



The Great History of Pandemics

In the midst of the current corona crisis, it is easy to feel utterly powerless against the rampage that this virus has caused, whether social, political and economic. Yet, at this point in the crisis, what has had the largest felt impact is not so much the economic devastation, as could be expected, but the forced isolation to which all of us have been confined. The days now seem eternal as we sit at home yearning for that day when there will no longer be an awkward elbow handshake or a screen separating us from our loved one. Fun fact: the word quarantine originated during the Black Death. Italian sailors would be held to their ships for a period of 30 days (a trentino). This seclusion was extended to 40 days or a quarantine which is where the word came from.

As we resort to several creative distractions from the mundanity of this new temporary lifestyle, we ponder on how such a minuscular virus succeeded in dragging the entire world in a state of crisis, hoping this nightmare will soon come to an end. A more important question we should ask ourselves though is this: what happens next? Will we all retrieve our previous lives, leaving them completely unchanged, so as to show our appreciation to all we had taken for granted and had missed oh so dearly? Or will the scars of this pandemic make us more determined to make the necessary changes to ensure this part of history will never repeat itself again?

Why am I saying 'again'? Because while the fear and uncertainty surrounding the coronavirus pandemic may feel new to many of us, this is nothing new to history. In fact, dozens of pandemics, very similar to this one, have preceded this one! So, what does this mean for us educated, critical and reflective 21st century inhabitants of this planet? It means that maybe the history of pandemics can end here...

Here is a list of history's most famous pandemics. Happy reading and maybe our covid-19 pandemic won't feel so alien anymore!





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1. The Great Plague of Athens

When: 430-426 BC, during the second year of the Peloponnesian war fought between Athens and Sparta



This copper engraving by Matthaus Merian depicts the Athenian naval defeat near Corinth over the Corinthian and Spartan fleet around 430 B.C.E.

Total number of deaths: 100,000 people or one third of the population of Athens

Interesting facts about the disease: Symptoms include redness and inflammation of the eyes, throat and tongue, difficulty breathing, violent coughing, vomiting. Most of those affected died within 7-9 days

It is believed to have originated in sub-Saharan Africa, just south of Ethiopia. The disease then swept north and west through Egypt and Libya across the Mediterranean Sea into Persia and Greece.

The Great Plague of Athens, was a disease that changed the course of the Peloponnesian War, and shaped the peace that came afterward, planting the seeds that would destroy Athenian democracy.

Most of what we know about the outbreak comes from the extensive record of the famous Greek historian, Thucydides, in his work: *The History of the Peloponnesian War*. Even though his book mostly focused on the war itself, a section was dedicated to the disease, as it had great consequences for the war's outcome. Moreover, Thucydides himself suffered from the plague. By adding the plague section, he hoped a future physician would be able to identify which disease matched the symptoms observed.

Despite Thucydides meticulous work, the exact disease behind the Great Athenian Plague has not yet been identified. Some argue it was Typhus, some Typhoid, or smallpox and even Measles. However, it is interesting to note how he understood the ways in which this disease exploited the moral weakness of the Athenians, which had fatal consequences for the fate of the nation.

What is also interesting is how the disease spread so fast, seeing as the Greek were known for their rather advanced sense of hygiene. In fact, the plague could have been contained if it had not been for the state's decision to lock the city of Athens to prevent further spreading, while it was crowded with foreign refugees and inhabitants of the countryside. This overstretched the city's infrastructure and resources, and set up the conditions for an epidemic. At this point, the city was in complete chaos; refugees and those from the countryside occupied sacred buildings, sanitary conditions were deteriorating, local drink water had been contaminated, etc.

However, at the time, most of the above were being ignored as the Athenians pointed to the plague as evidence that the gods favored Sparta. This was supported by an oracle's prediction that Apollo himself (the god of disease and medicine) would fight for Sparta if they fought with all their might. An earlier oracle had also warned that "A Dorian [Spartan] war will come, and bring a pestilence with it" (ie: the Spartans had contaminated the water).



Michiel Sweerts' *Plague in an Ancient City*
(circa 1652)

The consequences of the plague were felt in all levels of society. On a social level, Thucydides stressed in his book that “the violence of the calamity was such that men, not knowing where to turn, grew reckless of all law, human and divine.” The Athenians went into a complete state of rebellion when they felt their death was near; no law, whether civil or divine, mattered at this point. Money was being spent impulsively and men were engaging in adultery. Moreover, loyal worshippers lost trust in the protection of their gods, as the plague attacked both believers and non-believers, burial rites were overlooked; people were now simply thrown in improvised mass graves. People were also dying alone because the disease was so contagious that family members feared to take care of their sick loved ones.

Militarily the plague destabilised the Athenian army, which would later be defeated. However, while the plague killed many valuable warriors, it is only when it killed Pericles, the great general of Athens, that matters took a dark turn. So far, Pericle's far-

sighted policies had put the Athenians in a dominant position in the war, and victory seemed imminent. He had recognised the value of Athen's sea power as a buffer against Sparta's strong land army, but rather weak naval army. But, when the general passed away, his replacement was much less competent and essentially led Athen's to defeat.

The calamity of the plague was a turning point in history, laid however in the aftermath of the war, when the newly occupied Athens was ripped of its modern democratic system, and was now being ruled by a pro-Spartan oligarchy: the Thirty Tyrants. The plague had resulted in the end only temporary though, of Athenian democracy.

Want to read more?

<https://www.theatlantic.com/ideas/archive/2020/03/great-plague-athens-has-erie-parallels-today/608545/>

<https://www.ancient.eu/article/939/the-plague-at-athens-430-427-bce/>

https://www.jstor.org/stable/44443484?seq=10#metadata_info_tab_contents

https://digilib.phil.muni.cz/bitstream/handle/11222.digilib/136470/1_GraecoLatinaBrunensia_22-2017-1_14.pdf?sequence=1



2. Smallpox

When: first appearance in 3BC in Egyptian mummies, though the first major outbreak only occurred in the 18th century.

Total number of deaths: exceeding 900 million

Interesting facts about the disease:

Smallpox is categorised as a disfiguring disease, and is caused by the *variola* virus. It is spread by secretions from an individual's nose and mouth and is considered highly contagious.

When infected with the virus, an individual will experience a fever and a couple days later develop a severe rash. The rash appears in the form of pocks present across the whole body. The pocks develop through consecutive stages: papules appear on days 3 & 4; vesicles on days 5 & 6; pustules on days 7, 8 & 9; and finally scabs on the following days.



A child with smallpox in Bangladesh in 1973.

Everyone reading this has probably heard of or experienced chickenpox at least once in their lives, but probably not heard about the equally contagious smallpox disease.

