. Joanna Bourke, ‘Disciplining the
to unite Britons against a common enemy and stifle domestic dissent, the government, with the voluntary cooperation of newspaper proprietors and editors, deliberately fostered dread and hatred of Germany. At the same time, British propaganda efforts aimed to build unity on the home front by fostering civilian resilience and ‘staying power’, making the cultivation of stoicism a social and political imperative. However, these discourses did not operate in isolation but drew on and sometimes clashed with one another. For instance, at the same time as British propaganda sought to promote hatred of Germany, it also risked undermining civilian morale by provoking excessive fear of the enemy and its capacity to launch attacks on the civilian population.\(^\text{14}\) In this respect, propaganda discourses were both a means of producing disciplinary power and also operated as what Foucault calls ‘stumbling blocks’ and ‘points of resistance’ to the operation of biopower.\(^\text{15}\)

Medical discourses that sought to employ dread as a self-regulating technology were similarly oppositional.\(^\text{16}\) To the extent that doctors were keen to persuade patients to take the ‘dangers’ of influenza seriously and adjust their behaviour accordingly by, for instance, convalescing at home when sick, the risk of spreading infection and the dread of the respiratory complications of flu was a key instrument of biopower. However, to the extent that the dread of flu was potentially pathological and could tip into hysteria, the amplification of such biopolitical discourses carried considerable risks, frequently clashing with propaganda discourses that urged civilian disdain of foreign threats.

Although there has been much scholarship in recent years on the media’s role in communicating biopolitical discourses and the metaphorical framing of modern disease epidemics generally, this scholarship has not usually extended to the relationship between emotions and biopolitical discourse.\(^\text{17}\) This is odd when one considers the role that metaphor plays in cognitive affective processes. According to Lakoff and Johnson, metaphors are not merely rhetorical flourishes but actually ‘create’ or constitute social, cultural and psychological realities for us by inviting us to act upon the world in particular ways. ‘The heart of metaphor’, they argue, ‘is inference… [and] because we reason in terms of metaphor, the metaphors we use determine a great deal about how we live our emotions: fear, psychiatry and the second world war’, in Roger Cooter, Mark Harrison and Steve Sturdy (eds), *War, Medicine and Modernity* (Stroud: Sutton Publishing, 1998), 225–38.

\(^\text{14}\) A good example was the panic engendered by the Zeppelin raids on south and east coasts of England in 1915. Cate Haste, *Keep the Home Fires Burning, Propaganda in the First World War* (London: Allen Lane, 1977), 95–6.


lives’. One way metaphors achieve this is by orienting our emotional responses to people, events and objects within our field of experience. As Bono puts it: ‘The work of metaphor is not so much to represent features of the world, as to invite us to act upon the world as if it were configured in a specific way like that of some already known entity or process’ (italics in original). In other words, metaphors are not just representational, but performative.

However, while metaphors help shape and direct our cognitive emotional responses, to the extent that emotions are embodied, they also stand outside of language and discourse. As Reddy has argued, departing from strong constructionist models, performing anger, fear or shame is not the same as being angry, fearful or ashamed. This is because emotional utterances, or what he terms ‘emotives’, are never merely descriptive or performative but build, hide and intensify emotions by altering what they refer to. It is this ‘inner’ dimension of emotion that, Reddy argues, ‘sets a limit on discursive construction’. Furthermore, while at the level of discourse metaphors may serve as messengers of meaning between different disciplines and cultural domains, once they become embodied they become hybridised and subject to what Bono calls ‘complex feedback loops’.

It is this dual aspect of metaphor as both representational and performative and its complex relationship to emotion and cognition that underpins my analysis of the Spanish flu pandemic. In particular, I will argue that Edwardian medical constructions of influenza lent themselves readily to somatic metaphors of nervous ‘weakness’ because of the way flu was framed as a fatiguing disease that depleted nervous energy. These metaphors were also central to biopolitical and propaganda discourses that sought to regulate emotional responses to exogenous threats to the body, whether those threats took the form of German Zeppelins or microscopic pathogens of unknown foreign provenance. However, far from these discourses being seamless and consistent, I will show that they contained discontinuities and sites of divergence.

‘The King of Lies’

In order to appreciate the interaction between military and medical discourses in WWI it is necessary to understand the critical role played by the media, and the Northcliffe press in particular, in the dissemination of wartime propaganda. Unlike in other countries, the British government had little need to direct propaganda on the home front. Instead, the government relied on sympathetic newspaper proprietors and editors to stifle domestic dissent and foster hatred of Germany, hence Lloyd George’s admission in December

21 Ibid., 332.
22 Bono, op. cit. (note 19), 222.
23 The Oxford English Dictionary defines propaganda as ‘the systematic dissemination of information, especially in a biased or misleading way, in order to promote a political cause or point of view’. However, in this article I also use propaganda in the broader sense of ‘mass suggestion or influence through the manipulation of symbols and the psychology of the individual’. Anthony R. Pratkanis and Elliot Aronson, *Age of Propaganda: The Everyday Use and Abuse of Persuasion* (New York: W.H. Freeman, 2001), 11.
1917 to C.P. Scott, the editor of the Manchester Guardian, that if people really knew the truth about the war it would be stopped tomorrow. Although the actual impact of propaganda is notoriously difficult to measure, Lloyd George’s admission reflected the widely held political belief that the British press had immense power to influence public opinion in 1914–18. Today, cultural and media historians are rather more circumspect about attributing such influence to the press. However, if a measure of the effectiveness of the press is whether it enabled the support for the war to remain firm, then it was broadly successful. Arguably, another measure of the popularity of press propaganda was the huge circulation increase enjoyed by mass-market newspapers and weekly journals, such as the ultra-patriotic John Bull, which was selling 2 million copies by war’s end. Although all newspapers were complicit to a greater or lesser degree in the propaganda process, the foremost press propagandist was Lord Northcliffe, the owner of the Daily Mail, Evening News and The Times.

