

XVIX. MILITARY NURSING

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OUTLINE

- I INTRODUCTION
- II CRUSADES
- III MIDDLE AGES
- IV EIGHTEENTH AND NINETEENTH CENTURIES
- V CRIMEAN WAR
- VI CIVIL WAR
- VII SPANISH-AMERICAN WAR
- VIII WORLD WAR
- IX ARMY NURSE CORPS
- X NAVY NURSE CORPS
- XI SUMMARY AND CONCLUSIONS
- XII BIBLIOGRAPHY

INTRODUCTION

CRUSADES

This paper is an attempt to show the gradual rise of military nursing throughout history and present times. The definition of military according to Webster is: "of or pertaining to soldiers; done by soldiers; supported by armed force; soldiery; the Army."

The Army Nurse Corps. being my first thought when glancing at the phrase military nursing I shall enlarge more thoroughly on the Army and include only the present day status of the other country's defense, the Navy.

The growth of military nursing to it's present state is astounding and portrays how nursing itself has had a continual struggle upwards, keeping abreast with the progress of the World, and living down, at the same time, the reputation it obtained during it's Black Era.

By the writing of this paper I also hope to accomplish the gathering of material on the rise of military nursing through the ages in a brief but adequate form. During the process of gathering material I noticed a great lack of collective material about this phase of nursing and felt at quite a loss as to how enough material could be covered in the short period of time allotted to really make my subject worth the writing and reading. However, if after having read this brief outline of military nursing you obtain a fairly compact idea as to how military nursing became established and gain a feeling of it's importance and strength I shall feel repaid for my efforts.

The Crusades were a series of expeditions based on religious zeal to rescue the tomb of the Saviour from the impious hands of the Siljukian Turks. The Turks were a Nomadic tribe from Central Asia, whose conversion to Mohammedism seems to have increased their barbarism. However, these crusades became based on more mixed motives and our main interest in the Crusades was the fact that they laid down the foundation for the military order of Knights Hospitallers in the Middle Ages which was the small but direct beginning of military nursing. There is no record in ancient history of female military nurses. The nurses who accompanied the doctors in time of war were male assistants either, medical students, or slaves.

Rome came very close to a possible starting point for military nursing with the establishment of hospitals systematically. It was a scheme that arose out of the Roman genius for organization and was connected with the Roman military system. However, the only actual history of nursing done during this period, was that done by the Councillors wives and their slaves.

Because of a great lack of records there is no actual material available covering the care of the sick and wounded during the crusades. Procedures, rules and regulations, systems, and statistics are absolutely out of the question, so I am forced to hastily skim the surface of this period and go on into the advancement of the military nursing idea from Orders existing directly from the Crusades.

MIDDLE AGES

During the time that the hospital emerged various religious orders sprang up whose main duty was the care of the sick. These nursing orders fall roughly into three groups: military, or Knights Hospitallers, the outcome of the Crusades; secular orders; and regular orders as the Augustian Sisters of the Hotel Dieu of Paris.

The military orders were: Knights Hospitallers of St-John of Jerusalem; Teutonic Knights, and the Lazarists. The origin of the military nursing orders is closely interwoven with the Crusades but as these were inseparably connected with pilgrimages, the special facts revelant to nursing are difficult to disentangle. From 1100-to 1120A.D. there is no evidence that the members of Knights Hospitallers of St.John fought. It was originally founded to care for two hospitals; one for men, and one for women, which were founded in Jerusalem in 1050 A.D. by some wealthy Italian merchants. The first leader was Peter Guard, an intensely devout man, who adopted a strictly religious form. The Knights and Sisters of the order were impelled to take vows of chastity, poverty, and obedience. Their second great director was, Raymond De Puy, who was essentially military in character, and the order became exclusively aristocratic open to only those of the distinct social class. He added to the charitable duties of the Hospitallers, that of taking up arms in defense of the Holy City. Under his leadership the order was divided into three groups:

1. Knights or men-at-arms.

- a. First duty was to fight.

- b. Second duty was to help with the hospital.

2. Priests, who directed their religious life of the camp and hospital.

3. Serving brothers, or half-knights who carried on the regular ward work. These had to belong to families which had never engaged in trade or menial work.