The disease has been found mentioned in medical writings from ancient India. It is considered that Egyptian traders brought Smallpox to India during the 1st millennium BCE. It remained an endemic disease for 2000 years. Nevertheless, the first major dated outbreak of the virus occurred in the 18th century. It is estimated that during this time 400,000 people died every year from Smallpox and that it killed around 300 million people in the 20th century and around 500 million in the last 100 years of Smallpox's existence. Surprisingly even up until 1967, around 15 million cases were still being recorded every year. Most famously, Queen Mary II of England, Holy Roman Emperor Joseph I, French King Louis XV and Tsar Peter II of Russia all died of the disease. In 1796, the Smallpox vaccine was developed by Edward Jenner. He observed that dairymaids

that had experienced cowpox did not get smallpox. This gave him the idea of exposing people to cowpox on purpose (a much less virulent disease) and this worked to prevent people getting Smallpox. The vaccine was developed and smallpox has now been eradicated.

The last ever naturally occurring case of Smallpox was recorded in 1975 in Bangladesh. For years, the World Health Organisation (WHO) had been trying to eradicate the disease through vaccinations and isolation methods. Finally, in 1980 the WHO declared, "The world and its peoples have won freedom from smallpox..." The virus was able to be eradicated somewhat easily as it cannot naturally exist. Unlike Ebola, yellow fever, HIV, or the flu, smallpox does not have an animal reservoir. Without the use of human technology, smallpox cannot exist naturally.



Most famous image capturing the effects of Smallpox captured by Allan Warner

In 1978, two years before Smallpox eradication, a chilling and controversial case occurred. Smallpox was handed over to many labs for research purposes. Janet Parker, a woman working at the University of Birmingham Medical



School, caught the virus. She was quarantined and hospitalised, however passed away two weeks after catching the virus. The virus had supposedly travelled through air ducts to her office from a lab researching the virus. A scientist researching the virus at the university, blamed himself for her death and cut his throat a few days after her death. This called for the WHO to destroy all Smallpox samples or for them to be sent to official repositories, one in Siberia and one in Atlanta. Surprisingly, in 1992 another suspicious case arose. Ken Alibek – formerly Colonel Kanatzhan Alibekov - made allegations against the former Soviet Union. Alibek was the first deputy director of Biopreparat, the Soviet Union's biological warfare agency. He claimed that the Soviet Union had produced 50 tons of Smallpox. However, even though no concrete evidence was ever found it still spread fears of biological warfare. Moreover, an anthrax scare in 2001 greatly increased these fears. There was even 'credible concern' from the U.S. Centers for Disease Control and Prevention that terrorists had obtained the virus and were planning to use it in warfare.

When the WHO put the eradication plan in motion in 1967, countries had to deal with the incurred healthcare costs. It has been estimated that the program cost around 300 million US dollars in total from 1967 till 1977. One third of this funding came from international donors and the

remaining two thirds from endemic country governments. Overall, smallpox cost low-to-middle income countries more than \$1 billion per year at the beginning of the eradication program in 1967, with over \$20 million dedicated to the care of infected patients. However, industrialised countries had much lower costs. They incurred \$350 million in costs, including vaccination programs and absence from work costs. As a whole the eradication of Smallpox had cost the world over \$1.35 billion at the end of 1969.

Despite the high financial cost, Smallpox eradication was a huge turning point in history. It had been the first ever disease that had been fully eradicated by the use of vaccinations. It is seen as one of the greatest medical achievements of the 20th century. Furthermore, it was a major global effort, the WHO eradication program united people all over the world. For a moment, people set aside their political, social, and economic differences. Through political will, inventiveness, technology, capital, and commitment the virus was finally eradicated.

"Smallpox was a democratic scourge, afflicting people of every race, class, and social position: Cosmetics were

invented to mask the ruined complexions of the rich. The disease killed royalty as well as commoners, disrupting dynasties and alliances and repeatedly changing the course of world history."

Jonathan B. Tucker; Scourge: The Once and Future Threat of Smallpox

Want to read more?

www.nzherald.co.nz/lifestyle/news/article.cfm?c_id=6&objectid=12238650.

ourworldindata.org/smallpox.

Kilian, Crawford. "The Enduring Politics of Smallpox." The Tyee, 9 Nov. 2011,

www.livescience.com/7509-smallpox-changed-world.html.

www.bbc.com/future/article/20140130-last-refuge-of-an-ultimate-killer.

www.who.int/csr/disease/smallpox/vaccines/en/.



directions; north to Alexandria and east to Palestine.

The plague was transmitted by the black rat which traveled on grain ships. The grain was then stored in warehouses which provided the perfect breeding ground for fleas and rats which would be crucial to the spread of the disease. *Yersinia pestis* is the same bacterium responsible for the Black Death (1347-1351).

According to historian, Colin Barras, southern Italy experienced colder temperatures which along with social disruptions, war, and the first recorded outbreak of the plague, the harvest was affected which led to food shortages. This forced people to migrate but as they migrated they brought along plague infected rats. People that were cold, tired, and diseased in the midst of a war, as well as the infested rats, created perfect conditions for an epidemic. It would be named after the emperor, Justinian I, and affect nearly half of Europe's population. It would also be considered the first historically recorded epidemic of *Yersinia pestis*.

Based upon DNA analysis of bones found in graves, the type of plague which had struck the Byzantine Empire was bubonic, the same bubonic plague which would devastate Europe in the 14th century.

3. Plague of Justinian

When: 542 AD

Total number of deaths: 50 million people, about half of the world's population at the time

Interesting facts about the disease:

During the time of the Eastern Emperor, Justinian I who reigned from 527-565 AD, there was a plague which is considered one of the worst outbreaks in history which claimed millions of lives. In 542 AD the plague arrived in Constantinople and continued to spread throughout the Mediterranean until 750 AD. It originated from China and northeast India. The plague, which is called *Yersinia pestis*, then was carried to the Great Lakes region in Africa through land and sea trade routes. The plague of Justinian originated in Egypt. According to author Wendy Orent, the plague spread in two



Plague of Justinian

Procopius, a Byzantine Scholar, in his *Secret History*, describes how victims of the plague would suffer from delusions, nightmares, fevers and swellings. Many victims suffered for days before eventually succumbing to their deaths, while some would die immediately. Procopius' description of the outbreak almost certainly confirms the presence of bubonic plague as the main culprit of the outbreak, although Procopius blamed the emperor claiming Justinian was either a devil or was being punished by God.



Infected monks. Religious figures were often the highest demographic of the diseased, as they had to perform last rites on the sick and dying.

The outbreak lasted around 4 months in Constantinople but would last for the next three centuries. Then it would disappear until the 14th century.



