

## Chapter Eight

*A Collaborative Experience:  
The Mutual Benefit Societies'  
Responses to the 1918–19 Influenza  
Pandemic in Pamplona, Spain*

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The influenza pandemic that wreaked havoc in Europe in 1918 was an ordeal for the societies it affected, as evidenced by governments' efforts to fight it, health professionals' responses to it, and the general population's behavior.<sup>1</sup> Scholarly attention to these issues has expanded our understanding of the epidemic beyond what we learn from morbimortality data, which are important in their own right. Nevertheless, relatively little work has been done on nongovernmental and not-for-profit organizations during the 1918–19 epidemic, despite current broader interest in the provision of welfare services "outside the purview of the State" from individuals, families, mutual-aid associations, and private charities.<sup>2</sup> This chapter examines the pandemic from the point of view of the mutual benefit societies (MBSs) in Spain—whose work became vital for the attention received at the time by workers and their families—to shed light on the history of these societies and their relationship with the state system and other public administrations as well as on the 1918–19 influenza pandemic.

We look specifically at the effort of the physicians employed by these societies in Pamplona, Spain. As a general rule, these societies were linked to the social hygiene movement that became prominent in Europe at the beginning of the twentieth century as a means to social reform.<sup>3</sup> They were known for assisting authorities in fostering health care practices, and they played a leading educational role in the improvement of health among the inhabitants of Pamplona during the first two decades of the twentieth

century.<sup>4</sup> In this period Spanish activists and physicians, frequently funded by private charity with hardly any support from public authorities, organized medical-social campaigns to improve the public health of society.<sup>5</sup>

At the time of the influenza epidemic, Pamplona had the same medical health care systems as the rest of Spain. At the turn of the twentieth century the Spanish sanitary structure were based on nineteenth-century models, which had shifted from the social assistance characteristic of the Ancien Régime to a humanitarian model more in keeping with the liberal state.<sup>6</sup> Particularly from the 1880s the reformist and social hygiene movements, statutory provisions, and socioeconomic conditions brought about changes in the organization and provision of public health assistance. These reforms were also due to the fact that the liberal public care model left much of the population unprotected, as it covered only families on the dole. Furthermore, the development of social protection in Spain was connected to worker associationism and the movements that arose from the social doctrine of the Catholic Church, promoted by Pope Leon XIII's 1891 encyclical on social justice, *Rerum novarum*.

The development of social protection in Spain was clearly inspired by its practice in other European countries. Initially the debate focused on the Bismarckian mandatory insurance system, but when the Instituto Nacional de Previsión (National Institute of Social Protection) project was being designed, between 1903 and 1906, it also took into account the Italian and Belgian systems, which were based on collaborations with private initiatives, particularly with the *cajas de ahorro* (savings banks). In the end, the Instituto Nacional de Previsión, inaugurated in 1908, maintained its subsidiary relationship with the state in the promotion of social security.<sup>7</sup>

The first projects for social protection legislation led to the passing of the Ley de Accidentes de Trabajo (Law on Labor Accidents) in 1900 and the regulation of working conditions for women and children. Moreover, in 1919 the Retiro Obrero (Workers' Obligatory Retirement)—which protected the elderly and disabled—was approved, the first insurance system of its kind. Until the 1940s, when Spain introduced obligatory health insurance, about 60 percent of workers and their families entrusted their health care to diverse mutual assistance societies and mutual insurance associations. The generalized workers' crisis and the social conflicts in Spain in this period were not as active in the province of Pamplona as in others. Nonetheless, in the first few years of the twentieth century Pamplona also suffered a serious social problem because of a high rate of unemployment.<sup>8</sup> For this reason, an analysis of the assistance offered by MBSs during periods of ill health—like the 1918–19 influenza pandemic—provides an interesting perspective on the history of medical care.

The MBSs were not-for-profit collectives that worked outside the auspices of the state to provide a form of welfare to workers and their families.

Members often participated in their management and administration. Some of these societies had their roots in the old guilds, but the majority were new, promoted by the *Ley de Asociaciones* (Associations Act) of 1887. Workers' subscriptions, contributions from employers and patron-members, and other donations covered the expenditures. In general, these organizations reflected the ideological inspiration of their sponsors.<sup>9</sup> To date, the role of the MBSs during the influenza pandemic has not been explored in detail, perhaps because of the difficulty in finding information about these organizations. But it is interesting to analyze the repercussions of the pandemic using the societies, as they gave medical care to a significant portion of Spanish society. In the case of Pamplona, MBSs provided medical assistance to over one-third of the city's population, at the time some thirty thousand people.

Several studies have analyzed the situation of medical and social associations in Navarre in the period under consideration, but in Navarre Catholic inspiration lay behind many of the workmen's institutions.<sup>10</sup> Such is the case with *La Conciliación* (Conciliation Society), an MBS founded in 1902 to provide labor mediation, medical-pharmaceutical care (with a medical staff of four physicians—Pedro Subelza, Ramón Sanz, Sergio Lazcano, and Saturnino Lizarraga—who had a protagonist role during the pandemic, as we will see), and monetary aid to 1,400 male workers and their families.<sup>11</sup> Until 1920 *La Conciliación* was the most important MBS in the city. Until 1920 a so-called Mixed Board—composed of eighteen members, six from each group of workers, employers, and patrons or donors—governed *La Conciliación*. Any tradesman or employee living within a ten-kilometer radius of Pamplona could belong to the society.<sup>12</sup> A host of other aid associations, workers' associations, and trade unions also provided assistance. These included the *Sociedad de Artesanos* (Craftsmen's Guilds), which dates from the mid-nineteenth century; the *Unión Productora* (Producers' Union), with some 488 members plus their families; the *Hermandad de la Pasión* (Brotherhood of the Passion), a workers' society with 127 members plus their families; *Federación Local de las Sociedades de Trabajadores* (Local Federation of Workmen's Societies), started in 1902; and the *Sindicato Católico Libre* (Free Catholic Union), created in 1915.<sup>13</sup>