Regarded as a promotional ‘genius’, Northcliffe had grasped early on in his career that the manipulation of the emotions of the ‘common man’, as he put it, held the key to the circulation growth of his newspapers. Indeed, in 1909, Northcliffe – then plain Alfred Harmsworth – had commissioned a series of inflammatory articles in the Daily Mail imagining a German invasion of England. While the articles had the desired effect of boosting circulation, they also earned Harmsworth a reputation as an unscrupulous war-monger – one who, it was soon claimed, had done as much as any man alive, save for the Kaiser, to bring about the European conflict. It was a reputation that Harmsworth was happy to embrace and with the outbreak of hostilities he quickly styled the Daily Mail ‘the soldiers’ paper’, using its columns to condemn pacifist sentiments and promote anti-German hatred through images of Germans as ‘Evil Hun’. Beaverbrook’s Daily Express was similarly vociferous in its anti-German war-mongering and condemnation of dissenters. The result was that, by 1918, the Daily Express’s circulation had nearly doubled to 595,000 while the Daily Mail was selling nearly a million copies.

These attempts to foster hatred of Germany and stifle domestic dissent were reinforced by government-sponsored recruitment campaigns, posters and other forms of propaganda produced by voluntarist organisations, as well as by the activities of ultra-patriotic organisations such as the British Empire Union. However, with its mass circulations

26 For further discussion see Christopher Hampton, Visions of the Press in Britain, 1850–1950 (Urbana: University of Illinois Press, 2004), 130–72.
28 Haste, op. cit. (note 14), 18.
and ability to appeal directly to readers’ emotions, the power of Northcliffe’s papers was unrivalled. Amongst its more notorious campaigns was the false claim, promulgated in 1917 in both The Times and the Daily Mail, that the Germans were sending the corpses of their war dead back to Germany to be rendered into fat at a factory near Coblenz. Little wonder then that when in February 1918 Northcliffe accepted Lloyd George’s offer to become director of overseas propaganda, the Germans christened his headquarters at Crewe House the ‘Prime Gas Factory’ and Northcliffe the ‘King of Lies’.

Fear, Hatred, and the ‘Crowd Mind’

Among the more astute observers of the press’s influence over the home front was Caroline Playne. The daughter of a Gloucestershire cloth manufacturer and a Dutch mother, Playne was a committed pacifist who had first become alert to the dangers of a European war in 1904 when she joined Britain’s National Peace Council. In 1908 she had attended the International Peace Congress in London where she was introduced to Bertha von Suttner, the Austrian novelist and radical pacifist. Six years later, when war broke out, Playne joined the Emergency Committee for the Relief of Distressed Enemy Aliens (Germans trapped in Britain); E.D. Morel’s Union for the Democratic Control of Foreign Policy; and worked for the Nailsworth Peace Association and the National Peace Council. At the same time, she began collecting suppressed pacifist pamphlets and keeping press cuttings and a diary, recording the government’s propaganda efforts and her impressions of the darkening civilian mood. Following the war, Playne set about organising this material in an effort to understand what she saw as the ‘collective madness’ that had overtaken Britain and Europe in the years leading up to and during the Great War. The result was three pioneering works of cultural history and social psychology analysing the pre-war mentality and what she saw as the media’s role in manipulating popular opinion.

Drawing on Gustave Le Bon’s notion of the contagious power of crowds and Wilfred Trotter’s notion of the herd instinct, Playne argued that in 1914 individuals had been swept along on a tide of ‘fear, dread and bellicose passion’. These ‘mental contagions’, she argued, had overridden rational thought, resulting in a ‘paralysing fear’ and collective ‘anaesthesia’ which made it...
almost impossible for individuals to think for themselves or resist the majority opinion.\(^39\) As Playne saw it, the media – and the Northcliffe press, in particular – was key to this process, both pandering to and helping to excite ‘the hatreds and fears . . . of the crowd mind’. It was the media, she believed, that had ‘kept the consuming conflagration of war alight’, making it impossible for people to question the horrendous loss of life or entertain the possibility of a negotiated peace. She also observed that the war left little room for other narratives as it ‘drowned out or made irrelevant other topics of news. . . [taking] away the appetite for everything but war’.\(^40\)

In Playne’s view, the promulgation of hatred of Germany through emotive language and symbols and the cultivation of stoical attitudes were key factors in this process, both reinforcing civilian resilience in the face of the German threat and helping to stifle domestic dissent. However, as I will show, this hatred and fear could also become attached to other narrative objects, contaminating and destabilising the propaganda efforts. This was nowhere more true than in the case of the Spanish flu.

**The ‘Very Proteus of Diseases’**

Influenza has long defied medical categorisation. Writing in 1891, for instance, the Victorian throat expert Morell MacKenzie called it ‘the very Proteus of diseases, a malady which assumes so many different forms that it seems to be not one, but all diseases epitome’, while in 1907 Clifford Albutt, Regius Professor of Physic at Cambridge, described flu as ‘the most protean’ disease of all, ‘more diversified even than syphilis’.\(^41\) Flu’s protean qualities are nowhere better symbolised than by its diverse nervous symptomatology, hence its association in the fin-de-siècle period with depression, neurasthenia and psychosis.\(^42\) For all that it was common for Victorians to confuse influenza with other familiar nervous and febrile conditions, however, medics tended to regard it as ‘comparatively harmless’, the chief dangers being relapse and the way that cases of ‘simple’ flu might combine with bronchitis and pneumonia to spark fatal respiratory infections.\(^43\) However, during epidemics and pandemics, such as had occurred in 1847–8 and 1889–93, it was recognised that the respiratory complications of flu could greatly elevate the death rate, fuelling flu’s comparison with ‘plague’.\(^44\) At the same time, unfamiliarity with the novel symptoms triggered public alarm, greatly complicating the medical management of the disease. As an editorial writer in *The Lancet* observed at the height of the first wave of Russian flu, some sections of the public were guilty of a ‘morbid dread’ of the disease and were ‘so fully alive to the prospects of the spread of this ailment that they have almost passed into a state of panic’. At the same time the journal lamented a

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40 playne, *Society at War, op. cit.* (note 37), 286–8.
‘growing tendency among the better educated classes to regard the epidemic as something almost too trivial for serious consideration’.  

By the turn of the century it was recognised that flu epidemics presented the greatest risk to infants, the elderly and patients with pre-existing lung conditions. The problem was that the line between what one might term ‘appropriate’ and ‘inappropriate’ dread of the disease was continually shifting. Thus during pandemic periods, when influenza presented as a ‘new’ disease with unfamiliar symptoms, it made sense to err on the side of caution, but once the pandemic form had been described and the health risks were understood, dread became pathologically suspect.

