Series: Influenza epidemics, past and present

ORIGINAL ARTICLE

The US Army School of Nursing and the 1918 influenza pandemic: Cooperation and collaboration at Camp Grant, Illinois

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Throughout human history, wars, plagues, tsunamis, tornadoes, fires, and other disasters have devastated communities, both large and small. Perhaps none was so widespread as the 1918 influenza pandemic. As the disaster devastated millions of people around the world and spread across geographic and political boundaries, it particularly affected soldiers on the move during World War I. This article describes the response to the pandemic at Camp Grant, Illinois, one of the major military bases in the United States, in the Fall of 1918. It specifically describes the camp's medical response and the contributions made by student nurses from the Army School of Nursing.

BACKGROUND: THE ARMY SCHOOL OF NURSING

In April 1917, when the United States entered the Great War raging in Europe, it became immediately apparent to military leaders that nurses would be needed to care for the troops. Just two months later, in June 1917, Adelaide Nutting of Teacher's College; Annie Goodrich, American Nursing Association President; Lillian Wald, founder of the Henry Street Settlement in New York City; and several other prominent nurses and health-care leaders met in New York City to discuss strategies to increase the supply of nurses available to both the military and the public. Known as the General Medical Board of the Council of National Defense, the committee also recognized the need for improved living and health-care conditions among the troops stationed domestically,

awaiting deployment abroad.¹

Even prior to that meeting, Goodrich had proposed the creation of an Army School of Nursing. It would introduce a new training model in which student nurses would study and care for patients at military bases across the United States, learning from prestigious faculty and graduate Army nurses.² The newly proposed Army School of Nursing would: (1) increase the nursing workforce through training new nurses, all of which would be familiar with the customs and regulations of the US Army; and (2) provide an eager and pliable nursing workforce on military bases, increasing the overall health of soldiers waiting to be deployed overseas. On May 25, 1918, Goodrich's proposal was accepted, and the Army School of Nursing came into existence.³ Applications for the new Army School of Nursing came from a wide variety of women, from newly graduated high school and college students to established professionals. By July 1917, the school had accepted 4,000 students to be placed across the country. The first unit opened on July 25, 1918, at Camp Wadsworth in South Carolina. Twenty-four additional units opened by the end of November.⁴

THE CAMP GRANT "BLUEBIRDS"

Camp Grant became the location of the largest of the original training sites for the newly founded Army School of Nursing. This military base was located near Rockford, Illinois, approximately 80 miles northwest of Chicago, Illinois.⁵ On August 15, 1918, thirty-five nursing students arrived at Camp Grant eager and willing to learn while serving their country. Along with their classmates in other areas of the United States, these young women were issued the Army School's uniform: a

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light blue dress complete with a white collar, white cuffs, and a black tie. Due to the color of these uniforms, the students were affectionately known as the “bluebirds”.⁶

The novice nursing students at Camp Grant took their nursing and military training seriously. Despite the fact that they did not have to join the Army Nurse Corps after graduation, the students still had to follow military rules, regulations, and the military lifestyle.⁷ Student nurses had to submit to weekly inspections and nightly curfews, and they followed strict attendance policies. They had to wear their uniforms when in the hospital buildings and nurses’ quarters and dress in their outdoor uniforms whenever they were “off base” visiting nearby Rockford.⁸ Students leaving the base had to check in and out upon departure and arrival, and social relations with the hospital detachment and patients was forbidden and “rigidly enforced”.⁹

Women in the Army was still a relatively new phenomenon, the Army Nurse Corps having been established only 15 years earlier. The student’s strict regulations made it difficult for any young, impressionable, unmarried female nursing student to mingle unsupervised with the military men, which perhaps was one of the unwritten purposes for the regulations regarding the Bluebirds. In fact, Lieutenant Colonel H.C. Michie ended the students’ regulations with a reminder that their “conduct must be such as to avoid criticism, and that an important part of [their] duty [was] to make the friends and relatives of [their] patients satisfied, and that everything possible is being done for the patients’ good.”¹⁰ The first five weeks of nurse training for the Bluebirds was spent practicing military drills, studying in the classroom, nursing on the wards alongside faculty and graduate nurses, and exploring the base and the surrounding area. This routine was short-lived, however, as the arrival of the flu required the students to put their rudimentary nursing skills into practice immediately.