Using the minutes of these MBSs, local news reports, and the archives of the Navarrese and Pamplona public administration offices, I analyze the associations' perceptions of the epidemic. These documents reveal a spirit of complementarity in their varied responses to the emergency. Especially noteworthy is the role of the organizations' physicians who, in mediating this response, successfully integrated the aid organizations into the broader medical health care network in the city. I also discuss the effects of the influenza outbreak on these societies, noting how the rise in the number of sick leaves modified working procedures, which in turn influenced the

relationship between the organizations, their members, and physicians. The increase in the number of the people affected by the epidemic, and who therefore needed assistance, exceeded the economic calculations of the MBSs, which became a serious problem since these societies were basically maintained by their members' financial contributions. To overcome this critical situation, they were forced to seek financial aid (which they were granted) from local and provincial governments.

### The Epidemic as Experienced by the Pamplona Mutual Benefit Societies

Navarre and, in particular, Pamplona, its capital city, was one of the areas in Spain most gravely affected by the second wave of the 1918–19 influenza epidemic.<sup>14</sup> Pamplona's population remained largely unchanged in the first two decades of the twentieth century. Its scant demographic growth was due in part to the fact that it was a walled town and, particularly, to the slow process of industrialization, which was hampered by the negative effects of the Carlist Wars.<sup>15</sup> Moreover, between 1900 and 1920 Navarre experienced negative net migration because of the large number of Navarrese who moved to surrounding areas such as Vizcaya or Guipuzcoa and to foreign countries.<sup>16</sup> These key concerns of Navarrese society were reflected in various population studies including the comparative analyses of deaths, births, and marriages, as well as the search for the causes of high death rates. Not surprisingly, these studies influenced the actions of physicians, including those employed by MBSs. For instance, Agustín Lazcano, who was on the medical staff of *La Conciliación*, drew up new bylaws to organize the municipal registry of births and deaths that was begun in 1902. He compared the health statistics and demography of Pamplona with those of other places and countries and expressed concern about the mortality figures in Pamplona at the time.

An analysis of the illness rates during the influenza pandemic reveals a steady rise in both the illness rate and sick leave for respiratory disease that actually stretches back to 1915. This led to increased control over sick leave as societies sought to minimize its negative economic consequences. Despite this general increase, during the first epidemic wave in May 1918, the minutes of *La Conciliación* show no significant increase in sick leaves, with the exception of a moderate peak in illness rates for the week of June 26 (63 sick leaves). As a result of the minimal impact of the first epidemic wave, the city went ahead with its plans to celebrate the festival of its patron saint, San Fermín, in July. By August 1918, however, *La Conciliación's* minutes resounded with the "terrifying" onset of the disease.

Indeed, the data on the illness rates from *La Conciliación* show that the epidemic broke out suddenly in the second fortnight of September. A

routine number of sick leaves was recorded on September 16 (24), but this almost doubled within a week (40) and remained constant (and constantly high) for ten weeks, until the second fortnight in November. Although data from the MBSs show that the epidemic continued during the first three weeks of November—data later supported by the official figures published in the *Boletín Mensual de Estadística Demográfico-Sanitaria* (Demographic-Health Statistics Bulletin, 1918)<sup>17</sup>—the press reported that the exceptional measures that had been adopted in the first few days of the month to curb the spread of the epidemic had been discontinued. The motives for the divergence between the decisions of the public authorities and the sick leave figures remain unexplained.

The month of October and the first fortnight of November registered the highest number of victims, peaking from October 14–28, 1918. After November 25 the illness rate began to drop and soon returned to average levels (fig. 8.1). The data from other MBSs reveal a similar pattern.

According to the deaths recorded at the Registry Office in Pamplona, 216 people died during the autumn influenza period: 215 between September 17 and November 17, and 1 on December 1.<sup>18</sup> Table 8.1 provides information on the 27 fatalities among the members of the different MBSs, calculated from the postmortem subsidies paid by the MBSs to the families. The morbidity rates recorded in the archives of La Conciliación and in the *Boletín Mensual de Estadística Demográfico-Sanitaria* attest to a relative mildness of the third epidemic wave, which took place from mid-February to the end of March 1919.

### The Reaction of the Mutual Benefit Societies

In Pamplona, the municipal and provincial organizations coordinated relief efforts—including the administration of medical attention and the provision of basic foodstuffs—with nongovernmental MBSs. This was combined with the MBSs' efforts to obtain funds to fulfill their commitment to the affected members and to maintain solvency. The public health resources used against the epidemic were those typical of the time: isolation, street cleaning, disinfection of business premises, and immediate removal of corpses.<sup>19</sup> Throughout the epidemic, city hall maintained "brigades" with atomizers for cleansing and disinfecting courtyards, doorways, and staircases, and by the end of the epidemic they had effectively cleaned all the houses in the city several times.<sup>20</sup> They also closed schools.<sup>21</sup>

In addition to the specific measures taken, an intense public health education campaign was waged in the press and through city hall proclamations—that is, the distribution of leaflets containing the city bylaws on public health and "sheets reproduced by the Provincial Health Inspector with measures

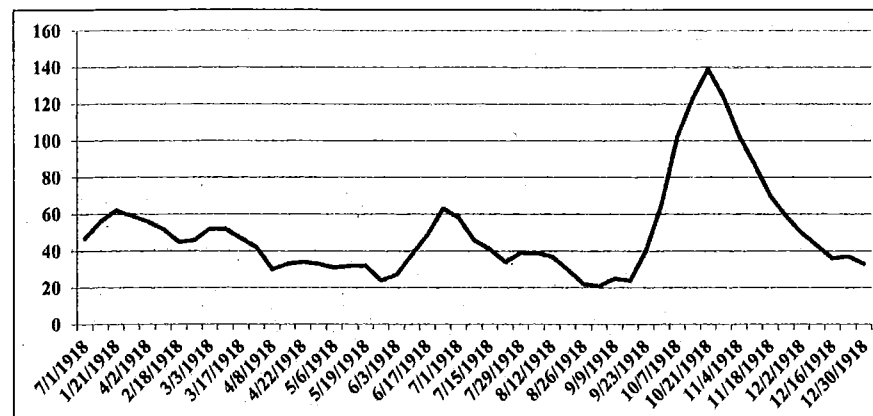


Figure 8.1. La Conciliación, illness rate, 1918. León-Sanz's elaboration (dates: day/month/year). La Conciliación, *Books of Minutes*, 1918, Archive University of Navarra.

