

A Century of Pandemics: The Spanish Flu, COVID-19, and the Splintering of the Modern Time Regime

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Before COVID-19, health crises were treated as antique threats or as ongoing risks for peripheral populations of the world that existed in “premodern” conditions. The COVID-19 pandemic, however, destabilized this understanding of pandemics in the United States. This article examines the *New York Times* (NYT) coverage of the coronavirus pandemic in its first year to understand how the newspaper engaged with ideas of modernity and temporality—particularly when alluding to the 1918 influenza pandemic within the evolving context of COVID-19. The discussion that emerges from putting these two pandemics in conversation, and from a subsequent qualitative thematic analysis of the contested meanings of health crises in the 21st century, will ultimately trace the ways in which some NYT coverage of the COVID-19 pandemic was doubly concerned with reintegrating the earlier pandemic into collective memory and reckoning with the present-day failures of modernity. The article concludes with a discussion on how the linkages between global health outcomes and modernity can illuminate the processes through which emergent public crises help inscribe new meaning to past crises, specifically within news media.

Keywords: pandemics, collective memory, modernity, COVID-19, public health, journalism and media

New Pandemic Horizons in Collective Memory

Before 2020, pandemics were assumed to belong to a distant past by a public that had come to rely on the accelerating pace of scientific and technological developments, overseen by modernity, as solutions to a myriad of crises afflicting the Western world. Though outbreaks like human immunodeficiency virus (HIV) and Ebola destabilized the collective sense of wellness the Western world had grown to expect from the 21st century, over time, these diseases were relegated to places and within “othered” bodies that were frozen in time or bodies marked as “deviant” (Bashford, 1998; Briggs, 2005; Lupton, 2022; Sontag, 2001; Treichler, 1999). Often disease was also found within Global South spaces, defined by their inability to re-create an idea of modernity that took its cues from Europe and North America (Irons, 2020; Lupton, 2022; Sastry & Dutta, 2011, 2017). It

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Date submitted: 2023-10-05

¹ I would like to thank Dr. Barbie Zelizer and Dr. Aswin Punathambekar for their generous feedback on earlier versions of this article.

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was believed that it was only in these premodern or oriental spaces (Mason, 2015; Varlik, 2020) that diseases could emerge and thrive indefinitely. Until recently, it appeared that these were the only narratives (Rosenberg, 1989; Wald, 2008) afforded to us when collectively reflecting on diseases: Health disasters were either an antique threat or were ongoing risks only for certain peripheral or racialized populations.

Yet the COVID-19 pandemic destabilized this naive understanding of the relationship between peripheral global spaces and illness. Not only are pandemics decisively *not* a thing of the past, but they can also harm populations that believed they were inured from them (Irons, 2020). The dissonance certain populations experience when they understand medical risks to be incommensurate with their lived experiences in the 21st century (see Conrad & Wujastyk, 2017) creates the sense that they are removed from the experiences of their forebearers and undermines their sense of equilibrium (Charters & McKay, 2020). On the one hand, this dissonance is spatially rendered. This explains why some diseases can persist in places in the world that are only afforded a partial—often pitying—glance. On the other hand, this dissonance is *temporal*: Before COVID-19, there was a deep cultural impulse to break ranks with a “past” in which humans were victimized by their ignorance of advanced science.

Thinking of the past always as *distant* allowed for certain memories, like that of the 1918 pandemic, to lose their potential as a possible anchor that would have helped anticipate COVID-19. That the 1918 pandemic happened only in the last century made it irreconcilable with the freedom from biomedical risks Western society had come to expect. Moreover, society in the 21st century was already oversaturated with the man-made risks it was willing to build responses around, such as terrorism, immigration, political polarization, White nationalism, and fascism.

However, in the early months of the COVID-19 pandemic, in both Europe and North America, there was renewed interest in the forgotten legacies of the 1918 pandemic, and subsequently, much attention was given to resuscitating this “lost” memory to help navigate the uncertainty of the new pandemic (Erl, 2020; Lachenal & Thomas, 2020). The 1918 flu, known colloquially as the Spanish flu, occurred in three waves between 1918 and 1919, in that time killing 50 million to 100 million people, possibly more than the two Great Wars combined (Crosby, 2003; Erl, 2020; Johnson & Mueller, 2002; Spinney, 2017). Yet in the United States, the Spanish flu’s devastation was only revisited publicly during the COVID-19 pandemic. In the clamor for answers about the severity of COVID-19, there was a turn to the earlier pandemic.