CONTAINING THE CONTAGION

On September 21, 1918, men from the Central Officers Training School at Camp Grant began to exhibit signs of the flu, including fever, cough, chills, and fatigue. The flu had been spreading in several other camps in the country, including Camp Devens, Massachusetts, where the disease was raging. Now, with the transfer of only a small number of sick men from Camp Devens to Camp Grant, the flu had arrived in Illinois. Seventy soldiers sought treatment that evening, and by morning, the medical officers recognized the potential disaster in the

camp.

Health officials at Camp Grant immediately took action, quarantining soldiers (with certain exceptions) to the camp and forbidding visitors except those on urgent business. The camp’s theater and ice cream parlor were closed, and windows had to remain open in the barracks and treatment areas.¹¹ As soon as a new case was suspected, a mask was placed over the patient’s nose and mouth, and he was transported from the barracks to the hospital or infirmary for isolation and treatment.¹²

Prevention continued to be a priority at the Camp Grant, as this highly contagious virus was infecting otherwise healthy young men and women aggressively. Nurses and other health officials instructed soldiers on the dangers of transmitting the virus through spitting, coughing, or sneezing around others, and all health-care workers had to wear masks when transporting patients to the base hospital or visiting there.¹³ Patients used their own bedding and clothing at the hospital, and once discharged, their bedding was burned and blankets and bed sacks aired in the sun in an attempt to decontaminate the linens.¹⁴

Eliminating overcrowded conditions became a priority, and every effort was made to afford men with at least one hundred square feet of space in the barracks. Segregation by race also occurred, and some men, primarily those of African American descent, had to be in tents away from the barracks. Conditions there were cold and less comfortable than the barracks; nonetheless, relegation to these tents may have been the primary reason for the lower rate of infection among black soldiers compared to white soldiers.¹⁵

Despite these initial actions, the flu spread rapidly through Camp Grant, and the medical department struggled to keep up with the demand for care.¹⁶ The hospital expanded from ten occupied beds to over 4,000 within a six-day period.¹⁷ Officials placed the sick on porches, in evacuated barracks, and on an adjacent sanitary train to mitigate overcrowding and cross-contamination between patients. However, this was nearly impossible.¹⁸ Soon, the need for help in the base hospitals was so acute that classes for the nursing students were suspended. Instead, students received “on the job” training as they worked in the hospitals alongside graduate nurses.¹⁹ Newly arrived students obtained instruction in “a few simple procedures and necessary precautions,” and immediately went on duty in the “contagious” wards.²⁰ There they carried out basic, yet important, nursing skills as they bathed feverish patients, offered soup and nourishing liquids, and changed bed linens.

At its peak from September 26 to September 29, 1918, Camp Grant saw over 3,500 new cases of influenza, averaging almost 900 new cases per day in a population of nearly 40,000.²¹ The Army sent so many telegrams informing families of death or serious illness that they had to set up a separate information bureau to triage the deluge of telegrams, calls, and visitors.²² Civilians from Chicago volunteered to help.

NEW INFECTIONS SLOW WHILE DEATHS CLIMB

On October 7, 1918, Colonel Conner of the Medical Corps at Camp Grant wrote a sanitary report to his commanding officer in the belief that the disease was dissipating as the number of new cases decreased.²³ While new infections in fact declined, rates of pneumonia sky rocketed. In the five-day period from October 4–7, 522 people at Camp Grant died from the flu, most following the development of what was thought to be severe pneumonia.²⁴ Among these was student nurse Constance Shields, who died on October 6, 1918.²⁵ Three civilian and three Army nurses also died.²⁶ Camp Grant's morgue was only designed to process four deaths per day, and with hundreds of bodies needing autopsies and preservation for burial, the Camp's Medical Department partnered with the local community to obtain additional space, undertakers, and embalmers. In fact, the Army borrowed a building in downtown Rockford, Illinois, to use as a morgue and brought in additional embalmers from Chicago to help process the dead.²⁷