The fame of the Knights Hospitallers of St. John became so great as a result of their excellent nursing and relief work that they became famous and powerful and were the richest and most influential order of that time. In 1187 they started on their decline with the taking of Jerusalem by the Saracens, and in 1798 Napoleon turned them out of their last stronghold, Malta, where they had kept in existence for 268 years.

It's significance in nursing history is very great because the glamour shed on it's activities gave it such a position that membership was sought after by the "flower of knighthood" of that day. The prestige thus received caused it to influence and stimulate all subsequent hospital organizations. The Knights were also very rich and therefore could afford to equip and conduct their hospitals far better than any other community of that period.

There was a female branch of the order as old as the men's branch while the order was still in Jerusalem. At this time the Sisters unquestionably nursed and functioned as an order, but in 1291 the Moslems reconquered Palenstine and the Sisters were obliged to flee to Europe. There is no history of their nursing after this date.

At the height of it's nursing excellence the hospital regulations as worked out by the order of St. John were adopted by all the hospitals arising in Europe at that time.

The Teutonic Knights were only founded in Teutonic countries and their nursing service was not outstanding.

From the end of the seventeenth to the middle of the nineteenth centuries there set in a dark period of nursing, that period made famous by Charles Dicken's "Mrs. Sairey Gamp" as the representative of nurses of that period. This era in nursing has certainly left it's scar and our profession is still tending to lean backwards in it's professionalism and accuracy to overcome the blot on it's name. We certainly gained and still regret the unsavory reputation attached to our name during this Black Era.

EIGHTEENTH AND NINETEENTH CENTURIES

This period in nursing was devoted principally to reform and organization. Education of nurses was started under capable leadership and the schools founded at this time were thought highly of by all who had knowledge of them.

As far as nursing is concerned in the military field there is some history of female nurses connected with the Army hospitals during the American Revolution. It seems to be the first reference in the history of the United States to female nurses employed by military hospitals. Taken from an article entitled "Continental Hospital Returns, 1777-1780-" which appeared in The Pennsylvania Magazine of History and Biography for April, 1899 we find lists of patients in the different military hospitals. On each list of names there also appear a few nurses' names. These documents have proven to be a valuable contribution to the history of medicine during the Revolution as well as tracing another step in nursing here in the United States.

The other wars which provide direct material for this paper were the Crimean War, March, 1854 to August, 1856; the Civil War 1861-1865; and the Spanish-American War, 1898-1899. Each of these shall be taken up individually in the following chapters.

CRIMEAN WAR

The Crimean War, as far as nursing is concerned, may best be followed by tracing the steps of Miss Nightingale at this period of her life.

About the time that Florence Nightingale was being seriously thought of as the possible Superintendent of Nurses at the new King's College Hospital, there developed a much larger and greater task for her. At this time, March, 1854, Great Britain, France, and Turkey declared War on Russia. Many editorials and letters were sent to England in regards to the deplorable conditions of their troops who were dying and becoming maimed for life because of the lack of medical attention given them. These clippings certainly did not escape the notice of Florence Nightingale. She wrote to the wife of the Secretary of War offering her services to the English Army. Her letter to Mrs. Herbert crossed with a letter from Sidney Herbert to herself requesting her aid in sending a staff of women nurses to Scutari.

Sir Sidney Herbert was an active reformer and his heart lay in the advancement of the human race. There were no nurses in Scutari for the English but the sick and injured French and Russian armies were well taken care of by the Catholic Sisters of Charity. However, Sir Herbert had visualized a nurse corps in connection with the Army and decided to experiment with women nurses who did not belong to and travel as a part of a religious order. Having known Miss Nightingale well, and knowing of her intense desire to organize nursing, he saw an excellent opportunity for both of them in the problem of the sick and wounded of the Crimean War. The following is part of his letter to Florence Nightingale.