Table 8.1. Postmortem allowances, September–November 1918

Society	Number	Postmortem benefit	
		Amount (in pesetas)	Period
La Conciliación	10	800	September 15–October 29
Unión Productora	1	40	September 15–November 3
Unión Obrera	11	760	September 20–October 25
Artesanos	5	300	September 15–October 30
Total	27	1,900	

Source: La Conciliación, *Books of Minutes*, 1918, Archive University of Navarra; Hygiene Section, 1918, Municipal Archive of Pamplona.

to be taken by individuals to avoid the spread of the gripe."<sup>22</sup> Physicians recommended the consumption of milk, lemons, and eggs. In some cases they also prescribed "sudatory medications, abundant beverages, diuretics, theobromine, and antidiphtheric serum if the infection is very striking."<sup>23</sup> Similar medical practices were adopted in other places.<sup>24</sup>

Because of the effects of World War I, Pamplona was at that time in the midst of a serious provision problem, which deteriorated further with the onset of the epidemic. The market price of milk and other basic staples needed for the treatment of patients kept rising. In response, the MBSs and workers' associations demanded the intervention of the government and

the city council. They held meetings with the civil governor on September 28, 1918, and with the mayor on October 15, 1918: "The representatives of Asociación de Empleados, La Conciliación, La Federación Obrera, La Unión Obrera, and Sindicato de Obreros, on 30th September last, request that, in view of the abnormal circumstances the city is undergoing, the taxes on basic subsistence foodstuffs be controlled."<sup>25</sup> The demand was met as the city council adopted an interventionist policy that established fixed prices for food.<sup>26</sup> As a result, "the reduction in the cost of bread from the Vínculo bakery is agreed upon, even if this means [financial] losses." The sale of milk and its derivatives was also centralized and a fixed price of sixty cents per liter was established. Moreover, the city council distributed vouchers through the MBSs that could be redeemed for milk, eggs, fish, meat, and coal.<sup>27</sup> Later rice, potatoes, and beans were added to the list of products one could obtain with a voucher. La Conciliación, which had managed a cooperative for its members since 1912, participated in the municipal interventionist policy of discounting food.

### Consequences for the Societies' Medical Staff

MBSs offered general medical care through its doctors-office consultations and medical home care. At the beginning of the epidemic, the physicians used press releases to recommend that those affected by influenza should visit the doctor immediately: "Inform him: if there are to be complications, he can prevent them and will treat them efficiently and appropriately."<sup>28</sup> As a consequence of this advice, doctors' home visits increased to the point that La Conciliación physicians complained they were unable to attend to so many people.<sup>29</sup> In Pamplona the number of patients admitted to hospitals did not rise, a fact that suggests physicians doing house calls bore the brunt of the increased demand for medical attention occasioned by the epidemic.<sup>30</sup> To make matters worse, Dr. Lizarraga fell ill in mid-October. Dr. Sergio Lazcano renounced his salary on the grounds he could not carry out his work, a decision accepted by the society's Mixed Board, contingent on his finding a substitute. Unable to do so, he continued to attend to patients himself. The physicians postponed paperwork—including illness reports—and administrative tasks because of the overwhelming number of patients needing attention.<sup>31</sup>

To lighten the load on the doctors, the Mixed Board of La Conciliación sent an official note to the president of the newly established Official Medical College of Navarre, asking him to request the use of official city council automobiles for physicians' house calls. This was speedily arranged, and La Conciliación physicians S. Lizarraga and Sergio Lazcano, as well as the physicians from the Beneficencia, were granted use of the vehicles. Moreover,

on October 7 the city council, using its powers to "marshal the health care services of those who practiced health care professions" during epidemics decreed that there should be a physician on call at night, from nine at night to seven in the morning, to allow the remaining twenty-two physicians in the city to get a good night's rest.<sup>32</sup> The person appointed was the Pamplona forensic surgeon, though the service was discontinued in early November.<sup>33</sup>

On Sunday, October 20, the mayor summoned the city physicians, including those belonging to the MBSs, to coordinate aid distribution to poor patients, whether they depended on municipal charity or not. After Dr. Sergio Lazcano announced the plan at a society meeting, the city council sent foodstuffs directly to La Conciliación for their distribution by the physicians. The following note from La Conciliación serves as an example of the minutes dedicated to this issue: "The Council has sent tins of condensed milk. They are being sent to Pedro Subelza as the senior physician."<sup>34</sup>

When the epidemic ended, both the authorities and the press expressed their gratitude to the physicians for their labor in attending to the sick. On November 7, 1918, the *Diario de Navarra* published a statement from the mayor to the Official Medical College, praising the valuable work carried out by the Pamplona physicians during the epidemic. He profusely thanked all of them for their generous support and collaboration with the city council's arrangements. The newspaper added, "We find this praise to be deserved and join in [thanking the physicians] most sincerely."<sup>35</sup>