By the end of October 1918, the worst of the Camp's outbreak of flu had passed, and the medical department shifted its focus to the recovery of convalescent soldiers and minimizing the risk of re-infection or newly acquired infection in others. Recommendations held that soldiers should recover for five days in the infirmaries, which freed up space in the hospital, with continued separation of the recovering men from the barracks. Many were still coughing or were at risk of developing complications.²⁸

Undoubtedly, the physical strain of the nursing work during a pandemic such as this and the emotional strain of caring for their sick and dying classmates and mentors was significant. However, according to one writer, the nurses' work "proved so satisfactory that the head nurses frequently requested student assistance in the preference to that of the graduates. . .there is abundant evidence that the students rendered a definite service."²⁹

In December 1918, the *American Journal of Nursing* published an article promoting the Army School of Nursing to encourage new applicants to the school.

Reflecting on the students' performance, author Anna Jamme wrote about nurses as heroic soldiers:

The spirit in which they performed their work during these terrible days, when even a veteran nurse stood appalled, has won the commendation of the Commanding Officer in every camp in which they are located. It was certainly a very great test and may truly be said to be their baptism of fire. While thus loyally and courageously carrying on the duties before them, several of the students offered the supreme sacrifice,—their lives. A number suffered from influenza and safely recovered, but several were entered upon the honor roll, as truly as a soldier who gave his life on the field of battle; their names will be forever written on the roster of the Army School of Nursing.³⁰

CONCLUSION

Of the 40,678 troops stationed at Camp Grant, 10,739 contracted influenza, with 1,060 deaths and a case mortality rate of 9.87 percent.³¹ During the scourge, cooperation between military personnel and the newly arrived Army School of Nursing recruits was essential as military physicians and nursing leaders sought to care for the thousands who succumbed. Despite having minimal training in the art and practice of nursing, the Army School of Nursing students provided a valuable contribution to the US Army's response to the flu pandemic at Camp Grant and other Army bases. Colonel Michie, the commanding officer of the base hospital, recognized the students at Camp Grant through a special commendation and honored them by participating in their military drill and issuing the students special overcoats, leggings, and hats when the winter turned cold.³² As Camp Grant's Colonel Conner noted "...Both in the camp and in the base hospitals there were many evidences of intelligent forethought and prompt effective action in meeting a sudden and grave emergency."³³

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- ¹⁴ Conner, “Report of Special Inspection,” 1.
- ¹⁵ Camp Sanitary Inspector, “Special Sanitary Report,” 2.
- ¹⁶ Conner, “Report of Special Inspection,” 1–3.
- ¹⁷ Carole Byerly, “The U.S. Military and the Influenza Pandemic of 1918–1919,” *Public Health Reports*, 125, 3_suppl (2010). Available from: <https://doi.org/10.1177/00333549101250s311>. (Accessed July 6, 2019): 87.
- ¹⁸ Conner, “Report of Special Inspection,” 1.
- ¹⁹ Beverly (Smith) Williams, “Maury (Schwarz) Smith Biographical Sketch,” 2017, Box 1 Folder 001, Maury Schwarz Collection, ECBCNHI, UVA, 1.
- ²⁰ Ibid. The rapid influx of patients and sudden expansion of hospital beds severely exacerbated the pre-existing nursing shortage on military bases. When Annie Goodrich, Dean of the Army School of Nursing, was informed of the severe influenza emergency on the military bases, she took immediate action. Rather than removing students from the military bases, she sent a telegram to 500 accepted students, asking the students if they were willing to serve at the military camp despite the risk of exposure and overcrowded quarters. Ninety percent of the applicants responded, and were quickly assigned to the military camps for training and to assist. Most students were welcomed and immediately put to work, but at other camps such as Camp Beauregard, Louisiana, untrained student nurses were the last thing that the Army Medical Department officers wanted at the quarantined base hospital during an epidemic. Students were assigned to a camp, but were not allowed to report due to the quarantine, and told to go home. Eventually, the students were allowed on base and reported to the hospital for duty.
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