Even the Emperor caught the disease although he did not die. Dead bodies littered the streets, and Justinian I ordered troops to assist in the disposal of the dead. Once graveyards and tombs were full, burial pits and trenches were dug to deal with the massive amount of bodies. Bodies were disposed of in building or dumped into sea or placed onto boats and pushed out to sea.

Once people were affected there were two ways to go about treatment; treatment by medical personnel or home remedies. However there was a lack of physicians so most people who were infected resorted to home remedies. The various approaches would be; cold-water baths, be "blessed" by saints, magic jewellery, and various drugs.

The plague effectively contributed to the economical and political weakening of the Byzantine Empire. As the disease spread through the Empire, their abilities to defend themselves from enemies weakened. By 568 AD, the Lombards were able to successfully invade northern Italy which fractured the Italian peninsula which remained divided until the reunification in the 19th century AD. In the Roman provinces of North Africa, the Empire was unable to prevent the Arab invasion. The main reason for the decreased size of the Empire's army was due to the lack of recruits due to the spread of illness and death. Not only was the military affected as well as its

defenses but also the economic structures of the empire began to collapse.

Trade was disrupted and the agricultural sector received a massive blow. Throughout the entire Empire, around 25% of the population died.

Want to read more?

Horgan, John. "Justinian's Plague (541-542 CE)." *Ancient History Encyclopedia*. Ancient History Encyclopedia, 26 Dec 2014.



The Black Death, sometimes also referred to as the 'black plague' or the 'Great Bubonic plague', was one of the most devastating pandemics in human history. It initially originated in Asia, wherefrom it reached Europe, through various trade routes.

In Europe, the Black Death arrived through one of the first instances of Biological warfare. Mongolia Khan Jani Beg's troops had caught the plague while besieging a Genovese trading port called Kaffa in what is now Crimea, in 1347.

Jani Beg catapulted his dead soldiers that had caught the disease into the city after which the infected Genovese troops brought it back to Europe. The plague landed in Genoa through ships whose sailors were already dead or dying. From there it spread like wildfire in an overly populated Europe due to bad hygiene and poor living conditions.

4. The Black Death

When: 1347-1351 with repeated outbreaks every 10 years

Total number of deaths: Estimates vary, but approximately one third of Europe's population died from the first outbreak and two thirds from later outbreaks. This amounts to approximately 200 million deaths.

Interesting facts about the disease: Symptoms include diarrhea, fevers and chills, overall weakness, seizures and in some cases, the skin would literally turn black

Caused by a bacterial strain called *Yersinia pestis*, and spread through humans and rats.

Many people however did not understand how the plague worked and saw it as God's punishment. This caused waves of anti-semitism throughout Europe as people thought they needed to get rid of non-christians in order to receive forgiveness from God. This caused disasters such as the burning of Jews to occur as people blamed them for the plague. Jews were also used as scapegoats for the plague as they had lower mortality rates. These lower death rates have been attributed to better hygiene amongst the Jews.

The persecution of the Jews led them to flee to Poland and Russia and other parts of Europe less affected by the plague.

The Roman Catholic Church was also affected and it lost some of its monopoly power as people turned to mysticism. For instance, a group known as Flagellants, would beat themselves to achieve redemption. They would travel from town to town and beat themselves and each other three times a day for 33 days. This was finally stopped when the Pope retracted his support of these groups after they became too excessive.



Flagellants during the Black Death

The plague also had tremendous economic impacts. Due to the lack of workers peasants were able to demand much higher wages and received much better jobs. If Lords refused to give the peasants better wages and working conditions the peasants were able to go work for a different lord who would provide them with better conditions. This was because there was such a shortage of workers that the landowners had no choice but to improve labour conditions. This gave them a better standard of living



and improved life for the peasants that had survived.

These improved conditions remained and translated into more power for the peasantry. This gave them more power which can be seen by peasant revolts in 1358 in Northern France.

In the end it can be said that the black death was a turning point in history as it marked the end of the middle ages and gave birth to a new era: The Renaissance.

Want to read more?

<https://www.britannica.com/event/Black-Death>

<https://www.history.com/topics/middle-ages/black-death>

https://www.brown.edu/Departments/Italian_Studies/dweb/plague/effects/social.php

<https://www.bbvaopenmind.com/en/humanities/sociology/the-black-death-turning-point-and-end-of-the-middle-ages/>



disastrous effects; each side lacked immunity to the local diseases.

Below is a table with the most common diseases which spread the

1492 Syphilis	Syphilis was brought and spread through Europe by sailors who had returned from the Americas.
1493 Malaria	Malaria was brought to the Americas by Columbus and created habitats favourable for a native mosquito species which was able to transmit diseases easily.
1500 Measles	Measles was introduced to the Americas unintentionally by the Europeans. The natives have never before been introduced to the disease and thus was catastrophic for them.
1520 Aztec Smallpox	Smallpox was introduced to the Aztec;s capital city by the Spanish occupiers.

	Introduced by an infected soldier in Cortés' army, it infected half of the population.
1525 Inca Smallpox	Smallpox also came to the Inca Empire brought by European sailors, which ended up killing over 200,000 people.
1648 Yellow Fever	Introduced to the Americas and Europe most severley through the slave trade. The disease is spread by mosquitoes which survive the best in tropical conditions. Thus, Yellow Fever died down once winter came. However, it was very deadly with symptoms just like the ones of a regular flu, 15 people out of those showing symptoms were infected by yellow fever which was followed by a high death rate.
1700	Chicken Pox

5. Columbian Exchange

When: 15th and 16th century

Total number of deaths: unknown but ranging in the dozens of millions

Interesting facts about the disease:

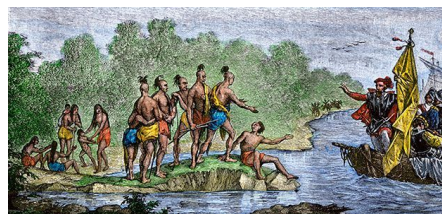
The Columbian Exchange was the exchange of ideas, food, populations, but also diseases between the “Old world” Eurasia and Africa and the “New world” the Americans, which was due Christopher Columbus bringing the two world’s together in his journey in 1492. While the exchange can be argued to have been beneficial for both sides, the subsequent spread of diseases had



Chicken Pox	was introduced to the New World, Americas by the European settlers, sailors and travelers. The disease mostly affects children and at first was deadly because people of the Americas were not used to it and had no antibodies to fight it off.
Pertussis/ Whooping Cough	The Europeans Brought Whooping cough to The Americas. Whooping cough is an airborne disease, sailors and goods infected by it, weren't really aware they were spreading it, because in this time period, germs and diseases weren't really known of. The disease was spread just by coughing. Thus, since the Native Americans were not introduced to the disease before they had no immunity to

	it which caused numbers of deaths and made colonization by the Europeans easier.