The rise in morbidity rates among worker-members of the MBSs was connected to profound changes in the structuring of the work of medical professionals.<sup>36</sup> The most notable of these was giving the members of La Conciliación the right to choose their own physician, an issue that at the time constituted part of a broader argument regarding the defense of the professional model and the new demands for responsibility that society demanded of its physicians.<sup>37</sup> In practice, in La Conciliación, sick notes had to be signed by a physician belonging to the association. But from 1915 onward, coinciding with an increase in sick leave, the Mixed Guild requested that members be permitted to visit physicians who did not belong to La Conciliación, noting that the members would pay the corresponding fees, but that the society would admit both the prescriptions and sick notes drawn up by these physicians. Surveillance to avoid abuse of the system was entrusted from early on to the workers' guilds, the society physicians, and an inspector employed for this task. Physicians were repeatedly reminded to be punctual in writing sick leave notes and discharges and, in this manner, collaborate in the management of sick leave situations. In 1916 they were urged to draw up sick leave notes at La Conciliación's headquarters and were subsequently obliged to visit members on sick leave every three days to reduce their period of convalescence. Thus, after the physician Ramón Sanz reported finding a society member supposed to be at home on sick leave

absent from his home on January 14, 15, and 16, 1918, the board cut the member's benefits.<sup>38</sup>

### Crisis in the Mutual Benefit Societies

As we have seen, the structure of income and expense was similar across the MBSs. Income came from member dues, from donations from patron-members or private individuals, and from grants solicited from public entities. Illness benefits constituted the lion's share of their expenses (about 60 percent). Other costs—which varied depending on the particular association—included medical care, pharmaceutical services, aid for the chronically ill or the unemployed, postmortem allowances for a deceased member's family, and administrative costs. During the 1918–19 influenza pandemic, the increase in the morbidity rate threw the budgets of these societies into disarray, due to the substantial rise in the subsidies paid to ill members. In the case of La Conciliación, worker-members paid dues of 25 cents per week, while the benefit amount paid out remained at 1.50 pesetas per day between 1902 and May 1928. Membership fees became a very important part of financing the society since sick leave costs from the second decade of the century on absorbed about 60 percent of them.<sup>39</sup>

Dated October 29, 1918, an official note from the president of the Mixed Board of La Conciliación describes the movements of its funds between September 15 and October 29, 1918. It states that the deficit on October 27 was 896.19 pesetas and also includes the data reflected in table 8.2. A perusal of the society's financial documents reveals that from September 23 to November 29, La Conciliación paid out far more in aid than it collected in income from members' dues.

To deal with its precarious financial situation, La Conciliación solicited help from the general public beginning in September. On October 5 the press published an article announcing the opening of an account to collect funds for the society. It also described the workers' woeful situation because of rising prices, the depressed postwar economy, and the absence of wages when they fell ill. Donations began to arrive immediately and, with additional help from the patron-members, the society was able to weather the storm, proof of the social support it had.<sup>40</sup> Much of the support it received was garnered through the personal contacts of the patron-members. Some, apart from having held political posts, had influential professional careers.<sup>41</sup>

Moreover, as I have noted, La Conciliación became more cautious in granting sick leave and subsidies. Prior to the pandemic, it would subsidize each illness (per member) for up to six months. But during the pandemic, it essentially grouped all respiratory illnesses together with influenza,

Table 8.2. The accounts of La Conciliación during the influenza epidemic

Expenses	Pesetas	Income guilds	Pesetas
Illness benefit			
September 16	240.00	September 15	373.95
September 23	372.00	September 22	396.00
September 30	664.00	September 29	403.00
October 6	1,058.25	October 6	579.95
October 13	1,240.50	October 13	380.00
October 20	1,335.75	October 20	342.70
October 27	1,182.00	October 27	394.60
Postmortem aids	800.00		
Total	6,892.50	Total	2,870.20
Deficit	-4,022.30		

Source: La Conciliación, *Books of Minutes*, 1918, University of Navarra Archive.

which meant members could now receive a total of only six months' worth of subsidy for all respiratory illnesses combined. Moreover, workers found to have misused the system were immediately expelled from the association with no possibility of being readmitted.<sup>42</sup>

### The Accounts of the Other Societies

The Unión Productora, a related MBS, was also forced to appeal for financial assistance. Its 488 members were divided into three groups, depending on the type of subsidy they received: family medical-pharmaceutical assistance (92), individual medical-pharmaceutical assistance (9), and, most frequently, family medical-pharmaceutical assistance plus financial aid for members who were ill (387). Its extra expenses during the influenza epidemic (September–October 1918) came from pharmaceutical expenses (215.00 pesetas); 225 doctors' visits (252.00 pesetas); one postmortem allowance (40.00 pesetas); and, especially, the subsidies that were paid to ill patients (2,521.00 pesetas). The final tally of funds distributed by the Unión Productora amounted to a grand total of 3,028.00 pesetas, yielding a deficit of 1,626.80 pesetas. Thus, the president of the Unión Productora sent an official note to the city council on November 3 requesting support, stating, "the figures speak for themselves."<sup>43</sup>

Between September 15 and October 30, the *Hermandad de la Pasión* incurred a deficit of 354.50 pesetas due to the rise in illness among its members, paying out 545.00 pesetas in aid (471.00 pesetas plus the usual monthly expenditure in subsidies of 74.00 pesetas). At the time, the organization had 127 members, an average monthly income of 190.50 pesetas (dues of 1.00 peseta per month), and the aforementioned monthly expenditure of 74.00 pesetas. The *Sociedad de Artesanos* showed a deficit of 636.00 pesetas in September and 1,626.80 pesetas in October. The difference between the two months was due to the increase in financial aid paid out in October (1,512.50 pesetas) and the employment of a medical locum (499.50 pesetas). The *Unión Obrera* (Workers Union) did not cover medical assistance and provided only financial aid to its sick members. At the end of October, it had a deficit of 3,617.86 pesetas. We have less data on the other trade unions. On October 31, 1918, *Sindicato Católico de Obreros Libres* (Free Workers' Catholic Union) stated that it had five ill members to whom it was paying 1.50 pesetas per day in aid, and another fifteen members without aid, due to lack of funds.