Retrospective accounts of the 1918–19 pandemic tend to treat the successive waves of Spanish flu as a single epistemic event. However, as Ramussen has argued, at the time it was experienced more as ‘a succession of crises and moments of respite’. Similarly, Bresalier points out that, initially, the relationship between the mild summer wave and lethal follow-on waves in the autumn of 1918 and winter of 1919 baffled the Edwardian medical community. It was only later that epidemiological and military bacteriological experts agreed on the essential identity of the three waves and the pandemic came to be seen as a ‘single cataclysmic event’. Consequently, in the summer of 1918, when Owen wrote to his mother, there was little reason for Britons to fear flu. As in other countries, flu epidemics were seasonal occurrences. Flu visited Britain every autumn and winter, elevating the death rate of infants and the over sixty-fives but leaving the adult mortality rate unchanged. The result was that, in most years, flu rarely accounted for as many as 1,000 annual deaths in London.

The first Britons knew of the flu was in late May when the Daily Express and the Daily Mail ran brief reports about a ‘mysterious epidemic’ in Spain. Wary of frightening the public, the British Medical Journal (BMJ) dismissed the reports as ‘alarmist’ while The Lancet ignored them entirely. In contrast to the Russian flu pandemic, when the Local Government Board (LGB) for England & Wales had instructed its Medical Department to initiate a nationwide investigation, in 1918 the LGB made no effort to investigate the epidemiology or bacteriology of the Spanish flu or to canvass doctors as to the symptoms or the incubation period of the disease. Indeed, at a ‘discussion on influenza’ with other experts at the Royal Society of Medicine (RSM) on 13 November 1918, Arthur Newsholme, the Chief Medical Officer of the LGB, said that in the summer he had considered issuing a memorandum on flu only to shelve it on the grounds of expediency, reasoning that there were ‘national circumstances in which the major duty

45 The Lancet, 11 January 1890, 88.
47 See, for instance, BMJ, 9 March 1895, 550.
50 Dixey, op. cit. (note 44).
51 Daily Express, 23 May 1918, 1; 29 May 1918, 1; Daily Mail, 28 May 1918, 3; 29 May 1918, 3; 30 May 1918, 3.
52 ‘The Reported Epidemic in Spain’, BMJ, 1 June 1918, 627. The first reference to the epidemic in The Lancet came in a short article in August in which the journal belatedly acknowledged the elevation of mortality that had occurred in July. The Lancet, 3 August 1918, 162.
is to “carry on”’.53 This was perhaps understandable given, as Eyler points out, in 1918 the LGB’s authority was much diminished and Newsholme lacked manpower due to the war effort.54 According to Bresalier, confusion over the identity of influenza also meant Newsholme had little confidence in preventive measures, hence his willingness to defer to the Medical Department of the War Office and the Medical Research Committee (MRC), who he reasoned were in a better position to conduct detailed bacteriological and pathological investigations into the cause of the epidemic.55

This ‘silence’ on the part of British medical authorities contrasts with the more proactive measures taken in other Allied countries, such as Australia and the United States (US), and has prompted the claim that British medical professionals suffered a ‘failure of expertise’ in 1918.56 However, to seek to compare the British response with the more vigorous measures taken elsewhere is to overlook the very different conditions prevailing on the home front in Britain in 1918 and the extent to which the LGB and the medical press were active participants in the propaganda effort. Like the Northcliffe press, the British medical profession’s priority in 1918 was to avoid panicking the civilian population, especially as more than half of all medical personnel were occupied with military duties.57 However, as the epidemic spread and chemists reported a rush on quinine and other medications, sparking fears of panic-buying, it became clear that this silence could not be sustained.58 Instead, Newsholme turned to the Northcliffe press, briefing the Daily Mail and, it seems The Times’s medical correspondent, about the board’s knowledge of the epidemic and using its columns to issue practical and upbeat medical advice to readers. In so doing, Newsholme’s actions can be seen as form of biopolitics. However, I will argue that, in the process Newsholme, like other medical commentators, soon found himself caught between opposing discourses – discourses that, on the one hand, required him to counsel civilians to take the threat of influenza seriously and which at the same time valorised the maintenance of a ‘cheerful’ disposition lest fear itself become the ‘mother’ of infection.59

**War, Emotion and Metaphor**

The notion that emotions can act on the imagination so as to make individuals more susceptible to disease can be traced at least as far back as Robert Burton’s *Anatomy of Melancholy*.60 Although by the Edwardian period emotional susceptibility was more

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58 See, for instance, *Chemist and Druggist*, 6 July 1918, 35; 26 October 1918, 34.
59 *The Times*, 31 October 1918, 7. Not all commentators shared Newsholme’s opinion that preventive measures were pointless. Indeed, George Newman, the then Chief Medical Officer of the Board of Education, was highly critical of the position adopted by Newsholme at the RSM meeting, describing him afterwards in his diary as ‘vacillating’ and ‘incompetent’. Mark Honigsbaum, *Living With Enza: The Forgotten Story of Britain and the Great Flu Pandemic of 1918* (Basingstoke: Macmillan), 93.
60 ‘Men, if they see another man tremble, giddy, or sick of some fearful disease, their apprehension and fear is so strong in this kind that they will have the same disease’. Robert Burton, *The Anatomy of Melancholy*, I (Philadelphia: J.W. Moore, 1857, first publ. 1638), 160.
commonly framed in terms of the depletion of somatic reserves of ‘nerve force’, pre-modern notions of the role of the imagination continued to enjoy wide currency. ‘Fear worries the nervous system’, argued a 1902 medical advice pamphlet. ‘One of the best ways of preventing influenza is to keep your mind easy instead of imagining, like so many do, that you are going to fall a victim to the disease’. The pamphlet also recommended foods and drinks rich in ‘nerve’-building nutrients and the avoidance of ‘depressing’ influences, such as cold weather or ‘overwork’ and ‘overstrain’. The cultivation of positive character traits was also thought to strengthen an individual’s powers of resistance, hence the pamphlet’s claim that ‘there is no better established fact in the whole history of epidemics than… that the man or the woman of pluck and energy is the last to take the prevalent disease’.  