This article traces the emergence and operationalization of the 1918 pandemic in the *New York Times* (NYT) coverage of COVID-19 to illuminate how it destabilizes what Assmann (2020) refers to as, the “Modern Time Regime” (MTR). Assmann (2020) describes the MTR as a temporal orientation that diverged from the “premodern’s” more fluid and divine sense of time and its integrative approach to the present, past, and future:

The time regime of the modern broke away from this traditional form of temporal ordering in that it no longer took its bearing from the past, but from the future [, which] revolutionized the cultural temporal order and restructured its commitment from the old to the new, from the known to the unknown, and from “what was” to what was currently becoming or yet to come. (Assmann, 2020, p. 10)

Under the MTR, commemorating the past did not mean grappling with it, rather it was about giving a particular meaning to present conditions *or* giving some credence to a particular vision of the future. The MTR—for better or worse and despite challenges that originate from modernity’s formerly peripheral subjects and their conceptualization of haunting pasts (Bevernage, 2012)—still often dictates the way we *experience* events collectively, particularly through the news. Thus, engaging with the MTR’s complexities in the context of a pandemic may illuminate how its logics continue to structure mainstream news outlets’ engagement with the past, which may impact how future global crises are discursively constructed.

The NYT is the second-largest newspaper in the United States by circulation, with more than 9 million digital subscribers (Mullin, 2023). While it comes second to the financial-minded *Wall Street Journal* in circulation, it has a much longer history of providing rigorous and informed news content about society, culture, and national and global affairs. To date, it has won the most Pulitzers of all American newspapers and remains number one in overall reach among U.S. opinion leaders (Agility PR Solutions, 2022). While past studies have discussed the relevant “crisis” frames American newspapers used to interpret and inform their readers about the pandemic in the first year (Ali & Sherman-Morris, 2023; Basch, Kecojevic, & Wagner, 2020), less has been written about the role of a revived traumatic memory in the pandemic’s early interpretation, particularly for a major national and global culture-oriented newspaper like the NYT. Engaging with the news outlet’s early coverage of the pandemic presents an opportunity to understand how the pandemic was narratively constructed vis-a-vis the 1918 influenza pandemic by this prominent publication with significant cultural cache in the United States and globally.

This article’s close engagement with the NYT contributes to past and emerging debates about the media, collective memory, and public health crises while recognizing and emphasizing how theory must exist alongside the urgent social and medical demands (Treichler, 1999) the COVID-19 pandemic exposed. This article also supports ongoing scholarship about the “performative and representational work of the media” during the COVID-19 pandemic (Frosh & Georgiou, 2022) while engaging more generally with debates about the narrativization of diseases (Rosenberg, 1989; Sontag, 2001; Wald, 2008) particularly within public health and journalism. Finally, this article addresses MTR’s continued influence on the U.S. media landscape and its impact on how crises are collectively understood.

Researchers interested in previous theoretical and empirical work about the media’s role in representing emergent diseases will find a nuanced body of scholarship. I build on prior scholars like Rosenberg (1989), for example, who stressed the dramaturgical components that cultivate a disease’s narratability. His critical essay, “What is an Epidemic?” serves as a provocation for researchers to articulate how narratives of epidemics invest in certain plots, settings, and actors to weave together a story full of “revelatory” tension and individual and collective crises before ultimately “drift[ing] toward closure” (Rosenberg, 1989, p. 2). Similarly, Wald (2008) analyzes the media context of HIV—in addition to the early 2000s’ severe acute respiratory syndrome (SARS) outbreak in East Asia—to understand how the fictional, journalistic, and scientific manifestations of the “outbreak” narrative influence how health information spreads and impacts stigmatized groups.

More recent scholarship has focused on the ways COVID-19 was operationalized in diverse media contexts. Aiello, Kennedy, Anderson, and Mørk Røstvik (2022) discuss the way commonplace images of the

pandemic represent and mediate the pandemic across visual media in the United Kingdom. Steir-Livny (2022) analyzes how Holocaust comparisons propagated in the Israeli media became a “frame of reference” for understanding and dealing with the pandemic. Milutinović (2021) argues that competing desires by Serbian political elites, to both minimize health concerns *and* promote their agendas, led to inconsistencies and a lack of narrative coherence in media discourse circulated by state officials. Elsewhere, Bonhomme and Alfaro (2022) discuss how old associations between immigrants and disease were stoked in Chile as an easy framework for understanding the evolving COVID-19 crisis. The casual relationship between race and historical narratives of disease is also revisited by Varlık (2020) early in the pandemic; she coins the phrase “epidemiological orientalism” to capture the salience and continued investment in “othering” groups blamed for spreading COVID-19. Meanwhile, Geissler and Prince (2020) note that in the context of Kenya, the tangible traces of past epidemics, “their overlapping, sometimes fleeting and contradictory, often unexpected presence” (p. 254), helped anchor the “present” threat of COVID-19.

