

How do pandemics impact different people in different ways?

Summary: In this lesson, you will look at primary source documents from five historic pandemics to investigate how pandemics impact people in disproportionate ways based on race, class, gender, ability, nationality, and age.

Note to teachers:

Content: *Class discussions on issues of identity can be difficult. You will know best how to approach this subject matter with your classroom dynamics. As an introduction to the concept of identities, we recommend starting with a classroom-building activity such as Identity Charts. This resource from Facing History and Ourselves walks you through the exercise: <https://www.facinghistory.org/resource-library/teaching-strategies/identity-charts>*

Reading level: *This topic is more document-heavy than the others in the pandemic packet. It may be difficult for students who are less comfortable with reading comprehension, especially if you're working with your class virtually.*

Vocabulary:

- **Disproportionate:** Something that is unfairly unequal or having a difference that is larger than would be expected logically
- **Vulnerable population:** A group of people that are at higher risk for bad outcomes based on a barrier they face due to their identity
- **Pandemic:** A disease that does not impact just one area but spreads across the whole world.
- **Virus:** A germ that can get inside your body and make you sick.
- **Immunity:** When your cells can fight off an infection or disease.
- **Vaccine:** A substance that helps a person develop immunity before they ever get sick.
- **Sanatorium:** A treatment facility for tuberculosis patients.

What is a pandemic?

It's likely that your life recently changed due to something silent and invisible—a pandemic. A **pandemic** is a disease that does not impact just one area but spreads across the whole world. Did you have to stay home from school? Stand six feet away from your friends? Wear a mask in a store?

Pandemic Primary Source Sets developed in collaboration by the Maine State Archives, Maine State Library, Maine State Museum, and Maine Historical Society

You may even have experienced sickness first-hand or known people who have been sick. Chances are, the coronavirus pandemic has impacted you, your family, and your neighbors. This has happened even though you can't see the virus itself.

The coronavirus is a **virus**, or a germ that can make you sick. A new virus can quickly infect a large number of people and lead to an *outbreak*. Scientists and leaders often have trouble understanding what causes a viral outbreak or how to stop it right away. As people recover from the virus, they may develop **immunity** which protects them from getting sick again. To fully stop a pandemic, a **vaccine** has to be made and distributed widely. **Even now, viruses that have caused historic pandemics are still active in parts of the world with less access to vaccines and other medical care.**

Pandemics come in different shapes and sizes depending on the type of virus. Sometimes, older people are most at risk. Sometimes it's more dangerous for children. Different pandemics affect people in different ways, like coughing, fever, and difficulty walking. Pandemics are dangerous because they cause many deaths in a short period of time. They stop either naturally or when people find a cure.

The further you go back in history, the more common outbreaks are. Advancements in medicine and cleanliness have made people healthier. Yet, you know from the changes in your life that pandemics can appear out of nowhere. Then people have to rush to solve mysteries about the virus's cause and cure.

Mainers have faced pandemics before. In this lesson, you'll investigate how pandemics impact different people in different ways. These differences are often shaped around identity categories such as race, gender, age, ability, nationality, and more. As you are introduced to the five pandemics, start to consider who might have been affected most severely by each pandemic and why.

Smallpox

The global smallpox pandemic lasted from approximately the 1500s to the 1800s. Smallpox began with a fever and rash. The rash and its following scabs were extremely contagious. The disease had a

strikingly high death rate of 30%. Those that survived were left with scars. Today, smallpox is completely eradicated, meaning it is gone from the world.

Smallpox spread through trade and travel between continents. This spread quickened as movement increased. The disease was brought to North America by European colonists and heavily impacted Indigenous peoples (Native Americans). Smallpox had recurring outbreaks over the 1600s and 1700s in Maine. Smallpox and other European diseases devastated Indigenous peoples between 1616 and 1619. This time period is known as the “Great Dying” because of the deaths caused by disease, warfare, famine, and slavery. One hundred years after European colonists first arrived in what is now Maine, nearly 80% of Wabanaki people had died.

The disproportionate impact of disease on Native populations was not accidental. There is evidence that some colonists, including high-ranking British generals, purposefully distributed infected blankets to Native communities. This is an early form of bioterrorism, or the deliberate spread of virus or other toxins to cause illness and death.

Colonialism created conditions that made disease a bigger threat to Wabanaki peoples. As Euro-American settlers took more and more land and resources, Wabanaki people had to deal with more poverty, hunger, and sickness. Native peoples’ devastating losses were often viewed by colonists as ‘clearing the way’ for American progress and expansion, or Manifest Destiny. The location and number of Native tribes in the United States today was shaped by these deaths. Even today, Native people still suffer health inequities at rates 2 to 3 times higher than the rest of the U.S. population.