### Public Aid

*La Conciliación* and the other MBSs were managed by people with significant political and social influence.<sup>44</sup> Their representatives on the commissions set up by the city council and the regional government were thus ideally situated to address public health and social problems, as well as to seek financial assistance from the Spanish government.<sup>45</sup> During the influenza epidemic, the first and most urgent demand came from the *Unión Obrera*. Its lack of funds threatened the society's very existence, despite having reduced by half the aid given to each patient. In this "needy state" it asked the city council for an economic subsidy to survive and pay its expenses: "The Mutual Benefit Society *Unión Obrera*, writing on 15th October expresses that, in view of the abnormal circumstances and the rise in the number of ill members, and the precarious situation of the society, which is under threat of disappearing since it has no funds and has been forced to reduce by half the assistance it offered in normal times, finds itself in the position of appealing to the Most Honorable City Council to request an annual subsidy in the form and quantity which the Council considers convenient."<sup>46</sup>

The *Unión Obrera's* call for help provoked a political debate. Some councilors queried the petition because it meant aid would also have to be granted to other societies, if they so demanded. This was the opinion of the councilor, Dr. Javier Gortari, a physician who had been linked to *La Conciliación* in an early period: "The Council should sympathize with the needs of said Society but must remember that there are other Societies

such as *La Conciliación* and *Artesanos* that will feel they have the same right to claim subsidies." Conversely, Councilor Francisco Lorda categorically supported the concession of aid requested by the *Unión Obrera*. After recounting the history of the society since its foundation, he stated that "the imbalance in its monetary situation has been caused by the current epidemic and that rather than allowing a Society like this to disappear it is preferable that the City Council make some sacrifices and that the Commission for the Exchequer should, when preparing the budget for the following year, 1919, take the situation of this Society into account by assigning it a subsidy."<sup>47</sup> At the following meeting, Lorda insisted "that the petition of the *Unión Obrera* should be decided today because their pressing need did not allow for delay and the Commission for the Exchequer has taken its decision on the matter."<sup>48</sup>

As was foreseeable, requests for financial aid arrived from the remaining societies: *Sociedad de Artesanos*, *Hermandad de la Pasión*, *La Conciliación*, *Federación Obrera*, *Sindicato Católico de Obreros Libres*, and the *Asociación de Empleados*. For example, "The Mixed Board of the Workers' Protection Society *La Conciliación*—alerted by friends on the Council—on October 21, requests the granting of a subsidy to cover the expenses of aiding those members who are suffering from the prevailing disease."<sup>49</sup> These petitions led to arguments among the councilors, as reflected in the minutes of the municipal meetings of October 16 and 23. For example, on October 23, we read,

After lengthy discussion on several points about this proposal from the Commission for the Exchequer, in which Messrs. Gortari, Lipúzcoa, Aldaz (D. Fulgencio), Gorostiza and Martínez Azagra intervene[d]: it is agreed that said subsidies proposed by the Commission for the Exchequer be granted by the Mayor's Office and charged to the balance of the provincial rates account; and that the document from the Mixed Board of the Workers' Protection Society *La Conciliación*, which has motivated this debate, be passed to the Mayor's Office to be decided.<sup>50</sup>

The debate evinces the support each organization had in the city hall. Just as Councilor Lorda lobbied for the *Unión Obrera*, Gortari and Lipúzcoa defended *La Conciliación*; the latter was a patron-member of this society and was on its Mixed Board.<sup>51</sup>

Finally, at the council meeting on November 20 it was again agreed that "an extraordinary budget of twenty thousand pesetas has been approved . . . both to grant these subsidies and to cover other pressing needs caused by the current state of health of the City due to the prevailing disease, and that when the new budget is decided said sum will be allocated to cover extraordinary expenses of this kind."<sup>52</sup> The total granted to the MBSs amounted to 2,425.00 pesetas distributed, as shown in table 8.3.

Table 8.3. Distribution of the subsidies given to the MBSs during the influenza epidemic

Organization	Subsidy (in pesetas)
La Conciliación	700
Unión Obrera	500
Unión Productora	285
Artesanos	275
Sindicato de Obreros Libres	215
Sociedades Obreras	200
Hermandad de la Pasión	150
Solidaridad de Socorros Mutuos among workers at the Compañía Navarra de Abonos Químicos	100
Total	2,425

Source: Hygiene section, Box Hygiene 1918, Municipal Archive of Pamplona.

The total amount spent by the city council to cover the needs of the sick, however, was 19,385.39 pesetas. The city council paid most of this expense through public subscriptions opened to help with the epidemic. The City Council Archives contains a dossier titled "Subscription to Assist the Poor and Ill during the Grippe Epidemic," which lists the donations received and the letters of acknowledgment written to the donors. The first on the list is the Count of Guenduláin, who donated 1,000.00 pesetas, as did the Irati Railway Society, on October 19, 1918. The Sociedad la Vasconia (Vasconia Society, an insurance company) donated 250.00 pesetas on October 31, 1918, and smaller donations came from companies such as *El Pueblo Navarro* (a newspaper), which donated 10.00 pesetas. In any case, the municipal aid to the MBSs, although significant for the times, was insufficient to cover the organizations' deficits. As we saw with La Conciliación, they were subsequently forced to ask for donations from private individuals.

The Unión Obrera's urgent demand for help from the Pamplona City Council led to a revision of the official policy on subsidies for the societies and benefit organizations. After the influenza epidemic, the Pamplona MBSs demanded subsidies regularly and not only in exceptional circumstances. Even before the pandemic ended, on November 18, 1918, Amalio Lasheras sent the following note to the city council: "the Mutual Aid Society Unión Obrera . . . acknowledges its gratitude for the aid donated to said Society and begs the Most Excellent City Council to study if it were possible for this bonus to be made annually in future years."