Such views were shared by many members of the medical profession, including the pioneering British psychiatrist W.H.R. Rivers, who used his appointment in 1916 to Craighlockhart War Hospital in Edinburgh to explore the psychopathology of shell-shock and other forms of ‘war’ trauma prevalent among officers and enlisted men. It was there that Rivers first encountered Wilfred Owen, who had been sent for recuperation to Craighlockhart in June 1917 after enduring a ‘tornado of shells’ in a dugout in no-man’s land in northern France, and Siegfried Sassoon, the poet and conscientious objector who would become Rivers’ most famous patient. While Rivers does not appear to have had much to do with Owen, considering him an uninteresting product of a grammar school, his theory that the superior education of officers made them better able to withstand the shocks and traumas of war were shared by his colleague, A.J. Brock, to whom it fell to treat Owen, and imbued the therapeutic regime at Craiglockhart. As Allan Young has shown, Rivers was convinced that officers were better able to withstand ‘fear and its expression’ because of the way that their minds had been trained to suppress negative emotions through the public school ethos of stoicism and the emphasis on competitive games. However, according to Rivers the trauma of trench warfare and the nervous shocks from the incessant shelling had been too much for even educated men to bear, hence the traumatic neuroses he encountered at Craiglockhart. Rather than repressing the traumatic memories lying behind these neuroses and ‘carrying on’ as if nothing had happened, which was the solution favoured by the military and by Newsholme in relation to the influenza epidemic, Rivers encouraged patients to relive the trauma of war and their disturbing dreams through writing exercises and an early version of the ‘talking cure’. The result was that, rather than victims of shell-shock being labelled malingerers and hysterics – a diagnosis that carried connotations of womanly emotionality – Rivers reconfigured the officer class’s anguish as a form of neurasthenia that was both noble and heroic. The result, as Young puts it, was that Rivers’ neurasthenia became ‘weakness without stigma’.  

In Owen’s case, his neurasthenic diagnosis and treatment at Craiglockhart could be worn as a particular badge of honour as it put him in the same company, therapeutically speaking, as the aristocratic, public-school educated Sassoon, who Rivers had diagnosed

61 Anonymous, op. cit. (note 43), 237.
as suffering from an ‘anti-war complex’ and whose literary success Owen was eager to emulate. As Shephard and others have argued, when Owen arrived at Craiglockhart there was little to indicate that he had the makings of poetic greatness. However, after editing the hospital paper, the *Hydra*, and being persuaded by Sassoon that his poetry could embrace a ‘reasoned opposition to the war’, Owen’s writing was transformed. Certainly, by the time he was discharged from Craiglockhart for ‘light duties’ with his regiment at Scarborough, Owen had discovered his voice and by May 1918 he had polished the collection of poems that would make his name.

It is against this background of growing self-confidence as a fully paid-up member of the ‘neurasthenic’ officer classes that we should read Owen’s dismissal of the Spanish flu in the summer of 1918 as ‘common’ and beneath his social status. However, as Showalter has persuasively argued, the stoicism exhibited by Owen and other male war trauma cases was largely a performance, a way of reasserting manly unemotionalism in the face of the brutality and horrors of war. Owen’s dismissal of the Spanish flu as a ‘joke’ can be seen as similarly performative, a way of shaping his emotional response to the flu in a way that valorised the ‘superior’ breeding of officers. Thus, rather than succumbing to flu in the manner of enlisted men, Owen makes fun of their hysterical reactions and informs his mother that he has ‘quite decided not to [succumb]’. In other words, the emotional utterance – Owen’s verbalisation of his determination not to succumb – is crucial to the production of his stoicism. To use Reddy’s terminology, the emotive reinforces Owen’s cognitive attitude to the object of the emotion, flu.

Another way of influencing emotions was through the manipulation of patriotic symbols and metaphors. These propaganda uses of metaphor are illustrated by the wartime advertisements for Bovril and patent medicines. A blended meat extract, Bovril’s origins date back to the 1870–1 Franco–Prussian war when the Scottish entrepreneur, John Lawson Johnston, won a contract to supply canned meat to French troops during the siege of Paris. From the start, Johnston sought to associate Bovril with ‘strength’ or what he called the ‘vital principle of prime ox beef’ (italics inserted). To underscore the supposed vitality of his reduced beef tea, Johnston’s advertisements often juxtaposed jars of Bovril with virile images of lions and bulls. By WWI, the Bovril bull had become a symbol of national virility, with Bovril sponsoring a series of advertisements showing the bull standing guard outside an army recruiting tent above the copy line ‘British to the backbone’ and ‘Bovril recruits its strength through the power of beef’.

As a peculiarly fatiguing disease that depleted nervous energy, influenza lent itself readily to these somatic metaphors, hence Bovril’s claim that it could ‘prevent influenza and colds by fortifying the system against their attacks’ and that Bovril was ‘liquid life’. The problem was that, in order to sell Bovril as a preventive, the advertisements explicitly traded on consumers’ fears of exogenous pathogens, frequently drawing an analogy between the threat to individual bodies and the threat posed by Germany to the

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65 Shephard, op. cit. (note 63), 90–3.
66 Elaine Showalter, *The Female Malady: Women, Madness and English Culture, 1830–1980* (London: Virago, 1998), 167–94. Showalter argues that it was only after the war that female novelists such as Virginia Woolf and Rebecca Mead would re-interpret shell-shock in gendered terms as a male hysterical response to the trauma of war and the repressive patriarchal system that underpinned the exercise of Edwardian psychiatric power and Britain’s wartime society.
69 Hadley, op. cit. (note 67), 224.
politicised and social body. In this way they raised the very fears that wartime propaganda was meant to obviate. A good example was a full-page advertisement that appeared in various papers in 1914–15. Headed ‘Are you on Dangerous Ground?’, the advertisement shows a jar of Bovril coming to the rescue of the ‘threatened corps of the body’ which is shown being encircled by enemy battalions labelled ‘chills’, ‘colds’, and ‘influenza’. The copy explains that ‘dangerous ground’ is a metaphor for those who are ‘run down’ or ‘who are always “catching something”’, or ‘who do not pick up as they ought after illness’. In each case, the advertisement explains, ‘Bovril is the best Home Defence’.70 Similarly, in another advertisement, dating from the German air raids on the east coast of England in 1915, a Zeppelin becomes a metaphor for the various germs waiting to attack stressed civilians. The copy reads, ‘More insidious than hostile aircraft are the enemies that fill the air in the shape of colds, chills and influenza, which are always “hovering to strike” the man or woman who is run down and out of sorts’.71 Similar contradictions bedevilled wartime advertisements for germicides, tonics, and disinfectants. Thus in an advertisement for the disinfectant Santol that appeared in the Salford Reporter in the early autumn of 1918, readers are warned that ‘the Germs of Influenza and other Diseases Attack at your Unguarded Moments, and only when the Grim Spectre of Illness or the Shadow of the Awful Reaper falls on your home do you realise the Danger’.72