It is interesting to note, though, that sometimes it isn't exactly clear whether a new disease present in Europe had in fact been brought back from the Americas or whether it originated from another source. For instance, it is commonly assumed that syphilis originated in the Americas and was initially brought back to Europe by the first Spanish sailors. This assumption was based on the fact that the disease first began to be reported in Europe shortly after Columbus returned from his first voyage to the Americas. However, the archaeological record, in the form of burials in England, have disproved this assumption. At Hull, four skeletons of individuals who had died in the mid-fifteenth century show fully developed tertiary syphilis. This is evidence that the disease was already well established in Europe at least a half a century before Columbus set sail.



The spread of these diseases across the Atlantic ocean resulted in a large number of deaths on both sides, far higher even than the Black Death. In fact, these diseases could even have had the potential to wipe out the entire indigenous population in the Americas. Eventually, both sides started to build immunity and the death tolls were falling.

The Columbian exchange did foster mercantilism and colonial mercantilism, which brought economic welfare to both the 'old-man's world' and the 'new-man's world'. However, this event in history also revealed one of the major negative aspects of globalisation and international trade.

Want to read more?

<http://nativeamericannetroots.net/diary/325>

<https://storymaps.arcgis.com/stories/c9b272595b7f4d2f846d68172e1a2296>

http://scholar.harvard.edu/files/nunn/files/nunn_qian_jep_2010.pdf

<https://www.npr.org/sections/goatsand Soda/2016/08/28/491471697/yellow-fever-timeline-the-history-of-a-long-misunderstood-disease>

<http://www.malaria.com/blog/american-plasmodium-vivax>



6. The Great Plague of London

When: 1665-1666

Total number of deaths: the amount of recorded deaths amount to up to 68,596, but it is expected that the real numbers actually exceed 100.000, the equivalent of 15% of London's population.

Interesting facts about the disease: Symptoms included swellings in the lymph nodes (found in armpits, groin and neck), headaches, vomiting and fever. Plague sufferers of this kind had a 30% chance of dying within two weeks, with incubation taking only 4–6 days.

In the spring and summer of 1665, London experienced an outbreak of the Bubonic plague, and it soon became the worst outbreak that had occurred in the area since the Black Death (1348). Although the outbreak was mainly concentrated in and around London, other parts of England also suffered from this outbreak.



The poorest areas, typically parishes (a small administrative district typically having its own church and a priest or pastor), were the most affected with the highest death rates. Indeed, the earliest cases of the disease occurred in the spring of 1665 in a parish outside the city walls known as St. Giles-in-the-Fields.

It should be noted that at the time there were 3 main types of plague, the bubonic plague, pneumonic plague and the septicaemic plague. Most of the sick in 1665–1666 had the bubonic plague.

The pneumonic and septicaemic plague was even worse in terms of survival rates. The pneumonic plague attacked the lungs and easily spread to other people through coughing and sneezing, whilst the septicaemic plague occurred when the bacteria entered the bloodstream. Plague sufferers of the latter two had little chance of survival.

It has been speculated that the second wave of bubonic plague pandemic originated in China and spread through Europe through trade. The bubonic plague was caused by the *Yersinia pestis* bacteria,

which is transmitted by fleas living on rats. The city streets filled with rubbish and waste attracted rats, especially in the poorest areas. However at the time, it was believed that impure air is what caused the disease and therefore the treatments and prevention attempts were ineffective. People believed that the air could be cleansed by smoke and heat. Children were encouraged to smoke to ward off bad air. Other prevention and treatment attempts included bleeding patients with leeches and sniffing sponges soaked in vinegar.



The death rate began to rise during the summer months, and peaked in September when 7,165 people died in one week. Many people fled, including doctors, lawyers and merchants, leaving only the poor, the Lord Mayor and the aldermen (town councillors) within the city. The Lord Mayor and aldermen remained in London to enforce the



King's orders to stop the spread of the disease.

In June, the Mayor closed the gates of London to people without a health certificate as people kept trying to escape from the city. Watchmen were employed to enforce quarantine. Infected houses containing a person infected or killed by the disease were locked in with their entire families. These houses were sealed from the outside and had Watchmen keeping guard. Red crosses were painted on doors to distinguish which houses were infected. White crosses were painted on when houses fulfilled the 40-day quarantine period and showed no sign of the disease anymore. More often than not, entire families would end up infected. Searchers were in charge of gathering the bodies and moving them to secluded areas for burial.

Coping with the outbreak of the plague placed a strain on the economy and society. All trade with London and other plague towns stopped. The Council of Scotland declared that the border with England would be closed. There were no fairs or trade with other countries which resulted in many people losing their jobs. People's lives and businesses suffered because many were shut in their homes. Many people were forced to beg or steal food and money.

When the weather began getting colder, the number of plague victims started to fall and the death toll

began to slow. Plague cases continued at a moderate rate until the summer of 1666. In September of 1666, London suffered from what is now known as the Great Fire of London, which destroyed a large part of the City of London. Some believed that the fire put an end to the epidemic, however it is now believed that the plague had subsided before the fire took place. Modern historians have suggested that the plague had little effect on England, scientific and economic growth continued rather unaffected, with even the worst-affected towns recovering relatively quickly. However, in plague scares after 1666, more effective quarantine methods were used for ships coming into England and there was never an outbreak of this scale in Britain in subsequent years.

Want to read more?

www.britannica.com/event/Great-Plague-of-London.

www.historic-uk.com/HistoryUK/HistoryofEngland/The-Great-Plague/.

www.nationalarchives.gov.uk/education/resources/great-plague/.

"The Great Plague In London." The British Medical Journal, vol. 2, no. 3336, 1924, pp. 1069–1070. JSTOR, www.jstor.org/stable/20438634.

Stenseth, Nils Chr. "Plague Through History." Science, vol. 321, no. 5890,

2008, pp. 773–774. JSTOR, www.jstor.org/stable/20144535.



7. Polio

When: 20th century

Total number of deaths: unknown

Interesting facts about the disease:

Poliomyelitis or more commonly known as polio is described by the World Health Organization as a 'highly infectious viral disease, which mainly affects young children.'

It's transmitted through the fecal-oral route or, less frequently through things like contaminated food or water. It multiplies in the intestine and can later spread to the nervous system and therefore even causes paralysis.

Its main symptoms include fever, fatigue, headache, vomiting, stiffness in the neck, and pain in the limbs. In extreme cases it can cause paralysis, which often occurs to be permanent.