Apart from direct subventions, these entities also received additional aid because the municipal government paid for pharmaceutical treatments. As of the second fortnight in October, city hall financed the pharmaceutical expenses authorized by all the physicians in the city, whether they were in private practice or worked for the MBSs or other charitable organizations: "The Mayor announces that, as of tomorrow, the poor and ill will be given vouchers to exchange for drugs in the pharmacies, as has been done with milk vouchers."<sup>53</sup> These drug vouchers, which were grouped by pharmacy, listed the patient's name, the prescription, and the price. For example, La Conciliación physician Sergio Lazcano frequently prescribed eucalyptus syrup, sodium bromide, potassium bromide, antipyretics, caffeine citrate, and so on, to be dispensed by the Negrillos pharmacy. Another La Conciliación physician signed prescriptions for laudanum balm, chloroform, and ammonium chlorate or perchlorate to be prepared by the Viuda de Iribarren pharmacy. Interestingly, neither of these pharmacies was under contract to La Conciliación, although both had worked with the society at earlier dates. Clearly, since city hall was footing the bill, the physicians did not feel obliged to use the society's pharmacy.

#### A Case of Mutual Reliance: Benefit Societies and Public Administration

An analysis of the impact of the 1918–19 influenza pandemic on the MBSs and related associations in Pamplona, Spain, allows us to draw a more complete picture of both the pandemic and the framework of social and medical assistance at the time. The increase in the morbimortality rate from influenza and other respiratory diseases in the years preceding the pandemic, specifically since 1915, is particularly noteworthy. Also of interest is the discrepancy between the morbidity rate caused by the epidemic and the measures taken by the public authorities. In the case of La Conciliación, the most important MBS of the city, issues surrounding attention during the pandemic were leveraged to argue for worker-members' right to choose their own physician. In other words, the high morbimortality rate revealed the need for greater flexibility in the provision of medical care. In this sense, the influenza epidemic was part of a broader context in which the rise in morbimortality changed the way the MBSs functioned by modifying the patient-physician relationship. The epidemic circumstances also revealed the narrow economic margin of these entities as they realized that the safeguards put in place to guarantee their solvency proved insufficient, and if not for the timely intervention of public and private donors, the pandemic likely would have bankrupted them. In fact, the pandemic helped to usher in a postpandemic period when external support for MBSs through

subventions and donations would become the norm, permanently augmenting member dues.

The analysis of the MBSs' responses to the 1918–19 influenza pandemic in Pamplona unveils the relations between power and associationism and the interconnected interests of the associations, social groups, and public entities. That these rival organizations worked so well together is somewhat surprising given that, as they espoused similar ideologies and provided the same kind of care, they competed for membership from the local population. Yet their cooperation was not limited to the extraordinary circumstances of the pandemic; they generally collaborated effectively even under ordinary conditions while networking with public offices.<sup>54</sup> The personal relationships among their directors certainly go a long way in explaining this attitude of cooperation. In this sense, it sheds light on the social and institutional backing they received.

In particular we should note the significance of the close contact between the town council and the local societies, as La Conciliación and other associations were generally run by local politicians and other prominent members of society. These entities depended on public support for their organization and the development of its social health care programs throughout the city. Reading the narratives of the pandemic offers valuable insights on the situation of Spanish health care management and progress in the early years of the twentieth century.

## Notes

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1. Niall Johnson and Juergen Mueller, "Updating the Accounts: Global Mortality of the 1918–1920 'Spanish' Influenza Pandemic," *Bulletin of the History of Medicine* 76, no. 1 (2002): 105–15.

2. Bernard Harris, ed., *Welfare and Old Age in Europe and North America: The Development of Social Insurance* (London: Pickering and Chatto, 2012); Bernard Harris and Paul Bridgen, eds., *Charity and Mutual Aid in Europe and North America since 1800* (New York: Routledge, 2007); Ole Peter Grell, Andrew Cunningham, and Bernd Roeck, eds., *Health Care and Poor Relief in 18th and 19th Century Southern Europe* (Aldershot, England: Ashgate, 2005); Martin Gorsky and Sally Sheard, eds., *Financing Medicine: The British Experience since 1750* (New York: Routledge, 2006).

3. Esteban Rodríguez Ocaña, *Por la salud de las naciones: Higiene, microbiología y medicina social* (Madrid: Akal, 1992).

4. Pilar León-Sanz, "Networking and Interaction between a Mutual Assistance Association and Other Agencies (Pamplona, 1902–1919)," *Hygiea internationalis* 8, no. 1 (2009): 31–50.

5. Esteban Rodríguez Ocaña, *Salud pública en España: Ciencia, profesión y política, siglos XVIII–XX* (Granada: Universidad de Granada, 2005).

6. Pilar León-Sanz, "Professional Responsibility and the Welfare System in Spain at the Turn of the 19th Century," *Hygiea Internationalis* 5, no. 1 (2006): 75–90.

7. Feliciano Montero García, "El debate sobre el intervencionismo y el nacimiento del Instituto Nacional de Previsión (INP)," in *La previsión social en la historia: Actas del VI Congreso de Historia Social de España*, ed. Santiago Castillo and Rafael Ruzafa (Madrid: Siglo XXI de España, 2009), 171–96.

8. Ángel García-Sanz Marcotegui, "El ayuntamiento de Pamplona ante la 'crisis obrera,'" *Gerónimo de Uztariz: Boletín* 3 (1989): 26–39.

9. León-Sanz, "Professional Responsibility," 75–90; Feliciano Montero García and M. Esteban de Vega, "Aproximación tipológica al mutualismo popular y obrero en España: El mutualismo asistencial," in *La historia social en España: Actualidad y perspectivas; Actas del I Congreso de la Asociación de Historia Social*, ed. Santiago Castillo (Madrid: Siglo Veintiuno de España, 1991), 457–69; Francesc Andreu Martínez Gállego and Rafael Ruzafa, "Los socorros mutuos y la cooperación en la España del siglo XIX: Actitudes de los poderes públicos y soluciones populares," in Castillo and Ruzafa, *Previsión social*, 101–35.