While my work contributes another lens for understanding how particular narratives are operationalized during emergent crises, my analysis specifically grapples with the role a revived traumatic event was assigned by a major U.S. news outlet (NYT). I argue that the recovered memory (Elsaesser, 2001) of the 1918 pandemic provided COVID-19 with a “reference” event to help collectively make *sense* of the severity of the pandemic. This explains why the 1918 pandemic emerged in public discourse as an explanatory tool when it did.

In the following sections, I discuss my method, data, and themes that emerged inductively from the data. In the final section, I examine how the linkage between global health outcomes and modernity can illuminate the processes through which emergent public crises inscribe new meanings to past crises—specifically within news media. Moreover, I discuss how the NYT coverage of the 2020 pandemic exemplifies the news media’s ability to substantiate “creative interactions between past and future in the coverage of current events” (Tenenboim-Weinblatt, 2013, p. 107), which can potentially lead to critical and lifesaving connections between past experiences and present crises. Finally, I discuss the utility of investing in premediation (Erll, 2017) structures within the news media that reflect the relevance of current public crises for future disasters.

Method

I collected NYT articles from the first year of the pandemic, as this seemed to be the time frame in which the legacies (or lack thereof) of the 1918 pandemic were compellingly contended with in the news outlet. The articles were found and selected via the NYT online search database, using pertinent search criteria. An initial search for digital news articles that included the keywords “COVID-19,” and “1918 flu” that appeared within the time frame between January 1, 2020, and December 31, 2020, yielded 305 articles, which included the preselected categories of “Arts,” “Books,” “Briefings,” “Business,” “Health,” “New York,” “Opinion,” “TheUpshot,” “U.S.” and “World.”

While most of the 305 articles that referenced the 1918 flu did so to make sense of the emerging health crisis, because the online search database produced articles that mentioned *any* of the individual words of the search regardless of whether they appeared together in the article or not, I used purposive

sampling to further select a subset of 40 articles, based on their headlines, bylines, and when necessary the content of the articles, that closely and more expansively excavated the relationship between both pandemics. I did this specifically to highlight how the relationship between both pandemics was constructed. In the end, the 40 articles ($n = 40$) that made up the sample were chosen because they illustratively engaged with the COVID-19 pandemic while referencing the earlier pandemic from a century ago. It is also worth noting that the chosen NYT articles were either digital versions of print articles, usually published a day later than their original versions and under slightly different headlines, or digital-only NYT content.

A final important caveat is that my analysis of the NYT is not meant to be representative of the complex COVID-19 media landscape during the first year of the pandemic. Rather, my analysis is meant to serve as a “revelatory case” (Yin, 2009), from one prominent newspaper, of what was then an evolving conversation about the relationship between the 1918 pandemic and the COVID-19 pandemic amidst widespread uncertainty that put into relief the fractures within the MTR (Assmann, 2020). This article, which has emerged from putting these two pandemics in conversation and from the subsequent qualitative thematic analysis of the contested meanings of health crises in the 21st century, will ultimately trace the ways in which some coverage of the COVID-19 pandemic was doubly concerned with reintegrating the past pandemic into collective memory and reckoning with the present-day failures of modernity.

Data and Analysis

Most of the NYT articles that made up the sample ($n = 40$) were published between March and August 2020. Overall, themes emerged inductively from the articles, which resulted in the data being grouped into four thematic categories. Articles that fall under the first theme mourned the collective failure to have adequately commemorated the 1918 pandemic and reflected on the impact this failure could have on the COVID-19 crisis. Coverage that comes under the second theme drew connections between the past and the present to help approximate the uncertain toll of the COVID-19 pandemic. Finally, articles that fall under the third theme reflected on the experiential divide between the former and current pandemics, while coverage that comes under the fourth thematic category used the newly resuscitated memory of the previous pandemic to speculate on an uncertain future that puts to the test all the modern assumptions of the past century. These categories were not discrete, and often, multiple themes were present within the same article.

A Time of Mourning for Two Pandemics

Articles under the first theme connect the lack of commemoration of the 1918 pandemic to the nation’s unpreparedness in the face of a new pandemic. As an opinion article from February 29 acknowledges, public awareness of the 1918 pandemic lagged behind expert knowledge:

The Spanish flu epidemic of 1918 which killed at least 50 million people worldwide, has been the benchmark for pandemics ever since. For decades public health experts have called for preparations for another big one—yet adequate preparations were never made. (Kristof, 2020a, para. 5)

The article concludes that, because of this oversight, “the United States and the world are unready for a pandemic” (Kristof, 2020a, para. 9). Another opinion article from March 12 suggests that the nation was unprepared to fully contend with the horrors it had experienced during the previous pandemic, which stymied commemoration efforts: “Roughly 675,000 Americans lost their lives to the flu [. . .] and yet it left almost no conscious cultural mark. Perhaps it’s because people didn’t like who they had become. It was a shameful memory and therefore suppressed” (Brooks, 2020, para. 13).