"There is," he wrote, "but one person in England that I know of who would be capable of organizing and superintending such a

" scheme. If this succeeds an enormous amount of good will be done now, and to persons deserving everything at our hands; and a prejudice will have been broken through and a precedent established, which will multiply the good to all time." (1)

Miss Nightingale readily accepted this offer and left London for Scutari on October 21, 1854, with Mr. and Mrs. Bracebridge, her closest friends, and a party of thirty-eight nurses from various hospitals, and religious orders,

Miss Nightingale landed in Scutari, Turkey, on November 4, 1854, where they were established in the Barrack Hospitals. Conditions seemed to be just as poor as had been described by the correspondent of the Times if not worse. Their living conditions were very cramped and inadequate. One outstanding factor mentioned was the fact that they had but one bowl apiece which had to suffice for the purposes of washing their hands and faces, eating their meals, and serve also as a drinking cup. Later as the times became worse and supplies were shorter than usual they were forced to use them to help in dressing and caring for the wounds of their patients. This is merely one example of the deprivations they suffered and perhaps is not the worst at that.

The hospitals themselves were very poorly equipped and were not ready for any extra patients in case of emergency. There was no laundry, sewage, fit food supplies, or hospital supplies, and the death rate at that time was 50 to 60%.

"----no vessels for water, or utensils of any kind; no soap, towels, or hospital clothes; the men lying in their uniforms, stiff with gore and covered with filth-----" (2)

Miss Nightingale was definitely handicapped by a great lack

of cooperation and a lot of red tape, official jealousy, and bureaucratic inefficiency, not to mention the sad need of supplies, and systematic order.

By February, 1856, she had become recognized by her earnestness in work and great power of organization. She had established laundries, diet kitchens, extensive sanitary and engineering works, procured equipment for a laboratory which was chiefly instrumental in bringing about an Army Medical School. This was all extra-curriculum, her main job of organizing the hospitals was beautifully executed and by this period she had 200 nurses under her supervision and succeeded in bringing down the death rate at the hospitals from 50 to 60% to 22 per thousand, which had been unheard of prior to then, even in peace times.

Miss Nightingale did not have official rank in the Army until the everpresent intrigues and jealousies of the Medical Corps officers had so nearly undermined her position that she threatened to resign. She was desirous of a business like standing in the Army so that her orders and reforms might have more authority with the officials and so she was given the title of "General Superintendent of the Female Nursing Establishment of the Military Hospitals of the Army" in February 1856, after she had threatened to expose the Army methods of that period in a book which she was drawing up. Because of this it may be said that Florence Nightingale was responsible for bringing about the reformation of the British Army, especially, the Medical Corps Area.

Shortly after receiving her official title peace was declared, but her work continued until August of 1856, at which time she returned to her home in England.

Again her strength of character and the power of her will won for her and the nursing profession as a whole a new respect and a higher rung on that ladder of professional organization and decency.

I think that it can be safely said that through Miss Nightingale's leadership and efforts, nursing made the greatest single advancement in its entire history of growth.

Sir Sidney Herbert's experiment with an Army Nurse Corps made up of women who did not belong as a unit to a religious order was acclaimed without a doubt a great success. Miss Nightingale certainly should have been pleased and proud of the tremendously good piece of work which she accomplished at this period in her life.

War nursing or disaster relief does not constitute a separate or distinct nursing field. The type of service rendered is in the form of first aid or general public health nursing. The difference lies in the circumstances under which they work. For centuries the work was disorganized, but organization became fairly well established under the leadership of Miss Nightingale, as a result of her excellent work in the Crimean War. The Army Nursing service of Great Britain was founded in 1869 by the appointment of a Superintendent and a staff of nurses to the Netley, military hospital. This may be classed as the initial step in bringing nurses into the regular service of the National Government.

The English Army Nurse Corps Area was reorganized in 1902. The English Army nurses were given authority next to that of the officers of the Royal Army Medical Corps. in and about military hospitals, and were at all times to be obeyed accordingly/ and

to receive the respect due to their position. This did not confer an actual military rank, but it did give the British Army Nurses an unquestioned position of dignity and responsibility and an authority. The nurses were either employed in a permanent position or listed as Army Reserves.

CIVIL WAR

As all early histories of special nursing fields the Civil War is also connected up with biographies of certain outstanding characters. There were several outstanding women prevalent in this period and each shall be mentioned in the details of this chapter.