Despite there being assumptions that polio as a virus occurred in Ancient Egypt, speculated through the paintings and carvings that depict people with withered limbs, and

children with canes at a young age, the polio epidemic only became prevalent in the 20th century. The earliest epidemic was seen to be in Vermont, United States in 1894, which resulted in 18 deaths and 132 cases of permanent paralysis. The next country to be recorded to be affected by the epidemic were Scandinavian countries like Sweden and Norway in 1905 where 1,301 cases were reported.

Before the vaccine was invented by Jonas Salk in 1955, the virus paralyzed and killed up to half a million people every year. It wasn't until 1991 when America was certified polio-free and 2002 for Europe. Unfortunately, despite having made immunisation progress by 2003 by having been driven out from 46 countries, the polio immunisation program was suspended in Kano, Nigeria, resulting in a further outbreak across the continent. Polio still remains to be a common issue in Africa, recently being caused due to a mutation of strain in the vaccine.



An emergency polio ward in Boston in 1955 equipped with iron lungs. These pressurized respirators acted as breathing muscles for polio victims, often children, who were paralyzed.

When there was a polio outbreak in New York in 1916, there were rumours that the virus was brought by Italian immigrants from Naples or that the virus was spread by cats which resulted in 72 000 cats being hunted down and killed.

Irish Cockburn, an Irish Polio Epidemic survivor, recalls his memories of witnessing the outbreak in Cork. He recalls how the local people would not take the severity of the outbreak seriously and that it was over-exaggerated by the government. Similarly, the people of Dublin would call for closing the railway line from Cork with the exclamation, 'Let Cork's own people keep their Polio and not infect our clean city.'

Other impacts of the outbreak were such as closing of swimming pools and movie theaters (mostly during the summer, as it always seemed to breakout during this season). Children were prevented from visiting playgrounds or birthday parties. The most prominent effect of polio was the fact that it affected the future President Franklin D. Roosevelt in 1921 when he was 39 years old. Despite keeping his paralysis from polio hidden from the public, he organised the nonprofit National Institute for Infant Paralysis. This organisation encouraged every American to, especially school children, to send dimes (10 cent coins) to the White House to support the treatment of polio and for further research for a cure. This was a turning-point in



American philanthropy, as previously it was mainly the domain of the wealthy.

Want to read more?

https://www.who.int/health-topics/poliomyelitis#tab=tab_1

<http://www.truevaluemetrics.org/DBpdfs/Health/Polio/Kul-Gautam-History-of-Polio.pdf>

<https://www.theguardian.com/global-development/2019/nov/28/polio-outbreaks-in-four-african-countries-caused-by-mutation-of-strain-in-vaccine>

<https://www.counterpunch.org/2020/01/28/chinas-coronavirus-outbreak-reminds-me-of-the-irish-polio-epidemic-i-survived/>

<https://theconversation.com/the-deadly-polio-epidemic-and-why-it-matters-for-coronavirus-133976>



8. The Spanish Flu

When: 1918

Total number of deaths: +50 million worldwide, of the 500 million people or one-third of the world's population infected

Interesting facts about the disease:

The 1918 influenza pandemic, and as previously mentioned, more commonly known as the Spanish flu pandemic, is regarded as one of the most severe pandemics in recent history. The disease gets its name from the fact that Spain was one of the earliest countries where the epidemic was identified, though historians believe this was likely a result of wartime censorship. Spain was a neutral nation during the war and did not enforce strict censorship of its press, which could therefore freely publish early accounts of the illness. As a result, people falsely believed the illness was specific to Spain, and the name "Spanish flu" stuck.

It was caused by an H1N1 virus with genes of avian [bird-like/flying creatures] origin. Although there is

no universal consensus regarding where the virus originated, it spread worldwide during 1918-1919. In the United States, it was first identified in military personnel in spring 1918.



Crowded conditions and the movement of troops during World War I likely contributed to the spread of the 1918 virus around the world.

Initial symptoms of the illness included a sore head and tiredness, followed by a dry, hacking cough; a loss of appetite; stomach problems; and then, on the second day, excessive sweating. Next, the illness could affect the respiratory organs, and pneumonia could develop.

When an infected person coughs, sneezes or talks, respiratory droplets are generated and transmitted into the air, and can then be inhaled by anyone nearby.

Additionally, a person who touches something with the virus on it and then touches his or her mouth, eyes or nose can become infected.

Mortality was high in people younger than 5 years old, 20-40 years old, and 65 years and older. The high mortality in healthy people, including those in the 20-40 year age group, was an unfortunately unique feature of this pandemic. While the 1918 H1N1 virus has been synthesized and evaluated, the properties that made it so devastating are, to this day, still not well understood. With no vaccine to protect against influenza infection and no antibiotics to treat secondary bacterial infections that came about and were associated with influenza infections, control efforts worldwide to damage limitation were limited to non-pharmaceutical interventions such as isolation, quarantine, good personal hygiene, use of disinfectants, and limitations of public gatherings, which were not applied evenly and consistently.



An emergency hospital at Camp Funston, Kansas, 1918. "Of the 12 men who slept in my squad room, 7 were ill at one time," a soldier recalled.

Doctors were at a loss as to what to recommend to their patients; many physicians urged people to avoid crowded places or simply other people. Others suggested remedies included eating cinnamon, drinking



wine or even drinking Oxo's meat drink [a form of beef broth]. Doctors also told people to keep their mouths and noses covered in public. At one point, the use of aspirin was even blamed for causing the pandemic, when it ironically might actually have helped those infected. Moreover, at the time of the outbreak, World War I was coming to an end and public health authorities had no or few official protocols in place for dealing with viral pandemics, which contributed to its large impact.

The political implications of the spanish flu included difficulties during the elections in Spain. This has to do with the low turnout of voters, as many of them were getting fatally ill. One candidate therefore decided to campaign by car, stopping the vehicle and having an aide play a cornet to draw a crowd. However, soon public gatherings were to be banned as well. At the polls, workers in some places wore masks and voters spaced themselves as they queued up.

The immediate economic consequences of 1918 stemmed from the panic surrounding the spread of the flu. Large US cities, including New York and Philadelphia, were essentially temporarily shut down as their populations became bedridden. Businesses were closed, sporting events cancelled and private gatherings (even including funerals) were banned to stem the spread of the disease. Later, the pandemic also caused labour shortages and wage increases, but also the increased use of social security systems. Economic

historians do not agree on a headline figure for lost GDP because the effects of the flu are hard to disentangle from the confounding impact of the first world war.

The long-term consequences proved horrific. A surprisingly high proportion of adult health and cognitive ability is determined before we are even born. Research has shown the flu-born cohort achieved lower educational attainment by adulthood, experienced increased rates of physical disability, enjoyed lower lifetime income and a lower socioeconomic status than those born immediately before and after the flu pandemic.