Reporting the Flu

A good example of the contradictions in these biopolitical discourses came in an article that appeared on the main comment page of the Daily Mail in the first week of June. Headlined ‘Is Influenza Coming?’, and bearing the byline of the paper’s medical correspondent, the article begins by reminding readers that most attacks of influenza are no worse than a cold and that patients should not have ‘any great dread of [the disease]’. In the very next sentence, however, the writer warns that the complications of flu can be very serious indeed and it would be wise to ‘prepare our defences now’. There then follows a list of recommendations, such as spending as much time as possible out of doors so as to avoid infection with the presumed ‘bacillus’ of influenza (‘the conscientious allotment holder stands a better chance of escape than his sedentary neighbour’). Readers are also reminded to avoid ‘over-fatigue’ and ‘chills’. However, the key advice is to ‘maintain a cheery outlook on life’ as ‘depressed mental states’ are said to favour the onset of the disease.73

At this stage, it would appear, the flu was not considered sufficiently serious to destabilise the dominant political discourses. However, by the end of June, with ‘sporadic’ outbreaks being reported throughout the capital, the Daily Mail changed tack, advising readers who suspected they had influenza to ‘go to bed immediately and not attempt to “carry on”, which only means carrying infection to others’.74 The following day, with the news that ‘300 girls’ at a leather factory in Bermondsey were ill, Newsholme gave the paper the first in a series of on-the-record briefings, informing its medical correspondent that, while the current epidemic is not ‘so severe as the great epidemic of 1889–92’, outbreaks were being reported from various parts of Britain, as well as from France.

70 Hadley, op. cit. (note 67), 31–3.
71 Hadley, op. cit. (note 67), 31–3.
72 Salford Reporter, 23 November 1918, 2.
73 Daily Mail, 6 June 1918, 2.
74 Daily Mail, 24 June 1918, 4.
Germany and Spain. Describing general isolation measures as ‘impracticable’, the gist of Newsholme’s message is that individuals should monitor their symptoms and act in their own – and the wider population’s – best health interests: hence his advice that patients should go to bed as soon as symptoms appear and remain isolated for at least four to five days afterwards. ‘A relapse may be more dangerous than the original attack’, he warns, before adding that a ‘good preservative from infection’ is to use a disinfectant nose spray or mouth wash’.75

In late June and July there was another subtle shift in the language used to describe the epidemic. The trigger was an outbreak of influenza at a German prisoner-of-war camp in Bramley, Hampshire, that had hospitalised nearly 1,000 men – a third of the camp’s prison population. Several guards, it was reported, had also been laid low.76 Suddenly the ‘Hun’ was no longer the only enemy. ‘New Foe in Our Midst’, declared the Salford Reporter.

The epidemic of influenza has reached Salford and it is not of the old ‘sneezing variety’, it is very prostrating. Hundreds of cases have occurred in the borough during the week, and doctors are extraordinarily busy.

The article went on to advise that patients should on ‘no account attempt to “carry on”’, but instead should go to bed the moment they were attacked. ‘If you get about and try to shake it off it becomes much worse’, a doctor was quoted as telling the paper.77

For the most part, however, discourses of resilience and stoicism tended to dominate and nowhere more so than in the editorial pages of the Times. A good example was the article in late June claiming that the man in the street was ‘cheerfully’ anticipating the arrival of the Spanish flu. What makes the article so striking in retrospect is not so much its appeal to the stereotype of ‘plucky’ Britons as the writer’s suggestion that the epidemic is the result of a German germ warfare experiment and the activities of the ‘unseen hand’ – a reference to the secret German spy networks thought to be operating inside Britain. The writer goes on to agree with Newsholme that the Spanish epidemic does not appear to be nearly as severe as previous epidemics, before suggesting that ‘malnutrition and the general weakening of nerve-power known as war-weariness’ and the ‘contact between national armies’ are sufficient conditions for its spread.78

This notion that the epidemic was a consequence of war was to prove a familiar refrain not only in the columns of The Times, but in the Daily Express, The Lancet, the BMJ, and the official report on the pandemic produced by the Ministry of Health after the war.79 This is hardly surprising. As long as the outcome of the war hung in the balance, the propaganda consensus demanded that flu should not be allowed to usurp the dominant military discourses necessary for the maintenance of civilian morale.

In August a new, virulent form of influenza had appeared in the Allied lines, prompting a flurry of confidential correspondence between MRC, the War Office and the Army Medical Service calling for the renewal of medical investigations amid fears that it could herald a second wave of flu.80 However, the first public indication that the Spanish flu had returned, and possibly in more dangerous form, came in September when it was reported

75 Daily Mail, 25 June 1918, 4. See also Chemist and Druggist, 29 June 1918, 44.
76 Glasgow Herald, 23 July 1918, 6.
77 Salford Reporter, 29 June 1918, 2.
78 The Times, 25 June 1918, 5.
80 Bresalier, op. cit. (note 49), 25–8.
that the Prime Minister Lloyd George had been taken ill in Manchester. Lloyd George had succumbed to the disease during a morale-boosting trip to Manchester on 12 September and spent ten days confined to a sick bed in the town hall, much of them hooked up to a ventilator to ease his laboured breathing. Judging by the recollections of the Secretary of State for War Sir Maurice Hankey, Lloyd George’s illness was very serious indeed and, according to his valet, at one point it had been ‘touch and go’. However, with the help of the attending physician, Sir William Milligan, and friendly newspaper barons such as C.P. Scott, the true gravity of his illness was kept out of the public prints. Instead, the Manchester Guardian joked that Lloyd George had caught a ‘severe chill’ when he had accidentally been soaked in a downpour in Albert Square and that he had since become ‘a prisoner of [Manchester’s] not too kindly climate’. In the meantime, The Times censored several of Milligan’s medical bulletins, waiting until the 18th to report that the Prime Minister was on his way to recovery.