Sarah Edson of New York worked strenuously in attempt to found a home and training school for nurses where they might be prepared for the field. She labored untiringly for this purpose, brought it before the Sanitary Commission, sent to the Surgeon General and even had a bill embodying her plan brought to the Senate Committee. She may rightly be considered as the first to conceive the idea of an Army School for nurses.

1861 found the United States destitute of any nursing organization capable of taking over the care of the sick and wounded resulting from the Civil War. However, there were women who realized the need of female nurses in the War among whom perhaps the most outstanding was Miss Dorothea Dix. She felt it her duty to volunteer her aid to the service of her country, so she reported herself and some other nurses to headquarters at Washington, D.C. on April 20, 1861. She was at once accepted and appointed as "Superintendent of Women Nurses" to select and assign women nurses to General or permanent military hospitals, No nurse was to be employed without her sanction in any such hospital except in cases of urgent need. Miss Dix, like Miss Nightingale was a wonderful worker, and had practically all the burden on her shoulders. She worked untiringly and expected everyone with whom she was connected to do likewise. Miss Dix became very unpopular with many of the nurses and Army surgeons because of her ability to show up at every crisis when someone of them was failing to do their whole

duty. Nothing was more intolerable to her than to find someone lacking. Miss Dix received no salary from the government for the entire period of the War, this was due to her own will for service without remuneration. When asked what she most desired for her services she replied, " The Flags of my Country," which she received as a token of acknowledgement of her duties performed for her country. The National Colors were bequeathed by Miss Dix to the Harvard College.(3]

In October, 1863, because of the unsatisfactory arrangement of Miss Dix being wholly responsible for the appointment of female nurses, an order was issued placing the assignment of nurses under the control of the medical officers, and limiting Miss Dix to a certificate of approval, without which no female nurse could be employed except by the order of the Surgeon General. This order tended to establish discipline and security among the appointments and also relieved Miss Dix of a great deal of responsibility which she had heretofore shouldered independently.

No historical records are available as to the number of female nurses employed by the Army during the Civil War so no exact statements can be made as to the number of female nurses on duty with the army at this period. It is known however that many women acted as nurses who were not employed by the Army. They followed their husbands or loved ones from one battlefield to the other, watching over them and tending their wounds. It is also known that the majority of nurses employed had little or no official training as to the care of the sick. The main qualifications as set up by Miss Dix were:

- 1.No woman excepted under thirty years of age.
- 2.Must be plainnlooking.

3. Only plain brown or black dresses to be worn.

4. No jewelry allowed.

5. No hoop skirts allowed.

Many interesting tales have been told and recorded, mostly in letters about applicants, ^{concerning} and the first days on duty, without a day of training for the work; Situations that had to be met, the courageous women that went right into the thick of the battles and some of the more vivid details of the hospital routine of the day.

Miss Clara Barton has not been mentioned at an earlier date in this chapter because of the fact that she was not associated with the Sanitary Commission, or any other organization. Except for the short time in which Miss Barton was under General Butler's command she had no official connection with the Army. Miss Barton preferred to direct and control things herself without being under anyone else's authority. She worked better as a unit than as a functioning part of a unit, and her particular service during this period was that of securing supplies for relief and promptly getting them to the place where they were most needed.

In spite of the fact that the nursing unit was not very well organized more actual service was accomplished than can be told of. The lives of the nurses were certainly complete as far as work was concerned and the nurses as a whole were looked upon favorably and gained a good reputation because of the successful demonstration of their ability to work.

Nurses were not placed permanently in the employ of the government and were not given rank during the War. After peace was declared the Army nurses were disbanded.

SPANISH AMERICAN WAR

As early as February 1898, officers of the government began to receive applications from women who wished to serve as nurses during the approaching war. The Army Medical Corps. realized the value trained nurses would be in the direct employ of the government in case of war, so all applications were placed on file for future reference. The original plan of the Medical Department was to have all the nursing and other hospital work, including clerical and dispensary done by trained members of the hospital corps. However, funds were not allotted for sufficient help in this direction. Historical accounts of unpreparedness in the previous wars made the officers of the Medical Corps. more than anxious to develop a group of trained persons for the benefit of their hospitals and for the more accurate systematizing of their work.