In the years to come, research into understanding how the pandemic happened and how it could have been prevented led to improvements in public health and helped lessen the impact of similar outbreaks of flu-like viruses afterward.

Want to read more?

www.nationalgeographic.com/history/magazine/2018/03-04/history-spanish-flu-pandemic/.

www.cdc.gov/flu/pandemic-resources/1918-pandemic-h1n1.html.

www.livescience.com/spanish-flu.html.

www.history.com/topics/world-war-i/1918-flu-pandemic.



9. The Hong Kong Flu

When: first outbreak in Hong Kong on July 13th 1968.

Total number of deaths:
approximately 1 million

Interesting facts about the disease:

The Hong Kong Flu Was a flu outbreak that originated in the area of Hong Kong, however it eventually spread to other countries worldwide such as Vietnam, Singapore, India, the Philippines, northern Australia, Europe, Japan, going on to reach Africa, and South America.



Red Guard in China with masks to ward against the flu (1967)

In January of 1970 a report in the New York Times stated that various scientists believed that “at least three of the recent pandemics of Influenza began in mainland China.” A doctor in a Hong Kong hospital stated that she believes that the Hong Kong Flu had apparently originated from the same source as the Asian flu of 1957,

which was believed to be the People’s Republic of China.

The Hong Kong Flu Was a category 2 flu pandemic. It was highly contagious, spreading from animals to humans. To give you an idea, 500 000 people in Hong Kong were infected within two weeks following its emergence.

The H3N2 Virus that caused the pandemic is still in circulation today, and is considered to be a strain of seasonal influenza. The infection was highly contagious, symptoms lasting for four to five days, and in some cases up until two weeks. The virus caused upper respiratory symptoms and problems such as fever, muscle pain and weakness.



Scores of patients crowd the waiting hall of a clinic on Hong Kong Island during the influenza epidemic in July 1968

In an article published July 24th 1968 a Hong Kong health official said that although clinics were packed and full, that little could actually be done and that the best thing to do for those infected would be to stay home in their bed until their conditions would improve, advising the infected people to take

aspirin, tea, whisky, brandy, or lemon drinks.

To minimize the spread, many countries had to work together and also collaborated in developing a vaccine against the virus. A World Health Organisation report from 1969 stated that Hong Kong really pointed to the effectiveness of this collaboration.

Despite the increase in international collaboration, the flu did have severe economic impacts. According to an article from a Hong Kong newspaper written July 25th 1968, it stated that “Worst hit among the public utilities were the Hongkong telephone Co, and China Light and Power. Two hundred of 300 workers of each company were affected.” There were also other smaller economic impacts across areas such as North America where more people were absent in work, and in schools.

The reaction to the virus was also somewhat of a turning point in history, as it allowed for further medical research, and development in the area of that virus, and influenza as a whole. The development of a vaccine was crucial, as it had allowed for humans to reach a step further in battling various strains of influenza virus types. However, the virus outbreak itself was not so much of a turning point in history due to previous similar flu epidemics such as The Spanish Flu in 1918 and The Asian Flu In 1957-1958.



Nonetheless, just like any other pandemic, the Hong Kong Flu taught humans new ways to deal with and battle off various types of viruses, Influenza strains, and later pandemics.

Want to read more?

<https://www.britannica.com/event/Hong-Kong-flu-of-1968>

<https://www.scmp.com/lifestyle/health-wellness/article/2154925/how-hong-kong-flu-struck-without-warning-50-years-ago-and>

<https://www.medicinenet.com/script/main/art.asp?articlekey=26429>



10. HIV/AIDS

When: 1981

Total number of deaths: 32 million

Interesting facts about the disease:

HIV/AIDS was first clinically observed in the US, in 1981, by a French virologist, Françoise Barré-Sinoussi. This was brought to the attention of medical researchers, when a large group of injection drug users and gay men with no previously known immune deficiencies showed signs of a type of pneumonia that only occurred in immuno-compromised people. Soon after, several gay men developed a rare type of cancer, called Kaposi's sarcoma.

HIV (human immunodeficiency virus) is a type of Lentivirus, that leads to the development of AIDS (acquired immune deficiency syndrome). Symptoms most commonly include fever, large tender lymph nodes, throat inflammation, a rash, headache, tiredness, and/or sores of the mouth and genitals. AIDS leaves the human body extremely vulnerable to any little opportunistic virus, bacteria, fungus or cancer. HIV is transmitted through sexual intercourse, childbirth, or the exchange of bodily

fluids like blood. The latter is the most common method of contraction.

HIV/AIDS is classified as a global pandemic. Since the beginning of the epidemic, 75 million people have been infected with the HIV virus and about 32 million people have died of HIV. The region that is affected the worst is Sub-Saharan Africa. 68% of cases and 66% of deaths occur here.

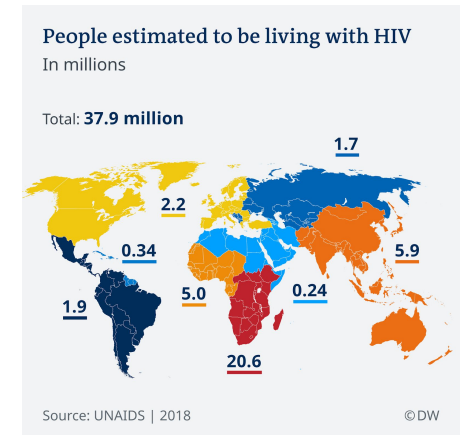
Three of the most common are that AIDS can spread through casual contact, that sexual intercourse with a virgin will cure AIDS, and that HIV can infect only gay men and drug users. In 2014, some among the British public wrongly thought one could get HIV from kissing (16%), sharing a glass (5%), spitting (16%), a public toilet seat (4%), and coughing or sneezing (5%).

Operation INFEKTION was a worldwide Soviet active measures operation to spread the claim that the United States had created HIV/AIDS.

A surprisingly common misconception on the origin of AIDS, is that AIDS was the result of a human having sexual intercourse with a monkey.

In 2002, the National Council of Societies for the Prevention of Cruelty to Animals (NSPCA) in Johannesburg, South Africa, recorded beliefs amongst youths that

sex with animals is a means to avoid AIDS or cure it if infected.



Want to read more?

<https://www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/what-are-hiv-and-aids>

<https://www.avert.org/professionals/history-hiv-aids/overview>



Future generations, will you
let history repeat itself, again?



From The Front Lines

In these odd times, each and everyone has been required to mobilize themselves against the fast spreading army of the coronavirus. But, there are some professions and jobs, whose roles are now more important than ever: doctors, nurses, police officers, but also all those involved in food distribution. In fact, in the Netherlands, the most banal side job of working at a supermarket has never been so important, but, as you may suspect, many things have also changed for these employees. Empty stocks, cranky customers, paranoids who come come up with creative solutions to ‘protect’ themselves from the virus, traffic at the entrance of shops, shopping carts blocking alleys etc. So, in order to hear what it’s really like working at a supermarket in these times we asked a few of them to give us a briefing of their recent work experiences on the front lines.