Growing concern about the impact the flu was having on army sickness rates also failed to make it past the military censors. The American Expeditionary Force (AEF) first began to note a resurgence of influenza in northern France in early September. The outbreaks were most extensive at Le Mans and Brest and by the end of the month the AEF had recorded some 11,000 new cases. This time, however, the influenza was frequently accompanied by severe pneumonia and sometimes proved fatal. By now, the Americans were also struggling to contain the level of infections. One of the most striking outbreaks occurred at Camp Devens, a US Army barracks near Boston where 50,000 men were crowded into a facility designed for 40,000. By the end of the month some 14,000 men – nearly a third of the camp’s population – had been hospitalised with influenza or pneumonia, and 757 were dead. The sight of rows of young men laid out in the hospital infirmary, their lips and cheeks a mahogany colour from cyanosis, shocked medics hardened by battle service. ‘One can stand it to see one, two, or twenty men die’, recalled a member of the camp’s surgical team, ‘but to see these poor devils dropping like flies sort of gets on your nerves’. The conditions on American transports such as the Leviathan, which arrived at Brest on 8 October, were similarly alarming, with 2,000 cases and 80 deaths. Similarly, when the troopship Olympic docked at Southampton on 21 September so many of the crew were sick that the British military authorities had to requisition beds in a nearby isolation hospital. A total of 119 severe cases were admitted, of which forty-one proved fatal. Whether by accident or design, however, few of these incidents found their way into the press.

82 For further discussion see Honigsbaum, op. cit. (note 59), 65–9.
83 Manchester Guardian, 13 September 1918, 6; 14 September 1918, 6.
84 The Times, 18 September 1918, 8.
87 Byerly, op. cit. (note 85), 103.
88 R.E. Lauder, Annual Report on the Health of the County Borough of Southampton and the Port of Southampton for the Year 1918 (Southampton County Council), 8.
89 An exception is an article that appeared in The Lancet in October referring to ‘alarming accounts’ of the deaths on an American troopship, S.S. Otranto. Addressing the issue of ‘confusion’ as to the case fatality rate, The Lancet reported there had been fifty cases of influenza and four deaths, with other deaths from pneumonia being due to the crewmens’ ‘exposure during rescue’. The Lancet, 19 October 1918, 535.
The first official acknowledgment that the flu was again affecting civilians came in early October when Glasgow’s Medical Officer of Health reported that there had been sixty-six deaths from influenza in the city and sixty-five from pneumonia. By 15 October the figures were even more disturbing: 450 deaths from influenza and pneumonia, or thirty-eight per 1,000 population, the highest mortality rate recorded in Glasgow in twenty years. The reports were picked up by both The Times and the Daily Mail, with the Daily Mail heading its article on the 10th ‘Infection in the air’, and reporting that the influenza appeared to be of ‘a more virulent type than in the early part of the year’. The following day, it was acknowledged, the flu had reached the fringes of London, with some seventeen patients reported dead at an ‘outer London institution’.

If the Northcliffe press’s coverage of the first wave of Spanish flu had been sporadic, the same could certainly not be said of the second wave. Between June and July The Times had published just seventeen articles on influenza. By contrast, in October and November – the peak months of the autumn wave – it ran ninety-three. In terms of individual articles, the Daily Mail’s coverage appears to have been more even – twenty-one articles in June–July versus twenty-nine in October–November. However, many of the articles during the first wave had been no more than one or two paragraphs long and tended to be buried at the back of the editorial run. By contrast, in the autumn of 1918 the Daily Mail devoted several leaders to the epidemic. By the third week in October, it had also promoted the epidemic to the prime news spot at the top of page three, where it received equal billing with the war. As the mortality from flu worsened, both the Daily Mail and The Times also began reproducing statistics from the Registrar General’s weekly mortality returns – data which made the mounting death toll more visible to readers. At the same time, the Daily Mail employed triple-tiered headlines and crossheads to emphasise alarming statistics and to draw readers’ attention to particular phrases and tragic incidents. By the first week in November, it was not unusual for these round-ups to extend the full length of a page and across several columns. In addition, the Daily Mail ran a series of articles by a medical expert questioning official information about the epidemic and criticising the government’s ‘neglect’ of research.

Even before the Registrar General’s weekly returns confirmed it, the threat that this new wave of flu posed was obvious. Although news from northern France was still heavily censored, news from other parts of the world continued to flow along the worldwide telegraph, confirming that flu was rampant in India and South Africa. Some of the most alarming reports of all came from Cape Town where on 10 October The Times reported some 14,000 people had been attacked and that the epidemic was ‘assuming the proportions of a national calamity’. Three days later the paper’s Cape Town correspondent telegraphed that fatalities in the first two weeks of October were running at 5,000.

Realising that censorship was pointless and faced with a medical catastrophe to rival the mortality from the war, the Northcliffe press found itself in a quandry. Should it downplay the threat to civilians and hope the epidemic would go away, or should it play up the

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90 Glasgow Herald, 3 October 1918, 6.  
91 Glasgow Herald, 15 October 1918, 4.  
92 The Times, 3 October 1918, 5; Daily Mail, 10 October 1918, 4.  
93 Daily Mail, 11 October 1918, 4.  
94 Daily Mail, 29 October 1918, 2.  
95 The Times, 10 October 1918, 5.  
96 The Times, 21 October 1918, 7.
threat and look for someone to blame? The answer, it would seem, was a bit of both. As in the summer, the *Daily Mail*’s first instinct was to strike an optimistic tone, quoting Newsholme to the effect that, though there was ‘a good deal of influenza in London’, the capital did not have it nearly as severely as other parts of the country and that ‘the hopeful view [was that] the worst might be over’. This message chimed with the latest reports from northern France where the British Fourth Army had broken through the Hindenburg Line at Cambrai and was now engaged in a three-pronged assault on the German army with the support of the French and the Americans. But as reports began to find their way into the papers of people collapsing in the streets, the tone shifted from stoical disdain to emphasising the gravity of the threat. ‘Everything that lowers the vitality should be avoided’, advised the *Daily Mail*’s medical correspondent. ‘The cases of collapse in the streets are probably due to people going out after they have had warning symptoms’.