A few weeks later, just after consensus was reached about the coronavirus’s designation as a pandemic, the amnesia surrounding the 1918 pandemic was again contended with. One article from April 4, for example, concludes that even in a historical city like Philadelphia, where “historical markers throughout the city commemorate assorted people, places, and moments [. . .] there is no public marker memorializing the 1918 epidemic. Too painful perhaps. Best forgotten” (Barry & Dickerson, 2020, para. 28). Meanwhile another article from May 14 argues that “soon after the slaughter ended and for decades after, the pandemic somehow vanished from the public imagination. [. . .] The mass amnesia helps explain the lack of preparedness” (Segal, 2020, para. 9). Even in concrete moments when the 1918 pandemic was celebrated, for example, for helping to usher in the federal government’s pandemic preparation plan under the Bush and then Obama administration, it is still argued in another article from April 22 that the federal “victory was little noticed outside of public health circles” (Lipton & Steinhauer, 2020, para. 54). Yet another article from May 29 suggests that though the 1918 flu pandemic should be a “reasonable place to start” to understand the current moment, “we don’t know enough to shed much light on current circumstances” (Shiller, 2020, para. 5).

Interestingly, some articles draw stark connections between the past and the present pandemic, in the process, conveying a sort of belated mourning for the previously inaccessible memory of the 1918 pandemic. For example, an article from March 13 acknowledges that despite the temporal distance between both pandemics, the emotions remain the same: “With nothing to offer the sick but palliative care, influenza was as frightening as the COVID-19 coronavirus is today” (Eblen, 2020, para. 4). An article from April 2 emphasizes the emotional resonances between both pandemics further: “Today, looking back at the response to the pandemic of a century ago from the street-level vantage of shelter-in-place apartments is to watch in many ways our own current experience with a sepia tint” (Wilson, 2020, para. 5).

Other articles draw parallels between both time periods with the help of historical figures. An opinion article from March 20, for example, praises Philadelphia nuns from 1918 who rose to the challenge of caring for the sick during a particularly virulent fall:

While most people have no reason to fear the coronavirus, we have a responsibility as a society to protect and care for those who do have reason to fear it. The sisters’ quiet determined selflessness is what is needed now, and what we will need more of in the weeks and months to come. (Bense, 2020, para. 11)

Some articles draw parallels between political events instead. In one news article from April 28, similarities are drawn between the role the 1918 flu played in the women’s suffrage movement and the role the coronavirus pandemic may play in the fall 2020 election: “A century later, as the coronavirus pandemic

brings America to a standstill again just as the country was gearing up for celebrations to mark the amendment's centennial, the suffragists' near-miss provides us with valuable lessons" (Gupta, 2020, para. 34). Another news article draws connections between political divisions that transcend time periods, such as the politicization of masks: "But as they have now, the masks also stoked political division. Then, as now, medical authorities urged the wearing of masks to help slow the spread of disease. And then, as now, some people resisted" (Hauser, 2020, para. 2). These articles provide space to perform a belated mourning for the prior pandemic that was formerly forgotten and for the ongoing pandemic that was driving the nation to an unprecedented standstill.

Lessons From a Recovered Past

Another theme is the desire to understand the ways in which the current pandemic could behave like the previous one. One article from March 13, for example, reports on the estimated deaths the United States could expect from the COVID-19 virus based on 1918 pandemic data (Fink, 2020). This suggests that there was an early impulse to tackle the widespread level of uncertainty, unseen in almost a century, by using the previous pandemic to approximate the behavior of the current pandemic.

Another example reveals an attempt to predict the pandemic's behavior using weather patterns:

If, as in 1918, susceptibility proves more important than seasonal influences, hot weather will not give as much relief as hoped for. By the same token, that would mean the expected seasonal surge when colder weather arrives might not be as large as feared. (Barry, 2020, para. 10)

A news article from May 3, on the other hand, using data from the 1918 pandemic, suggests that the nation could cautiously expect the current pandemic to come in waves and affect different countries disproportionately in each new wave. (Beech, Rubin, Kurmanayev, & Maclean, 2020).

Yet another article from May 11 suggests that integrating some of the most important lessons from the 1918 flu pandemic into the present intervention strategy would be necessary to successfully control the coronavirus. This article argues that in 1918, while "lockdown measures had 'clear success' in lowering death rates, they ultimately failed to curb overall mortality in most cities because they were lifted prematurely" (McNeil, 2020b, para. 65). It concludes that the current pandemic interventions should in contrast, remain "for substantially longer than a few weeks" to provide a better chance of saving lives (McNeil, 2020b, para. 68).