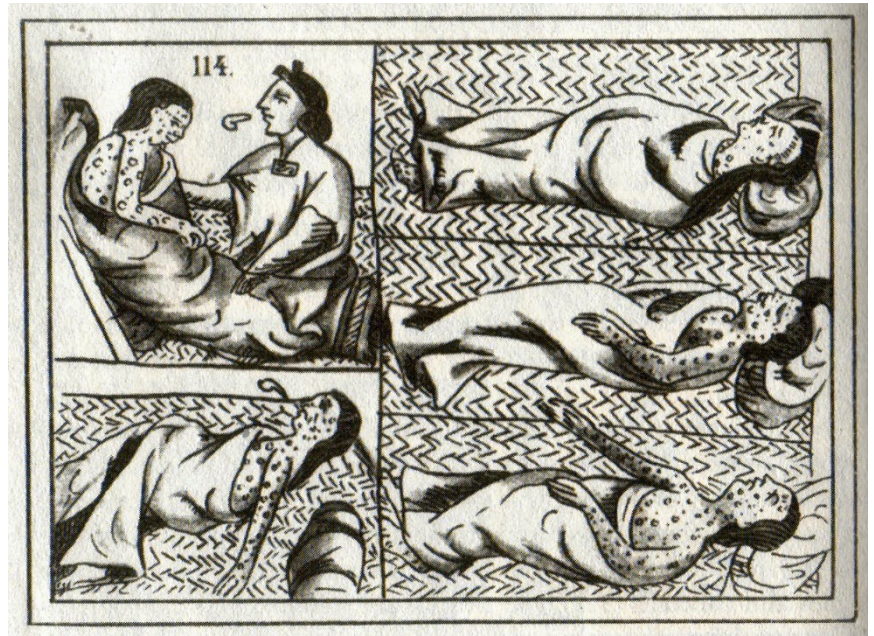


Image Source: Wikipedia. https://commons.wikimedia.org/wiki/File:Aztec_smallpox_victims.jpg

Smallpox also impacted colonists through regular outbreaks during the 18th century. During the Revolutionary War there was a bad smallpox outbreak. George Washington became an outspoken proponent of “inoculation,” or purposefully infecting people with a small amount of smallpox to give them immunity. The idea of inoculation came from Onesimus, an enslaved man in Boston who had been inoculated in Africa. Inoculation was not meant to harm citizens but to protect them via a crude and early form of vaccination. Sometimes it worked, and sometimes it led to serious illness or more spread. Inoculation remained a popular proactive treatment until an official smallpox vaccine (based on the technique of inoculation) was developed in 1798.

Tuberculosis

The global tuberculosis (TB) pandemic occurred during the 1800s and 1900s. When the bacteria that causes TB was discovered in 1882, one in seven Americans died from this virus. TB mainly attacks the lungs and can spread through shared air.

Tuberculosis patients develop bloody, mucousy coughs, chest pains, weakness, weight loss, fever, and night sweats.

TB broke out in Maine in the first half of the 1900s. Patients were treated away from their homes in places called “sanatoriums.” Sanatoriums were built in areas with lots of open space and fresh air, away from cities. Sanatoriums were also far away from other people so that patients didn’t get their friends and families sick. Staying in a sanatorium cost money and meant you couldn’t work to support your family, which placed a financial burden on poor and middle-class families who made up the bulk of patients.