The key turning point, however, was Newsholme’s decision to issue a public memorandum giving official advice to patients on ‘precautions against infection’. The memorandum amounted to a re-affirmation of the traditional British faith in sanitary science and laissez-faire attitudes according to which influenza was primarily a disease of the environment and poor hygiene – hence Newsholme’s appeal to individuals to regulate their behaviour in their own and other people’s interests. As *The Times* put it: ‘Dr Newsholme emphasises the fact that control over the disease can be secured only by the active cooperation of each member of the community’.

Newsholme’s memo marked a turning point in the reporting of the epidemic. Until October the Northcliffe press and the leading medical journals had been broadly sympathetic to the LGB. But with the rapid increase in mortality, Newsholme’s memo was seen as a case of too little too late. ‘It would have been better to lock the stable door before the escape of the horse’, remarked *The Times* in a caustic editorial the following day. The *Daily Mail* was somewhat slower to join the attack, choosing instead to praise Newsholme’s decision to call a conference of medical and bacteriological experts. Rather than singling out the LGB or Newsholme for criticism, an editorial focused on the lack of bacteriological research and differences of opinion as to the identity of the disease – a position that reflected the then medical consensus. While the tone of the editorial was measured, however, the paper’s news pages conveyed a very different message. ‘Stricken Homes, Girls Dead on Bridal Day’, announced an item recording the simultaneous deaths of two girls who worked in a warehouse at St Paul’s Churchyard and who had been due to be married the following day. Other news items included the report that 1,400 police and 1,000 telephone operators were on the sick list and that doctors and undertakers were ‘worked off their feet’.

By the end of the month, however, both the *Daily Mail* and *The Times* were growing more critical of official complacency and on 26 October *The Times* published a coruscating editorial headlined ‘A Serious Epidemic’. Two days later, *The Times* returned to the theme, arguing that the ‘real meaning of the present calamity is that steps must be taken to make somebody answerable for the nation’s health. It will then be possible to bring
home the neglect and lack of foresight’. Although *The Times* criticised the authorities’ handling of the epidemic, when at the end of the month the Registrar General’s returns showed there had been 4,482 deaths from influenza in England and Wales the previous week and that there was no sign of the death toll declining, the first instinct of its medical correspondent was to seek to reinforce readers’ resolve by equating ‘resistance’ to influenza with ‘resistance’ to Germany. Though the official returns did not show any ‘sensible diminution’, neither did they show ‘any particularly marked increase’, the correspondent argued:

> It is important to realize this and to see things in perspective, as a stout heart is a great safeguard in these days. Fear is certainly the mother of infection. To go about expecting influenza is to invite it. Such an attitude lowers one’s natural resistance to external enemies. The alarmists and defeatists are the allies of the epidemic.¹⁰⁵

This was not an isolated opinion but appears to have reflected the consensus view of the British medical profession. Just as at the Royal Society of Medicine summit in November Newsholme had invoked the importance of ‘carrying on’, so a succession of doctors and medical experts now came forward to call for a greater show of civilian nerve. ‘Terror is a big ally of influenza, and if the public state of mind can be steered out of the channel of fright a long, long step will have been taken to conquer the epidemic’, argued a doctor in a letter to the *Manchester Guardian*.¹⁰⁶ Particular ire was directed at the publication of the weekly death returns and other alarming reports of flu fatalities. ‘We read in our daily newspapers the enormous fatalities due to the “influenza epidemic”’, complained a correspondent to the *BMJ*.

> When epidemics occur deaths always happen. Would it not be better if a little more prudence were shown in publishing such reports instead of banking up as many dark clouds as possible to upset our breakfasts?¹⁰⁷

If a conversation between three army doctors overheard by a correspondent at the *Daily Mail* is any guide, such attitudes were also widespread in military medical circles.

> ‘A lot of cases are due to sheer panic’, said one. ‘So much publicity has necessarily had to be given to the present epidemic that everyone more or less talks “flu”. The consequence is that people begin to imagine symptoms and frighten themselves and other people into a condition which renders the task of germs more easy. For of course it is an acknowledged fact that the mental state affects the rest of the body.’¹⁰⁸

One result of the intensification of the contradictions inherent in the medical and propaganda discourses was to undermine the rhetorical strategy that had served to regulate emotional responses during the early phase of the pandemic. This was especially the case in late October as the death toll from influenza mounted, prompting panicked scenes outside chemists and doctors’ surgeries. As undertakers struggled to cope with the demand for burials and the victims of influenza and pneumonia began to crowd out the names of the war dead in the obituary columns of *The Times*, ‘flu’ could no longer be mocked. Instead, the dread that had once been directed at Germany increasingly became attached to the epidemic, destabilising the propaganda discourses and deflecting relief at the news that the Armistice was imminent. As Caroline Playne noted in her diary on 26 October:

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¹⁰⁴ *The Times*, 28 October 1918, 6.
¹⁰⁵ *The Times*, 31 October 1918, 7.
¹⁰⁶ *Manchester Guardian*, 21 December 1918, 4.
¹⁰⁷ *BMJ*, 9 November 1918, 534.
¹⁰⁸ *Daily Mail*, 15 November 1918, 2.
Influenza is very bad in places. In trains and trams the depression shown on travellers’ faces was very noticeable and talk was all about specially sad cases of death from influenza. A sense of dread is very general. Some who, one knows, are anxious for peace, say they dread to think it may come.\textsuperscript{109}

For a pacifist such as Playne this was a depressing turn of events. It had been her hope that the influenza pandemic would serve as a collective wake-up call, ‘a warning that it was high time to end the stress and strain of world belligerency’. Instead, she observed, it appeared to have had the opposite effect.