An Act passed by Congress on April 22, 1898, providing for a temporary enlargement of the military establishment did not allow for an increase in the hospital corps. The great majority of the hospital corps. men had little or no proper training as nurses and as a consequence were largely inefficient. In as much as finances did not allow for better arrangements the outbreak of the war saw nursing in the Army carried on entirely by the men of the hospital corps; but the employment of contract nurses, regardless of sex was authorized by Congress in March 1898. The emergency which rendered the services of women nurses acceptable was the product of the following causes:

First, the inability of the medical corps. to enlist in a few weeks, several thousand men qualified by previous experience to perform important duties, or to enlist that number of inexperienced but intelligent men with the intention of training them for the

work.

Second, the epidemic prevalence of typhoid fever in the camps, which demanded accurate technique and the handling of trained nurses. Trained nurses were absolutely essential to care for the severely ill in the already filled hospitals. During the typhoid epidemic the number of female nurses on duty was greatly increased, reaching a maximum number of 1150 on September 15, 1898. After this date the epidemic subsided making it necessary to annul many contracts and by July 1, 1899, there were only 202 nurses employed by the Army.

Before April 30, 1898, almost 1,000 applications had been received from women who wished to serve as nurses for the government during the war, however no examinations had been possible at that time or directly previous to that date. On April 28, the National Society of the Daughters of the American Revolution offered it's services to the Surgeon-General of the Army in the capacity of an examining board for female nurses and their offer was gladly accepted. The set-up of this organization rendered it suitable for this service, and due to the fact that it wasn't medically connected it's decisions were entirely unbiased.

The headquarters for the Society was in Washington, D. C. and there were 25,000 members living in every state and territory of the Union, making a splendid network for contact with the nurses and gave the organization the necessary assistance in looking up recommendations. Miss Anita Newcomb McGee, M.D., was appointed as Director of the Daughters of the American Revolution Hospital Corps., and was placed in charge of the examinations. She may be thought of as the head of the Army Nursing at this period and later her staff developed into the Army Nurse Corps. On September 7, 1898 she was appointed acting Assistant-Surgeon of the United States

Army, in charge of female nurses and on duty in the War Department.

Only graduate trained nurses were accepted as eligible and they were required to fill out a blank similar to the following:

1. Name in full.
2. Address and nearest telegraph station.
3. Do you desire appointment in the Army or Navy?
4. How soon after receiving an appointment can you leave home?
5. Have you had yellow fever?
6. Are you a graduate of a training school for nurses?
7. If so, what school and what year?
8. What other hospital experience have you had?
9. Have you nursed continuously since graduation?
10. If not, what has been your occupation?
11. What experience have you had in invalid cookery?
12. What is your age? Date and place of birth?
13. Color, height, weight, and social status?
14. Are you strong and healthy and have you always been so?
15. Have you been successfully vaccinated?
16. What is your legal residence?

In the judging of a nurse for appointment the following three points were the major considerations:

1. Professional ability
 - a. Endorsement from a physician
 - b. Endorsement from the superintendent of the training school from which the applicant had graduated.
2. Character
 - a. Endorsement from a D.A.R. or from any lady of known standing.

3. Health

a. Physicians certificate was required.

There were approximately 5,000 applicants examined but only one-fifth of this number were accepted as eligible.

In addition to contract nurses, Mrs. N. Curtis was on July 13, sent, by direction of the Surgeon-General, to New Orleans and other southern cities in search for immune colored women to act as nurses in Santiago. As a result of this trip, 32 colored women were selected.

The Chief-Surgeons at Camp Meade and Jacksonville were given the privilege of contracting female nurses who might apply to them and the enrollment was increased slightly at each place. The nursing at a few of the Army hospitals was done by volunteers with whom no contracts were made.

By May 10, 1898, the first contracts were signed with a group of six nurses. This date may be thought of as the informal beginning of the official Army Nurse Corps.

Dr. McGee was a wonderful organizer and a thorough worker. Her friends were devoted to her and like Dorothea Dix, she had enemies who were equally strong in their feelings against her. She kept in contact continually with her chief nurses by correspondence; and her powerful influence with the prominent politicians was believed to have been a great aid in the passing of the Army and Navy bills after the War.