JUMBO





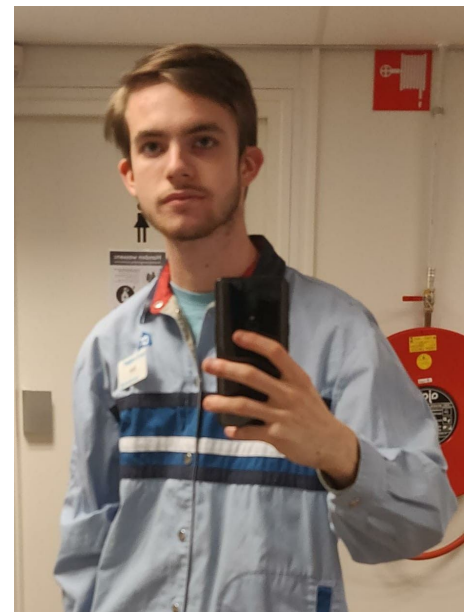
Stijn van beek - Cashier at Albert Heijn - Voorburg

Due to the corona crises people have become a lot less friendly while shopping, because of the fear that this virus has installed in them. Because of this people become angry in situations which are out of our control, such as empty stocks or changes in store policy. The toilet paper is one of the best examples of this. One day I was filling up the toilet paper even though someone had already done it half an hour before. This would usually last us 5 days but it was already gone by the time I started. So toilet paper was being sold faster than we could even refill and everytime I turned around someone would grab 2 or 3 packages of toilet paper. I have never seen anything like this and it is sad to see how people during this crisis ignore the greater good of society and engage in this idiotic hampering behaviour. If everyone went about their normal shopping we would have had enough for everyone!

The atmosphere behind the cash register, where I usually sit, had also become a lot less friendly as customers did not like the new changes. To combat the virus, we are not allowed to give any saving stamps, such as for tupperware, and the printer for the receipt has been moved in order to have people grab it themselves. This did not go down well with some of the customers as some people got annoyed that they had to grab it themselves as they did not seem to grasp the safety aspect. Also, the store now has a policy that states that you have to pay with as little cash as possible. However, this is being ignored as well. These are just a few examples, but in general, it is strange to see that some people care more about themselves than the cashiers and other customers.

The coronavirus also brought in new jobs for those working at the supermarket such as cleaning shopping cart handles (all customers are required to take a cart with them in order to make customers keep a safe distance). The problem is that my colleague standing there alone could not handle the fast pace of arriving customers, so I had to offer to work longer. This meant that I had to work over my time limit without getting a break. Moreover, I also had multiple run-ins with customers who refused to take the carts into the shop. This resulted in minor arguments with people who claimed that I would not let them into the store. Furthermore, a lot of people are unhappy that it's a cart per person, which is to discourage people from shopping in groups. Nonetheless, I still see many groups of 3-4 teenagers who will come in and take 3 carts, only to buy one bar of chocolate, meaning that a lot of the people who have to do actual groceries have to wait for them. You wouldn't believe this, but there were actual lines outside the supermarket. Furthermore, we also reserve time slots for the elderly to come and do their groceries but one family member of mine who works in another store told me he nearly had to call the police as one customer was throwing a tantrum about not being allowed in during this time.

However, I must admit that there are also a lot of positive things that happened. The food hoarding has somewhat settled now and many customers thank us for our work. Moreover, going to work is a nice distraction from quarantine as I can have nice conversations with colleagues when it is not so busy, which helps a lot during these times.





Fleur Stolk - Bread section employee at Albert Heijn - Rotterdam

With the escalation of the corona crisis, I have started to witness rude behaviour from customers at the Albert Heijn. One day I had to tell customers that all the bread had finished due to the immense hoarding that took place in the morning. Usually when this occurs customers understand and reply in a friendly manner, however this time it was different. Upon telling the customers the news, I was scolded and told that this was unacceptable. Although, I have nothing to do with the stock of products in the store, customers still felt the need to blame me and my other colleagues for it. In one day, we made a profit three



times the size as normal, we also had been delivered almost twice as much stock. However, we also sold out many of our essentials such as bread, water, toiletpaper, and canned foods etc. This is all due to the fear that the government might declare a full lockdown, so people have started to act abnormally as they fear they will not have enough to sustain through the crisis. This comes even after the plea from the prime minister to stop hoarding as supermarkets receive enough stock. The rude behaviour has shocked me and I felt very belittled and weird when leaving the store that day. The corona crisis has shown the ultimate self-interest rooted in some individuals. This ultimately brings up the question, to what extent do we let emotions dictate action? When looking at this example, individuals are fearful of the virus and thus go to the supermarkets and hoard food that help sustain themselves through the crisis. However, upon

finding out there isn't much stock left, individuals resort to emotions and thus emotional reactions to help cope. The acts of hoarding, or as we say in The Netherlands 'hamsteren', has brought up fallacies as well: circular reasoning and bandwagon fallacies. People hamster food in order to have enough food, thereby ignoring the fact that if everyone did this there wouldn't even be enough for themselves. But, it even seems as though people hamster because everyone around them is doing it; hamstering has become a new trend.



Hilde de Vos - Cashier at the Jumbo - Breda

While working at the Jumbo as a cashier during this corona crisis, I have witnessed new types of behaviour among our customers. While you always have a couple of rude and cranky customers here and there, the coronavirus has made customers rude, fearful and angry. For instance, one day, while I was helping to fill the juices in the refrigerators, every 5-8 minutes a customer would hang over me to take their products. While I am not usually bothered with customers leaning over me, it is now completely unacceptable to do that and goes completely against the new regulation of keeping a safe distance of 1.5 meters at all times. Customers don't seem to care about the safety of the people working in the supermarket and completely neglect that we as employees should also need to be kept safe during these times, especially now that our job has become more important than ever. I am disappointed that our customers act with such a lack of sensibility. In fact, I would have been more than happy to step away for them to take whatever they needed, but I didn't even get the chance to do this as they are clearly more focused on hamstering.

This hamstering has also put great strains on Jumbo, Albert Heijn, and other supermarkets to keep up their stocks. To combat this, a limit was set on how many products can be purchased at a time (eg: toilet paper, long-lasting milk, and cleaning supplies). Of course, none of these limits would actually deprive clients, but rather force customers to shop 'normally' again, but not all of our customers seem to have accepted these new regulations. For instance, during check-outs I can now only scan a product a limited amount of times before it blocks (ie: due to the purchase limit), which has caused outrages among customers. They try to justify their purchases by saying that they aren't hoarding and that they should be able to buy whatever they want. In some extreme cases, some customers even resorted to swearing at me !