10. José Andrés-Gallego, *Historia de la acción social de la iglesia* (Madrid: Espasa Calpe, 1984); Manuel Ferrer Muñoz, "Panorama asociativo de Navarra entre 1887 y 1936," in *Congreso de Historia de Euskal Herria* (Vitoria: Servicio Central de Publicaciones del Gobierno Vasco, 1988), 6:49–65; Javier M. Pejenaute Goñi, "Las Sociedades de Socorros Mutuos en Navarra (finales del siglo XIX—comienzos del XX)," in *Euskal Herria*, 6:273–87.

11. Pilar León-Sanz, "La concertación de la asistencia en la enfermedad en 'La Sociedad de Obreros la Conciliación' (1902–1919)," in *Navarra: Memoria e Imagen*, ed. Mercedes Galán Lorda, María del Mar Larraza Micheltoarena, Luis Eduardo Oslé Guerendiain, and SEHN (Pamplona: Eunat, 2006), 2:97–108.

12. About "La Sociedad de Obreros La Conciliación," see Pilar León-Sanz, "Medical Assistance Provided by la Conciliación, a Pamplona Mutual Assistance Association (1902–84)," in Harris, *Welfare and Old Age*, 137–66.

13. On the Local Federation of Workmen's Societies, see Juan José Virto Ibáñez, "La UGT de Navarra: Algunas aportaciones al estudio del socialismo navarro," *Príncipe de Viana* 50, no. 187 (1989): 395–429. On the Free Catholic Union, see José Goñi Gaztambide, *Historia de los obispos de Pamplona*, vol. 10 (Pamplona: Eunsa, 1999).

14. There are numerous studies on the Spanish influenza pandemic. For a global perspective, see Howard Phillips and David Killingray, eds., *The Spanish Influenza Pandemic of 1918–19: New Perspectives* (New York: Routledge, 2003). See also Alfred Crosby's seminal study *America's Forgotten Pandemic: The Influenza of 1918* (New York: Cambridge, 2003); and John M. Barry, *The Great Influenza: The Epic Story of the Deadliest Plague in History* (New York: Viking, 2004). For Spain, see Beatriz Echeverri Dávila, *La gripe española: La pandemia de 1918–1919* (Madrid: Centro de Investigaciones



Sociológicas / Siglo XXI, 1993); and Echeverri Dávila, "Spanish Influenza Sees from Spain," in Phillips and Killingray, *Spanish Influenza Pandemic*, 173–90. The Spanish influenza pandemic in Pamplona has been studied by Jesús Ramos Martínez in "La pandemia de gripe de 1918 en Pamplona," in *II Congreso de Historia de Navarra de los Siglos XVIII–XIX y XX* (Pamplona: Institución Príncipe de Viana, 1992), 109–29.

15. In the nineteenth century Spain experienced three civil wars, the Carlist Wars, that pitted Carlists (absolutists), who supported Carlos María Isidro de Borbón and his descendants' claim to the Spanish throne, against Liberals, who supported Isabel II, who finally became the Spanish queen. The demographic changes are studied by Sagrario Anaut Bravo in *Cambio demográfico y mortalidad en Pamplona (1880–1935)* (Pamplona: Universidad Pública de Navarra, 1998).

16. Alfonso García Barbancho, *Las migraciones interiores españolas* (Madrid: Escuela Nacional de Administración Pública, 1967).

17. *Boletín Mensual de Estadística Demográfico-Sanitaria: Inspección General de Sanidad Exterior*. Madrid: Ministerio de Gobernación, 1918.

18. A total of 67 percent of the fatalities (forty-nine deaths) were patients in Pamplona's psychiatric asylum. See Echeverri Dávila, *Gripe española*, 139; Ramos Martínez, "Pandemia de gripe," 113.

19. María-Isabel Porrás-Gallo, *Un reto para la sociedad madrileña: La epidemia de gripe de 1918–19* (Madrid: Complutense / Comunidad Autónoma de Madrid, 1997). The MBSS' physicians knew these measures well. Prior to the pandemic, Dr. Lazcano had published two books—*Higiene y salubridad pública en Pamplona* (Hygiene and public health in Pamplona) in 1903 and *Plan general de higienización de las viviendas de Pamplona y medios de realizarlo en la práctica* (General plan and practical measures for home hygiene), in 1909—popularizing the idea of disinfection, which "includes a series of measures to destroy the germs or microbes that threaten our health," including the use of disinfection stoves. Other issues included nutrition, alcohol consumption, and improvements in housing.

20. On these measures, see also chapters 9 and 11 of this volume.

21. *Book of Minutes*, Municipal Archive, October 4, 1918, 205–7.

22. *Book of Minutes*, Municipal Archive, October 4, 1918.

23. Emilio Gil Sastre, "El tifus efímero," *Diario de Navarra: Periódico independiente* (Pamplona), June 29, 1918.

24. María-Isabel Porrás-Gallo, "Sueros y vacunas en la lucha contra la pandemia de gripe de 1918–1919 en España," *Asclepio* 60, no. 2 (2008): 261–88. The Navarrese physicians debated the nature of the illness within the bacteriological paradigm, as noted in an article published in the *Diario de Navarra* with the expressive, dramatic subheading: "The Ephemeral Typhus." In this, their actions mirrored those adopted by physicians in other countries and other Spanish cities. On physicians' actions in other countries, see Niall Johnson, *Britain and the 1918–19 Influenza Pandemic: A Dark Epilogue* (New York: Routledge, 2006); Antoine Nebel, *La gripe española: Su naturaleza, su tratamiento curativo y preventivo; Medidas profilácticas* (Valencia: Mínima, 2006); and Paul Kupperberg, *The Influenza Pandemic of 1918–1919* (New York: Chelsea House, 2008). On other Spanish cities, see Porrás-Gallo, *Reto*. A *Diario de Navarra* article (Emilio Gil Sastre, "El tifus efímero," June 29, 1918) referred to "the reports of the Madrid Municipal Laboratory, those of the Alfonso XIII Institute, and of other centers committed to microbiological study, [which] could not reach a consensus as they

did not find a microbe in the affected individuals which could be responsible for the infection." What was clear was that it was "a disease with such a definite and characteristic cycle that it should be considered as of particular, distinct, individualized and classifiable nosological significance . . . [and] serious in itself or because of its associated complications."