In the fall of 1900, she wrote the section in the Army reorganization bill which made the Army Nurse Corps. a permanent part of the Army. This marked the end of the pioneer work and brought struggle for a permanent Army Nurse Corps. to a climax. She then tendered her resignation which took effect in December, 1900, and

appointed Miss Deta H. Kinney, one of her chief nurses during the War as her successor.

Of the 202 nurses remaining in the employ of the Army after the subsiding of the typhoid epidemic there were stationed different numbers at various posts. The following enumeration will give some idea of the plan of the working power:

65 in the United States

76 in Cuba

9 in Puerto Rico

38 in the Phillipines

6 in Honolulu

8 on the Hospital Ship Relief

Out of the total number of nurses employed there were only 140 cases of typhoid reported, 12 cases of which were fatal, and one nurse expired because of yellow fever.

We find that in the Spanish-American War as in the previous wars that not all the medical officers approved entirely of female nurses for the Army, and that there was a certain amount of jealousy and friction existing throughout this period.

However, the suffering and adversity proved such hard and exacting teachers that when it was found that the outside help, which was a vital necessity at the moment, given by the female nurses was so accurate, satisfactory, and of such a high standard, and quality, given without criticism and argument that the opposition was soon silenced on the whole. During this strenuous period the nurses received much open admiration and the petty dislikes became generally overlooked and many of them turned into vigorous likes.

American women may well be proud of the record and standards

instigated by these nurses in 1898-1899. Every medical officer with whom they came in personal contact had testified to their skill, intelligence, earnestness, devotion, and self-sacrifice.

The fact that the Associated Alumnae of Trained Nurses of the United States and Canada didn't play a part in the Spanish-War was due to an error. Mrs. Robb, the President of the organization brought the war topic before the members of the first regular convention; as an outcome of this discussion a telegram was sent directly to Surgeon-General Sternberg which read:

"The Associated Alumnae of Trained Nurses of the United States and Canada, including 2000 graduates of 24 training schools, offer their services for any work which the Medical Department of the Army may demand of them in connection with the war with Spain."

By direction of the delegates now in session in New York City.

(Signed) Isabel Hampton Robb, President.

By an error in transmission the word "Nurses" was written "music" and Mrs. Robb's name was misspelled. Of course their generous offer was courteously declined with thanks.

By the end of the War the Medical Corps. came to realize the importance that nurses had played in their department, especially in carrying on the hospital routine. They felt that there would be a definite value in having a regular Army Nurse Corps., trained and ready for any and all emergencies, and familiar with the Army routines, orders, and disciplines.

WORLD WAR

The World War found the United States equipped with an Army Nurse Corps. Practiced in the routine of military life, and familiar with the rules and regulations of the Army. They were small in number in comparison to the scores of nurses required to meet the needs of the government, but with the Naval Nurse Corps. and the reserve from the National Red Cross the supply of nurses was well met.

1917 found the United States nursing organizations to be well established and thoroughly trained. There was no mad last minute training of women to meet the demands, no extemporaneous foundings of units of women into a loosely knit organization under the control of one leading light. The situation was by no means what could be termed as ideal but there is no comparison in the efficiency and education of the nurses of the nation at that period with those in the Crimean, Civil and Spanish-American War periods. Nursing had advanced beyond the dreams of its forerunners. It had improved at the same rate as the other professions of the day and was thoroughly capable of meeting the emergency of the time. The comparison of the organizations is similar to comparing night with day. There was the same spirit of work and patriotism present in each era but a far greater pace was being set and being met with. The institutions of nursing education were not caught napping, the World at large had realized the immediate need of efficient female nurses. After the Spanish-American War the nursing profession had been growing and had flowered in this spirit lacking of bitterness and opposition. They were needed and wanted also, which was of great importance to their powers both mental and physical.

Prior to 1916 the number of Army nurses was never more than 204. The Mexican border uprising in 1916 necessitated an increase in the Corps, which was accomplished by the assigning of reserve nurses, enrolled in the Red Cross, to active duty in the Army. By April 6, 1917, when the United States declared War on Germany there were 403 nurses remaining in the Corps. Within 18 months this number increased to 21,480 nurses, the greater number of which were called to active service through the American Red Cross Reserve. Only graduate nurses being accepted for appointment.