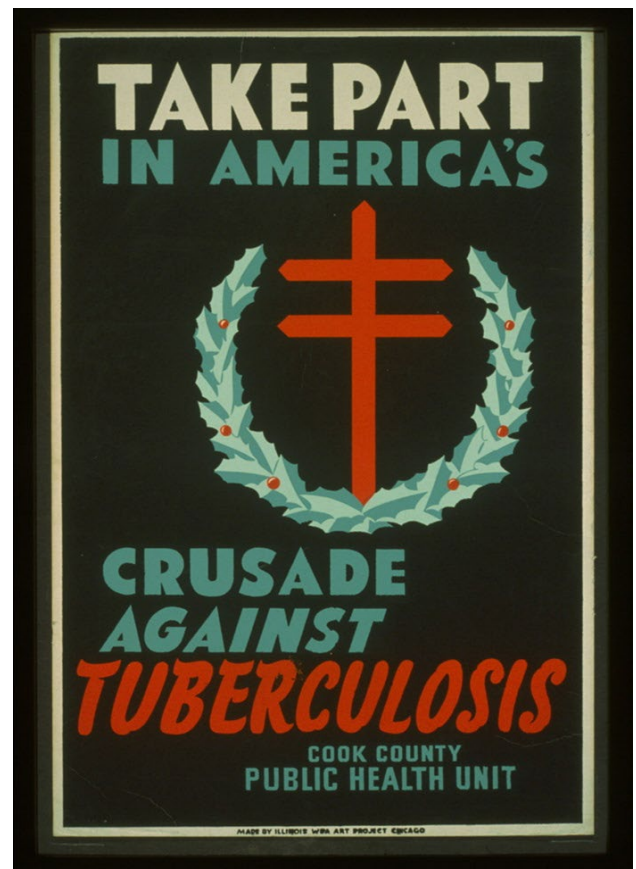


Image source: Library of Congress. <https://www.loc.gov/item/98508942/>

The Western Maine Sanatorium in Hebron opened in 1904 and treated thousands of tuberculosis patients over the course of weeks, months, and years. Patients received medical treatment such as fresh air, careful diets, and regulated

exercise. The sanatorium was originally privately-run, but was transferred to ownership by the Maine government in 1915 due to financial challenges. When the state government ran the facility, patient bills were limited to \$5 a week. Wealthier Mainers could afford to go to private sanatoriums that were more like resorts. The Western Maine Sanatorium closed in 1959 due to new drug treatments and a larger movement away from state-operated treatment institutions.

Polio

Polio is a recent pandemic—you might have a relative who remembers it. During the early 1900s, polio was a huge issue across the world. The virus is spread through infected human waste. It can cause permanent disability and even death. Some people who survived polio as children still have medical issues decades later. Polio mainly impacts children under the age of 15. This made the virus even scarier, especially to parents. Some people with polio-related disabilities used crutches, braces, and other supportive devices to help them walk.



Image source: Wikimedia Commons.
https://commons.wikimedia.org/wiki/File:Polio_physical_therapy.jpg

Polio existed long before the 1900s, but the largest polio outbreak happened in the more modern, cleaner world of the 1900s. With better sanitation, people were less likely to be exposed to polio as infants. Young babies no longer developed natural immunities when they still carried antibodies from their mothers. Rather, they were exposed to the virus as children. Then they were more vulnerable.

Polio spread quickly in the summer months through carriers without symptoms (children who looked and acted healthy). This caused a lot of fear amongst parents, because they didn't always know how to protect their children. Children's swimming time was limited because parents worried that their children would get the virus from public water,

like swimming pools. In some places, tanker trucks sprayed people with DDT, an insecticide known for its harmful environmental and human impacts, as a preventative polio treatment.

Polio reached Maine in 1916 and Mainers dealt with back-to-back outbreaks in the 1940s and 1950s. However, breakthrough vaccines developed in the 1950s and early 1960s helped stop the virus. Wealthier countries with better healthcare options were able to stop polio faster. As of 2016, polio is still active in Afghanistan and Pakistan. In modern Maine, polio survivors recently spoke out against a 2020 law that would have allowed more Maine people to choose not to get vaccinated.

One well-known polio survivor was Justin Dart, Jr., a leader of the international disability rights movement and a renowned human rights activist. He is widely recognized as the father of the Americans with Disabilities Act (ADA). The ADA is a 1990 civil rights law that prohibits discrimination based on disability, and still has a huge impact on life today.

Influenza

The influenza pandemic, which is often referred to as the “Spanish flu,” was the most severe pandemic in recent history. Contrary to what its name suggests, the Spanish flu outbreak did not originate in Spain. It got the nickname because Spanish newspapers were the first to honestly report about the sickness. Other countries were heavily involved in World War I and didn’t want to show signs of weakness.

The outbreak lasted only one and a half years, from 1918 to 1920, but it infected approximately a third of the world’s population. Like during the coronavirus pandemic, people wore masks and public buildings like schools were closed.