Attempts to predict the pandemic's future evolution were not only found in health-related reflections but also in economy-oriented articles. In one interview-style opinion article featuring prominent economist Paul Krugman, the 1918 pandemic is used to estimate the uncertain economic trajectory of the next few months. In the article, Krugman argues that "everything hinges on the epidemiology" (Bokat-Lindell, 2020, para. 15). Krugman continues, "In the 1918 influenza outbreak, there was a first wave that receded and then a monstrous second wave, and that unfortunately does look like a real possibility for us" (Bokat-Lindell, 2020, para 15). It is noted that in this scenario, the economic repercussions would be severe.

However, elsewhere in the article, the past provides some cautious optimism as well. Krugman states, "If we're taking the 1918 flu as our baseline, the economy did in fact come roaring back. It was nothing like the sustained depressed economy after 2008" (Bokat-Lindell, 2020, para. 24).

A later opinion article, this one from September 8, uses the 1918 flu pandemic as a cautionary tale to bolster action. It warns that "the deadliest month in American history was in October during a pandemic" (Interlandi, 2020, para. 1), which instills an anxiety about what the near future holds for the nation from the onset. The article then describes why the coming months have increasingly made "armchair epidemiologists" nervous: "Coronaviruses have little in common with influenza viruses [. . .] But we're grasping for comparisons because we are living in a fog right now" (Interlandi, 2020, para. 3). It is this fog that appears to drive the impulse to predict, in the article, how the following year of the pandemic will evolve. These examples represent attempts to gain some control over a social world thrown into uncertainty and crisis by COVID-19.

"A Time of Incomparable Devastation": The Experiential Gap Between 1918 and 2020

Some articles highlight the experiential gap between life at the beginning of the 20th century and life in 2020. Many of these articles were written in March 2020 perhaps because the true extent of the pandemic's devastation had not yet become apparent. One article, for example, argues that while the current fear of the coronavirus is like that of the 1918 influenza, the "medical reality is quite different" (Kolata, 2020, para. 5). The article further argues that because "the new coronavirus tends to kill older people and those with underlying medical conditions [. . .] it will have far less effect, if any on life expectancy" (Kolata, 2020, para. 12). This particularly deviates from the experience with the 1918 pandemic, which the article describes as a "disaster for life expectancy" (Kolata, 2020, para. 11). The article further states, "In 1918, the world was a very different place [. . .]. Today, however, researchers not only know how to isolate a virus but can find its genetic sequence, test antiviral drugs and develop a vaccine" (Kolata, 2020, para. 7).

This sentiment is repeated across news and opinion articles throughout March 2020, even articles that ostensibly cater to readers beyond the United States, such as this one from March 20, which details Canada's experiences with the 1918 flu pandemic:

There are many differences between the Spanish flu and the current coronavirus. They include the previous pandemic's greater lethality as well as enormous advances in medicine, particularly the development of antibiotics. Many Spanish flu victims were actually killed by secondary bacterial infections that, for the most part, can be treated today. (Austen, 2020, para. 12)

An opinion article from the same day, in another comparison with the 1918 pandemic, emphasizes the "greatly improved medical, communication and organizational resources available for dealing with such a crisis" (Wallace, 2020, para. 26). In yet another instance from March 22, it is not only the different medical realities between the past and present pandemics that are emphasized but also the "technological and political" differences that mark each pandemic as belonging to "completely different" historical periods

(Searcey, 2020, para. 3). A March 28 article further argues that not only are the experiences of the 1918 pandemic unavailable to us but the devastation of the earlier pandemic may even be incomprehensible to us as well:

For most of us, it is almost impossible to comprehend the ferocity and regularity with which life was upended during the first half of the 20th century. Plague and conflict emerged on an epic scale again and again. Loss and restriction were routine; disaster was its own season. (Bellafante, 2020, para. 1)

Nevertheless, by the end of the first pandemic summer, this sentiment appeared to have evolved. An article from August 13 reports that "in March and April, the overall death rate was just 30 percent lower than during the height of the [1918] pandemic in [NY] city, despite modern medical advances" (Mandavilli, 2020, para. 2). The article argues further that despite "many people liken[ing] covid-19 to seasonal influenza while regarding the 1918 flu pandemic as a time of incomparable devastation" (Mandavilli, 2020, para 3), the similarities between both historical moments are especially troubling "given the enormous leaps in medicine over the past century" (Mandavilli, 2020, para. 19).