25. La Conciliación, *Book of Minutes: Pro manuscript*, bk. 7 (Pamplona, 1918), 309; *Book of Minutes*, Municipal Archive, October 15, 1918.

26. Similar measures were taken in other cities. Porrás-Gallo, *Reto*; Esteban Rodríguez Ocaña, "La grip a Barcelona: un greu problema esporàdic de salut pública. Epidèmies de 1889–90 i 1918–19," in *Cent anys de Salut Pública a Barcelona* Antoni Roca Rosell, coord. (Barcelona: Institut Municipal de la Salut, 1991), 131–56; Josep Bernabeu-Mestre, ed., in collaboration with Andreu Nolasco Bonmatí, Marisa Bardisa Escuder, Vicente Bartual Méndez, José María Gutiérrez Rubio, Luis López Penabaz, and José Miguel Mataix Piñero, *La ciutat davant el contagi: Alacant i la grip de 1918–1919* (Valencia: Conselleria de Sanitat i Consum, Generalitat Valenciana, 1991).

27. *Book of Minutes*, Municipal Archive, October 23, 1918.

28. Emilio Gil Sastre, "El tifus efímero," *Diario de Navarra*, June 29, 1918.

29. La Conciliación, *Book of Minutes*, bk. 7 (1918), 296. The impact of the epidemic disease complicated the problems that resulted from the low number of physicians per inhabitant at the time in Spain. As Sobral, Lima, and Silveira e Sousa note in chapter 4 of this volume, this same situation occurred in Portugal during the pandemic.

30. Ramos Martínez, "Pandemia de gripe."

31. La Conciliación, *Book of Minutes*, bk. 7 (1918), 302–8.

32. Instrucción General de Sanidad de 1904, art. 155. Real Decreto aprobando con carácter definitivo la Instrucción General de sanidad pública. Ministerio de la Gobernación. *Gaceta de Madrid* 22, January 22, 1904, 273–75.

33. *Book of Minutes*, Municipal Archive, October 4, 1918.

34. La Conciliación, *Book of Minutes*, bk. 7 (1918), 316, 309.

35. "La epidemia reinante: La gripe en Navarra," *Diario de Navarra*, October 24, 1918; n/a "Cosas de casa. La salud pública," *Diario de Navarra*, November 7, 1918.

36. This type of change in the structuring of work is also described in other situations, like that of American military physicians. Carol R. Byerly, *Fever of War: The Influenza Epidemic in the U.S. Army during World War I* (New York: New York University Press, 2005).

37. León-Sanz, "Professional Responsibility," 75–90.

38. La Conciliación, *Book of Minutes*, bk. 5 (1914), 147–49; bk. 6 (1916), 36; bk. 7 (1918), 140.

39. León-Sanz, "Concertación de la asistencia," 97–108.

40. La Conciliación, *Book of Minutes*, bk. 7 (1918), 293, 322.

41. Andrés-Gallego, *Historia de la acción*; Pilar León-Sanz, "Private Initiatives against Social Inequalities and Health Vulnerabilities: The Case of la Conciliación (Pamplona, 1902–1920)," in *Vulnerabilities, Social Inequalities and Health*, ed. Patrice Bourdelais and John Chircop (Évora: Edições Colibri, 2010), 93–108.

42. La Conciliación, *Book of Minutes*, bk. 7 (1918), 323–34.

43. Letter by president of the Unión Productora, Municipal Archive, November 3, 1918.

44. Pilar León-Sanz, "The Strategies of Interrelations between Assistance Associations and Other Agencies in Pamplona, 1902-1936," in *Health Institutions at the Origin of the Welfare Systems in Europe*, ed. Pilar León-Sanz (Pamplona: Eunsa, 2010), 167-92.

45. Navarre had a special administrative autonomy from the central government: the "foral" regime. This regime established that the Diputación Foral de Navarra was an executive group that depended on the parliament or the legislative body. The Diputación was directly responsible for matters relating to the social welfare of the region. In the early part of the twentieth century, there was a majority of conservative parties in both the local and regional government. José Andrés-Gallego, *Historia contemporánea de Navarra* (Pamplona: Ediciones y Libros, 1982); I. Olabarri Gortazar, "Notas sobre la implantación, la estructura organizativa y el ideario de los partidos del Turno en Navarra, 1901-1923," *Príncipe de Viana: Anejo 10* (1988): 317-29.

46. *Book of Minutes*, Municipal Archive, October 16, 1918, 223-25.

47. *Ibid.*, 223, 224.

48. *Book of Minutes*, Municipal Archive, October 23, 1918, 230.

49. La Conciliación, *Book of Minutes*, bk. 7 (1918), 312.

50. *Book of Minutes*, Municipal Archive, October 23, 1918, 234.

51. León-Sanz, "Private Initiatives," 93-108.

52. *Book of Minutes*, Municipal Archive, November 20, 1918, 297.

53. *Book of Minutes*, Municipal Archive, October 16, 1918.

54. León-Sanz, "Private Initiatives," 93-108.

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## Part Three

# Interpreting the Epidemic

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## *Sociocultural Dynamics and Perspectives*