The evil spirit that was abroad seems to have used the influenza epidemic as a means of exciting undefined dread and distracting men from being any way keen on making peace.\textsuperscript{110}

The \textit{Manchester Guardian}’s London correspondent noted a similar pathology at work, observing that people were ‘fighting shy of theatres and kinemas [sic] and all kinds of meetings’:

People generally are scared and the crowds besieging the doctors’ surgeries and chemists’ shops included a good many who think they may be going to have influenza.\textsuperscript{111}

Yet at the same time as Londoners seemed to be panicked by influenza, the correspondent reported that news of the Austro-Hungarian peace offer had been met by Londoners with characteristic ‘phlegm’. The result was that a foreign visitor to London had heard more about ‘the certainty of influenza than about the prospects of peace’. However, he argued, this stoicism was a mask. ‘People are afraid, even at this half-past eleventh hour, to let their thoughts rest on peace’, he explained.\textsuperscript{112}

It was only with the declaration of the Armistice on 11 November that, according to Playne, letters from readers concerned about the epidemic began to ‘crowd out letters demanding veneful, retaliatory punishment of Germany’ and that something like rationality returned to public discourse.\textsuperscript{113} For all its anti-German posturing, even the \textit{Daily Mail} noted how the Armistice had acted as a ‘wonderful tonic’, coming to the aid of doctors and patients battling influenza. ‘The fear of influenza has vanished from the public mind’, the paper declared. ‘Patients suffering from it are being cured by the best of all remedial agents, cheerfulness’.\textsuperscript{114}

\section*{Conclusion}

This paper has argued that social historians of medicine have had trouble accounting for the unusually muted responses to the 1918–19 Spanish influenza pandemic. Instead I have taken an emotionological approach, one that puts emotion words, emotives and metaphors at the heart of my analysis. Rather than seeing the pandemic as ‘overshadowed’ by the war, I have sought to understand how the regulation of emotional responses to the pandemic were governed by the political and medical discourses that prevailed at the time and the deployment of words, phrases and metaphors designed to elicit stoicism, hatred and dread.

\textsuperscript{109} Playne, \textit{Britain Holds On}, op. cit. (note 37), 380. See also ‘Playne Diary’, 26 October 1918, Caroline Playne Collection, Senate House Library, University of London. MS1112. The entry in Playne’s diary is slightly different from the edited version and reads: ‘Influenza very bad in places. People did not seem cheered by the prospect of peace. . . People full of very sad cases of influenza. A great sense of dread about everything’.

\textsuperscript{110} Playne, \textit{Britain Holds On}, op. cit. (note 37), 380.

\textsuperscript{111} \textit{Manchester Guardian}, 30 October 1918, 4.

\textsuperscript{112} \textit{Ibid.}.

\textsuperscript{113} Playne, \textit{Britain Holds On}, op. cit. (note 37), 377.

\textsuperscript{114} \textit{Daily Mail}, 13 November 1918, 4.
Taking Wilfred Owen’s disdainful response to Spanish flu as emblematic of British attitudes in the summer of 1918, I have argued that Owen’s stoicism was largely performative, an emotional ‘style’ that conformed to official propaganda scripts and then medical theories of psychopathology and male traumatic responses to war. For Owen, deprecating influenza was of a part with his self-image as a member of the officer class and a recovering neurasthenic, a psychiatric diagnosis that allowed him to glorify his experience of war while denigrating enlisted men’s responses to other exogenous threats, such as flu, as a form of hysteria. Similarly, for British civilians who had endured five years of deprivation punctuated by frightening Zeppelin raids on the home front, ‘cheerful’ disdain of flu was a way of maintaining unity in face of the continuing German threat while avoiding deeper political and psychological introspection about the purpose of the belligerency. However, the maintenance of stoicism and civilian ‘staying power’ came at a cost, requiring the amplification by the Northcliffe press of negative emotions in which acceptance of the brutality and trauma of war was achieved at the expense of fostering hatred and dread of Germany and other ‘foreign’ threats to the political and social body.

Influenza, I have argued, is a protean disease that manifests as alternately benign and plague-like. These dualistic qualities give it an unusual ability to subvert biopolitical discourses. This can clearly be seen in the statements issued by the LGB and articles by medical correspondents in the build up to the worst weeks of the pandemic. Thus at the same time as some biopolitical discourses sought to downplay the threat of influenza, others sought to impress upon patients the dangers of the respiratory complications of flu. Indeed, in the absence of vaccines and other forms of biomedical prevention, it made sense for young adults to dread the cyanosis and fatal pneumonias associated with the Spanish flu – hence the stress placed by medical officers and medical correspondents on personal hygiene and social distancing measures.

Drawing on the diaries and observations of the cultural historian Caroline Playne, I have argued that wartime propaganda discourses encouraged the cultivation of stoicism at the expense of other emotional scripts. However, in the final weeks of the war the emotions of hatred and dread that had been so important to the maintenance of civilian morale and the stifling of domestic dissent were displaced onto a new narrative object, influenza. In this respect, biopolitical discourses around the pandemic can be seen as what Foucault calls a ‘point of resistance’ to the dominant propaganda discourses. These tensions were most apparent in wartime advertisements for products such as Bovril that drew on patriotic tropes and then medical theories of ‘nervous force’ while, at the same time, seeking to exploit consumer fears of exogenous threats to the body. However, they also manifested in the editorial pages of *The Times* and the *Daily Mail* – papers that, during the early years of the war, had been crucial to the propaganda effort and the maintenance of civilian morale.

Initially, Northcliffe’s papers had downplayed the threat of Spanish flu. Instead, echoing Newsholme’s message to ‘carry on’, they had drawn on pre-modern notions of psychopathology according to which the imagination could act on the body so as to make it more susceptible to infection, hence the importance of cultivating fortitude and resilience as a way of boosting civilian ‘staying power’. However, by emphasising the role of positive emotions these discourses could not help but draw attention to the assumed pathological role of negative emotions such as hatred, fear and dread, underscoring the extent to which these emotions had now become objects of epidemiological regulation. The result was that, as the death toll from influenza mounted and dread of the disease increased, so the ‘resistances’ in these discourses became increasingly apparent, destabilising both the flow of biopower and wartime propaganda.
Although historians cannot directly access past emotional experiences and therefore can never 'know' what the emotion of dread felt like in 1918, by adopting an emotionological approach we can at least analyse the discourses governing the deployment of dread and other emotion words and phrases and seek to understand how metaphors and emotional utterances may have served to repress or intensify certain emotional states. Moreover, by recognising that emotives are not merely passive objects of discourse but can also act on and shape the emotional objects to which they refer, my approach brings out the way in which emotives interact with discourse, sometimes reinforcing and at other times highlighting ambivalences and contradictions in and between different discursive regimes. This was nowhere more apparent than in the autumn of 1918 when the tensions between the propaganda discourses and biopolitical discourses reached breaking point.