"Pandemic Bookends" and the Loss of Modern Certainties

Finally, articles that fall within the final theme assess how the newly resuscitated memory of the 1918 pandemic challenged assumptions about advancement in the 21st century. In an early photojournalistic piece from March 20, the 1918 flu is described as "the most relevant antecedent to the current circumstance" (Cowell, 2020, para. 11), another homage to the frightening similarities between both pandemics. The article ends by accentuating this point rhetorically and visually (see Figures 1 and 2) in a move that reveals the cultural disorientation that the beginning of the COVID-19 pandemic left in its wake:

Globalization may have bound humanity in uneven chains of trade and profit, but it did not dissolve the primal fear of uncontrolled pestilence that has burrowed into human consciousness over millennia. The alarms and lockdowns over coronavirus have reversed the West's perceptions of its own place in history. (Cowell, 2020, para. 42)

Time can move backward unsuspectingly despite popular belief, the article suggests; we can collectively revisit similar dilemmas and tragedies despite the chasm of differences that exist between our current era and the past.

Moreover, Figures 1 and 2 are striking because they visually connect the ways in which history can be an arrow as much as it can be a boomerang. The image is a stark reminder that the United States was combatting two crises simultaneously: The crisis of a pandemic and the crisis of modern uncertainty.



Figure 1. Emergency hospital in Kansas during the 1918 flu pandemic. Source: Cowell (2020).



Figure 2. A temporary hospital for coronavirus patients in Wuhan, China, in February 2020. Source: Cowell (2020).

In another instance, this uncertainty is combined with a disbelief that America was one of the “epicenters” of the crisis:

The United States, which should have been ready, was not. This country has an unsurpassed medical system supported by trillions of dollars from insurers, medicare, and Medicaid. Armies of doctors transplant hearts and cure cancer. The public health system [. . .] kills mosquitos and traces the contacts of people with sexually transmitted diseases. It has been outmatched by the pandemic. (McNeil, 2020a, para. 17)

Other articles, over the next two months, attempt to anticipate the degree to which the world may change under conditions outside of any given power’s control. While the headline, “Will a Pandemic Shatter the Perception of American Exceptionalism?” (Schuessler, 2020) from an article dated April 25 suggests that some seismic changes may be in store for the country in a post-pandemic world, the article also discusses how the earlier pandemic, along with the world wars, “usher[ed] in the American century when the country came out of its isolation to dominate the globe” (Schuessler, 2020, para. 34).

Another opinion article from May 3 suggests that rather than change “everything,” the 2020 pandemic may just accelerate changes already in progress like the 1918 pandemic did:

So did [the 1918 pandemic] change everything? Possibly it simply accelerated trends that were already underway. And the same may be true today. The coronavirus hit at a time when the world was already turning inward largely in reaction to the global financial crisis of 2008. Nations have been erecting barriers to the free flow of people, money and goods even as the flow of internet data has continued to rise rapidly. (Sharma, 2020, para. 1–2)

Other sections from different articles fixate on the idea of “history repeating itself.” In an obituary dated April 24, the NYT profiles twins who died a century apart, in each pandemic: “Aware of the irony of dying during a pandemic, he said history repeats itself. A family member called the brothers ‘pandemic bookends’” (Seelye, 2020, para. 15). Here, the idea of a bookend interrupts the narrative of the last 100 years. The deaths, a century apart, recalibrate the parameters of the 20th and 21st centuries—with the earlier century spilling into the other and suspending assumptions about future progress.

This lack of confidence about the future in turn fuels an anxiety about America’s place during an uncertain historical period, particularly under a leader who lacked the credibility to successfully steer the country through the COVID-19 crisis. As one article describes it,

Trump still hasn’t embraced the basic step public health officials sought more than a century ago during the 1918 pandemic of encouraging mask-wearing. Instead, he seems to have surrendered to the virus at least until a vaccine is available—while encouraging delusions among his supporters. (Kristof, 2020b, para. 20)

Trump’s lack of credibility becomes a warning: If the nation chooses to ignore what history has shown is possible despite advancement, then overblown convictions about assumed safety will severely hamper the nation’s ability to act. Moreover, because Donald Trump at the time was *the* representative of America—as a symbol of the “free world” as well as a proxy for all the country’s ongoing sources of shame in the form of racism, xenophobia, and misogyny—this became a moment in which all the historical threads and omissions that helped build the nation intersected and overlapped.