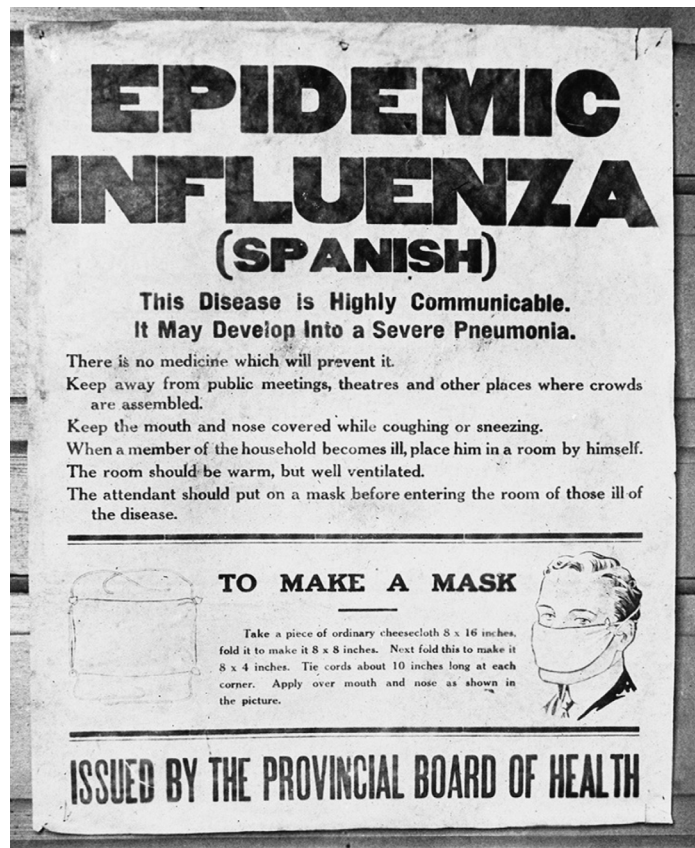


Image source: Wikimedia Commons.
<https://upload.wikimedia.org/wikipedia/commons/6/61/SpanishFluPosterAlberta.png>

The Spanish flu came in waves. The first of three waves was milder and mainly impacted already vulnerable people like the elderly. Others developed normal flu symptoms and recovered in a few days. However, mutations in the virus made the second and third waves extremely deadly even to

healthy, young people. Patients died within hours or days of developing symptoms--symptoms that included blue skin and suffocation from fluid in lungs.

The Spanish flu heavily impacted military personnel fighting in World War I. This was certainly the case for Mainers. Half of the Mainers that died during World War I died from influenza rather than combat. Curiously, there is little photographic evidence of Spanish flu in Maine. It seems that government officials did not want to document the virus's local toll.

Each of these pandemics had disproportionate impacts on vulnerable populations. As you examine the following six primary sources, ask yourself how people with less race, class, gender, ability, nationality, or age privilege were more likely to get sick or shoulder additional virus-related burdens.

The Lesson:

1. Students choose one or more of the primary sources and complete an Analysis Worksheet for each one, using only information from the source itself. If they are not ready for analysis and writing, this can be completed as a class or small group.
2. Discuss the sources as a class. ***What did you learn from them? What questions do you have? How do the sources connect to the theme?***
3. Present source label information to the students. ***Were you surprised by what you learned?***
4. Optional: use the recommended activity prompts and reflection questions for further discussion.

Optional Activity:

- Start an investigation as a class! How does coronavirus impact different kinds of people in different ways? Without doing any research, write down all the reasons you can think of.
- Now start looking for some news articles that you can use to learn more.

- One example (students or teachers can pick their own focus), if you want to investigate how race matters during pandemics:
 - Look at the [COVID racial data tracker](https://covidtracking.com/race). What patterns do you notice and why do you think those patterns are there?
 - <https://covidtracking.com/race>
 - Look at the [Maine racial data tracker](https://covidtracking.com/race/dashboard#state-me). What patterns do you notice here compared to the national average?
 - <https://covidtracking.com/race/dashboard#state-me>
 - Talk about factors such as access to medical treatment, crowded living and working environments, and financial stability.
 - Supplementary resources:
 - [The racial impacts of COVID-19: Regularly updated news articles](#)
 - [Maine has nation's worst COVID racial disparity](#)

Reflection Questions:

- How did your identity shape your experience of the coronavirus pandemic?
- Do any of the issues you see in the sources remind you of things people deal with today?
- How does money play a role in health care? If you can, think of an example from the sources and from life today.
- What are some moral questions that come up in the letter about the man stopping a group of immigrants from Quebec? How do pandemics affect immigrants and refugees?
- Think about what it would be like to use Alice's crutches, and to wear that leg brace every day for the rest of your life. What are some ways that pandemics are different for children than for adults?
- Why do you think the insurance company chose a woman instead of a man in the image of the sick bed?
- If women were historically the primary caregivers, how would pandemics affect them differently? Is it still the same today?