We have often discussed this problem among ourselves as colleagues as this madness has even installed some fear within us. We find ourselves in a complete situation that none of us have experienced before, so it is important that we all cooperate, but instead what we see is that people let their emotion control their behaviour and therefore start to act irrationally. The job looks completely different than before the outbreak.





Alexandra Kharitonova - Employee at Albert Heijn - Rotterdam

Working at the store has been quite a depressing experience because you just see people in desperation for certain products, yet unable to get them due to the over-bulk-buying behaviour exhibited by previous customers. People got more mean and aggressive towards you as a worker. This woman asked me to give her something and she grabbed the product with her jacket. It was comical, but at the same time simply depressing. I was coming to work not even to store things on the shelves, but to just bring them forward, because there was nothing to fill. When I was organising a crisis for an MUN I was thinking what could potentially shake the whole world and a virus outbreak was the one that came into my mind. Quite ironic that a virus outbreak in the end did indeed happen.

Anna-Sophia Kool - Employee at Albert Heijn - Rotterdam

The coronavirus outbreak is actually, and somewhat ironically, what brought me back to Albert Heijn seeing as I suddenly had loads of free time when our exams got cancelled. However, working at AH was not the same anymore.

At first, I was not worried at all to work at AH, even though it could be considered as one of the major coronavirus germ hubs right now. This is maybe because for employees not much has changed in our actual job, except for the fact that we all have to wear orange construction vests which state 'keep 1.5 m distance from each other'. However, I soon realized that while working, I am in a constant 'danger zone' to get in contact with the virus, and in fact I often think 'what if this thing I just touched was contaminated?' or 'what if that person who just coughed is sick?'. And, 'If I get sick? Will my immune system be strong enough to fight the virus?'. I did start wearing gloves while I work, for extra protection, but still it's hard to estimate how much protection and precaution is enough.

I say this because the 1.5 meter rule feels both safe, but also becomes frustrating at times. You have to imagine that the section where I often work is a refrigerated one that runs along the sides of the shop, and is perpendicular to the long shelf life aisles. This means it is a pretty narrow area, especially if I am standing there with my bulky filling cart and all the customers are trying to navigate through there with their shopping carts going in opposite directions,

while also trying to keep a 1.5 m distance. The perfect analogy for this scenario is morning traffic: a group of already slightly frustrated people trying to get from point A to B as fast as possible, where any minor complication could result in an outburst of rage. Of course, I respect the government's decision, but I just wish that everyone didn't have to be so on edge all the time.

There's one category of supermarket customers these days which are worth mentioning: old people. As we know from the news, old people are quite vulnerable to experience severe symptoms from the virus and may even die. Many of them therefore choose to shop early in the morning when the shop isn't so busy, but even then the irrational paranoia is there. For instance, I had this one old woman ask me to grab something for her but as I was handing it over for her to take it, she told me to drop it on this other shelf first and that she would then grab it from there. I thought to myself 'What difference does it make?'





We're both wearing gloves and if I had it on my gloves in the first place, it will still be on the product.' But I just smiled and said goodbye. Then there's those who use their scarf or the top of their jacket as a protective face mask, and make sure to pull it extra tight whenever they're asking an AH employee a question. Or those who dread walking in between two people and therefore freeze into paralysis as though they were at the edge of a cliff before one of the other customers asks them to move along. I must say working at AH has never been so comic.

Unlike the stories of my other peers though, I haven't experienced much rudeness yet. Of course, clients are unhappy when you tell them yet again that we have run out of a certain product again, but most of them then just nod and walk away. There was one instance in which the customer did not cooperate in this way. He was looking for 38 (!!) Tony Choclonely chocolate bars and I explained to him that I could not go look in the back to see if I could find the remaining 28 bars because all the chocolate bars and candies were mixed together. He looked at me disappointed, as though he did not appreciate that I was not willing to spend an hour digging through boxes. What made matters worse is that since he didn't buy anything else and was now stuck with a cart, he asked me if I could bring it back for him. I looked at him confused and explained he could just drop it right outside the shop, but he wasn't convinced. In the end, he just walked off, but it was again funny to see how people have lost all their common sense since the outbreak of this new pandemic.



Postscripts (History Class of Covid-19) :

Dear readers,

We are a group of Grade 12 IB students from the Rotterdam International Secondary School, currently in the middle of a Coronavirus (Covid-19) pandemic. What started off as a distant virus outbreak in Wuhan (China) has conquered the whole world and turned into a global crisis ! Here in the Netherlands, it is strange to believe that only 3 weeks ago we barely felt the influence of this virus; for us it was just another newspaper story. And then, in one weekend everything changed as the first cases of the virus reached several parts of Europe. Schools and businesses are closed; international trade has been put on hold; cities are deserted; events are cancelled; supermarkets run on empty stocks (toilet paper was nowhere to be found anymore) ; it is as though the world has fallen into a deep sleep. But in healthcare institutions it is a different story; hospitals can barely handle new infections coming in daily, nurses and doctors lack the resources to treat patients properly and victims often die without their family around them. Let's not go into many more details, but just know that this pandemic was no joke. One thing is certain: none of us have experienced anything like this before and it sure does feel like something out of a dystopian movie.

Of course, not all is bad in these odd times. In fact, this crisis has served as a sort of 'reset' for most of us. Being quarantined all days also has its perks: we finally get to finish that project that we had put off for so long, parents with busy jobs can finally enjoy breakfast with their children, we find new ways to exercise, we read all the books we have always wanted to read, we develop new skills and hobbies, make memes etc.

And, as our IB exams got cancelled (call that a cool story to tell you grandkids), we decided to research previous pandemics and create this article. For many of us, it was very eye opening to see how similar some of these were to the pandemic we are experiencing today, in terms of how it spread and mitigation policies. History really does repeat itself...

Happy reading !



Class of Covid-19:

Anna-Sophia Kool (Editor)

Fleur Stolk (Smallpox)

Nina Yrauskin

Paul Mertens (The Black Death)

Jelle Koopmans (The Spanish Flu)

Stijn Beek (The Black Death)

Floris Swinkels (The Spanish Flu)

Anja Parpura (Columbian Exchange)

Arseniy Sverdlov (HIV/AIDS)

Estella van Brakel (The Great Plague of London)

Heloise Geus (Plague of Justinian)

Alexandra Khariktonova (Polio)

Marko Stojavljevic (The Hong Kong Flu)

Andrej Mitrovic

Yasmine Louche

History teacher: Carolyn McNanie Moschopoulos

April, 2020