There are also articles that pit both time periods against each other; in some coverage, the previous pandemic is understood to have ushered in America’s modern dominance, while the current pandemic is understood to threaten it:

The Spanish Flu killed 675,000 Americans between 1918 and 1919 but the economic hit was short-lived, and the outbreak did not slow the nation’s push for hemispheric dominance. Whether any existing society is close to collapsing depends on where it falls on the curve of diminishing returns. There’s no doubt that we’re further along that curve: the United States hardly feels like a confident empire on the rise these days. But how far along are we? (Ehrenreich, 2020, para. 20)

This type of coverage forces us to sit with a time frame that suggests progress is finite. Yet another article from December 24, uses a succinct quote from Roi Mandel, the head of research at MyHeritage, to capture how the pandemic has flattened time: “So many things are exactly the same, even 102 years later, even after science has made such huge progress” (Hsu, 2020, para. 4). These last two articles question the

relationship with the past—and the characterization of it as a constant backdrop in which new successes and triumphs unfold. A June 12 article, perhaps, captures the effect of this best: “Battered by a health crisis [. . .] many voters are mourning the past, worried about the present and fearful of what comes next” (Lerer & Umhoefer, 2020).

Discussion

The NYT articles provide a number of complex insights. First, the temporal distance between 1918 and 2020 increasingly refracts as some articles grapple with the realization that both pandemics are more alike than anticipated. Thus, the COVID-19 pandemic provides the context to fully grapple with the suspended legacies of the earlier pandemic. Second, some articles reveal that there is a need to reach into the past and use the experiences of the 1918 pandemic as a reference point to abate the growing fears about COVID-19, thereby providing some continuity between the past and present. The 1918 pandemic also appears as a cautionary shadow that guides the insistence shown by some NYT articles, particularly in the first few months of 2020, to put COVID-19 into the popular lexicon, lest the omissions from the past are repeated. Allusions to the medical advancements of recent years, however, further entrench the temporal distance and the experiential disconnect between both pandemics. In reminding society about the technological and medical gaps existing between the two pandemics, and in alluding to the 1918 pandemic as more “devastating,” this type of coverage assuages the anxiety of watching COVID-19 unfold daily. Lastly, some coverage suggests that there were some anxieties related to how the pandemic would challenge the global order and the nation’s beliefs about its own exceptionalism.

One commonality across the articles is the sense that COVID-19 fatalities should not be comparable with that of the earlier pandemic, which occurred before the advent of many of the medical advancements that defined the modern era. As a result of this cultural disbelief, there is a sort of double, concurrent mourning happening once again. On one hand, there is the collective, social mourning that was inaccessible to the country because of the failure to memorialize the earlier pandemic; on the other hand, there is the more visceral, material mourning for how modernity, its promises, and its advancements (whether technological or medical) fall short in the face of a global health crisis.

This type of coverage specifically functioned as a moment of “reflexive world-disclosure” (Frosh & Georgiou, 2022), otherwise known as a collective revelatory moment in which the “background conditions by which our worlds are pre-interpreted and made intelligible are exposed” (p. 239). The anxiety about a future pandemic world revealed not only our society’s interpretive gaps but also all that these omissions may have cost us during the pandemic. The absence of 1918’s impact in our collective consciousness becomes glaring under this new awareness of the vulnerabilities that persist despite advancement. It is an awareness that reveals precisely how the inability to hold the past in all its conflicting forms (see Shils, 1981) leaves us vulnerable to health crises at precisely the moments we stand to lose the most. As Erell (2020) explains, “what is remembered in culture constitutes the space of experience, which in turn shapes what can be imagined as possible futures, ‘horizon of expectation’. But the Spanish Flu was not a major item of the commemorative cycle” (p. 864). Consequently, my engagement with the NYT coverage demonstrates the need to give weight to irretrievable events that may aid in the navigation of future crises.

The story of the 20th century is often told in terms of progress in the West—in the form of rapid industrialization, decolonization, the rise of the middle class, and the triumph of capitalism, over communism, as the dominant organizing economic framework. This century of progress, as the story goes, was only threatened by the Great Wars, though the devastation of the wars themselves was a feature of modernity and thus was not necessarily anachronistic with the times. Progress, innovation, the rise of democracy as the template of political stability, and the global spread of capitalism became the story of the 20th century, painted in broad strokes. Here we find a suggestive incentive for why an event like the 1918 flu pandemic, an event that bore traces of the “premodern” and revealed the ecological and medical vulnerabilities inherent to human existence even in the face of accelerating advancement, could be “forgotten.” It was a relic of a type of past that not only resisted remaking but also evidenced that men are still vulnerable to death by conditions not of their own making (as in the Great Wars) and not of their own choosing.

While postmodernism is the unique temporal disposition of our generation, that is, multiple situated differences pertaining to identity, class, and spatial location produce diverse temporal experiences (Sharma, 2014), the way we remember still often bears a tint of the modern. Remembering is still focused on advancement (Shils, 1981) and oriented toward the future. Moreover, when we choose to remember as a society, we do it primarily at the point in time when the object of our memorializing becomes scarce (Assmann, 2020; Nora & Kritzman, 1996). It is only in the context of scarcity then that the past is made relevant in an otherwise future-oriented world. What would it mean for the past to be integrated spatially and temporally (Giddens, 1990) in a way that makes the present constantly reflexive and reflective (see Koselleck, 2004)? In this rendering of time, the past would be seen as a dynamic source of reflection and inheritance rather than the backdrop from which present and future innovations emerge.

According to Assmann (2020), our understanding of modern temporality has been steadily shifting. Not only is our previously strained relationship with the past being remediated but our relationship with the future has become tinged with a uniquely dystopian air as well, which has forced us to look askance at it. These temporal pivots are happening precisely at a moment when the future no longer holds the guarantees it once did. This shift in our perception of time has long been in the making, specifically because “history” and its excesses, the moments and events that cannot be contained within the past, increasingly spill over into the present—almost vengefully— at precisely the moments we are *least* ready for them (Assmann, 2020).

It is within this opening in our formerly sedimented relationship with the past that COVID-19 happened. COVID-19 is one of the excesses of history: It is an event that we could not conceive of before it happened. This reveals some of the weaknesses in our understanding of the flow of history (Assmann, 2020) as we navigate the 21st century. A deeper meditation on the past, the parts that we had discarded away, would have revealed that there is no way to indefinitely outrun certain human predicaments. Innovation, as useful as it is, can never fully liberate us from the afflictions humans fear. This finally brings us to the dilemma we face when trying to fully grapple with COVID-19. While many can appreciate what a pandemic is, before COVID-19, our expectations of a pandemic’s ability to affect us were severely undervalued.

Part of what I have argued in this article is that the temporal structure of modern society is at least partially to blame for the century of elision the COVID-19 pandemic exposed. While some scholars like Edwards (2022) have argued that the elisions that underpin journalists' reporting of pandemics rest on the psychosocial conditions of a given country, I have argued that an engagement with the ontological structure of the MTR and its continued impact on the news and collective memory may contribute to our (mis)understandings of both pandemics. At first, it may seem like engaging with the "public time" of the news media (Tenenboim-Weinblatt & Neiger, 2018) further habituates us to the MTR because news is created in the moment, oriented to the present, and invested in immediacy (Zelizer, 1993, 2008). Yet, in the case of the NYT, the COVID-19 coverage reveals that the news *can* function as a rehabilitative mechanism that helps the collective perform dual (present and past) mourning, precisely by transmitting what was formerly an irretrievable memory into public consciousness.

In demonstrating how revitalized or forgotten "pasts" extend or curtail our collective ability to manage present crises (Zelizer, 1998, 2018), I have also argued that COVID-19 has given us a unique opportunity to make the significance of invisible, suppressed, and absent "pasts" paramount to tackling any crisis that emerges in the future. Part of our ongoing response to health crises must center on having more robust premediated memory structures (Erl, 2017) that alter our relationship to the future and our orientation toward the new and the innovative. As Erl (2017) defines it, "premediation [is a] cultural practice of looking, naming, and narrating—and eventually also of acting and legitimizing. Premediation means that the media circulating in a given context provide schemata for future experience" (p. 316). Accordingly, premediation must require not just an insistence on building future responses with past experiences but also a commitment to understanding the innate usefulness of past experiences that do not neatly advance a collective narrative about progress within mainstream outlets like the NYT.

Conclusion

A critical stance toward the COVID-19 crisis coverage should help us reflect on the merits of older temporal orders, in which the past, present, and future existed symbiotically. How can a retrospective view of "Corona-rhythms," as Erl (2020) characterizes the temporality of the COVID-19 pandemic, reinvigorate important questions about modernity, acceleration culture, and more recent spatiotemporal patterns in the U.S. media and globally? What would it mean for us to collectively organize our temporal logic in this way? It would require us to think of the "future" not as a vast field of possible endless innovation but as something different. The future would have to be understood not only as a "continuation of the present and past that we already have or know" but also as a sort of wielding together of past, present, and future preoccupations with "immortality, legacy, afterlife, or sustainability" (Assmann, 2020, p. 231). These three temporal currents could then be thought of as an exchange rather than as a continuous rupturing of one (the past) to make space for the other (the future) in the present. Integral to this process is the news media as they can facilitate dynamic and bidirectional engagements between past and present crisis coverage.

Through its engagement with the NYT's partial coverage of COVID-19, this article has hopefully revealed that new temporal orders are possible and being contended with publicly—which if successful, have positive implications for how we engage with and respond to mediated crises henceforth. While this article's primary focus was the NYT, ongoing research may expand on whether similar narrative tactics were used in

other widely circulated newspapers, and if and how these media outlets constructed the relationship between COVID-19 and the 1918 pandemic. This scholarship may also contribute to research agendas concerning the emergence of suppressed pasts in crisis coverage and its role in communicating to the public the severity of a global emergency.

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