They were assigned to cantonments, general and special military hospitals located in all parts of the United States and 10,400 were sent overseas to serve in England, France, Italy, Belgium and Siberia. These nurses were on duty at base, evacuation, mobile camps and convalescent hospitals, and to casualty clearing stations. There were also a few serving on hospital trains, transports and with surgical teams on field duty.

Despite the fact that many nurses were stationed in the zone of military operations, not a single nurse was killed by enemy gunfire and only three were wounded. This is a surprising statement and certainly throws a different light on the general belief of the public to the vast danger entailed in war time nursing. This statement is contrary to the general belief that people have throughout the country in regard to the deaths occurring in the nurse corps during the war. The total number of deaths recorded in the nursing service overseas is 272, but the majority of these deaths were due to disease and a few to accidents incident to the service.

It is not generally known that many members of the corps were decorated for their services during the War. The following is a numeration of the awards given the nurses of the United States

Army Nurse Corps at the end of the World War.

3 received the Distinguished Service Cross (D.S.C.)

23 received the Distinguished Service Medal (D.S.M.)

28 received the Croix de Guerre

89 received the British Royal Red Cross

2 received the British Military Medal.

Many were cited for meritorious services in the United States Army Orders, and a number were mentioned in the British Army Dispatches.

A brilliant page was added to the history of nursing through the cooperation of the Army Nurse Corps. during the Great War. No written word could describe the individual fortitude and quiet devotion to service that characterized the Army Nurse no matter what assignment was dealt with and regardless of the difficulty of the task, or stressing the emotion under which she was placed.

The honors bestowed upon our Army Nurse Corps as a result of their great work during the War should suffice for any detailed description of their individual deeds. So we shall close this chapter on the World War knowing that a great advance was made and the respect of the world was gained for nursing in general as a result of their labors.

ARMY NURSE CORPS.

Detailed history of the formation of the Army Nurse Corps has been covered sufficiently in the preceding chapters, the only lacking subjects being that of the Army School of Nursing and the present day set-up of the army with information on appointment to the Corps., living conditions in the Army, and the advantages offered to nurses in the Corps. This chapter shall deal solely with these three topics.

Perhaps we should cover the general administration of the Nurse Corps. The nursing office consists of: the Principal Chief Nurse; Assistant Principal Chief Nurse; Day supervisor of graduate nurses; Night Supervisor of graduate nurses; Superintendent of the Army School of Nursing. Their consecutive duties are listed below.

Principal Chief Nurse, held responsible for the efficiency of all the nursing of the department and for the conduct of the Army School of Nurses. Her duties take in:

1. Instruction
2. Assignment
3. Discipline
4. Performance of duty
5. Conduct while on duty of graduate and student nurses.
6. Supervision of female help employed for general kitchen and housekeeping work.
7. Responsibility for equipment and public property for the nurses quarters and for the sanitation and fire prevention in these quarters.
8. Records of the Army dietitians; and responsibility for the preparation and disposition of the records of her department.

The Assistant Principal Chief Nurse is in charge of records and

correspondence concerning the Nurse Corps on duty at the hospital, and duties as assigned by the Principal Chief Nurse.

The Day Supervisor carries on daily inspection of all the wards to determine the character of the performance of duty by the nurses. She devotes special care to:

1. Seriously ill
2. Preparation and service of diets in the wards.
3. Takes measures to prevent the issue of intoxicating liquors and habit forming drugs.

The Night Supervisor makes inspection of wards corresponding to that of the Day Supervisor.

The Superintendent of the Army School of Nursing. (No longer in existence.) *Ended in 1933.*

1. Conducts school for undergraduates at the hospital.
2. Guided by instructions received from the commanding officer and the Principal Chief Nurse.
3. Supervision of the work of nurses in charge of instructions in theoretical nursing, and practical nursing.
4. The supervision of undergraduates in the wards.

The first student nurse arrived at Walter Reed on August 5, 1918. The first class consisted of 51 nurses. In January of 1919 there were 65 student nurses enrolled and by the end of 1919 there were 112 student nurses in the school.

Theoretical and practical work was in strict compliance with the standard curriculum as authorized by the National League of Nursing Education in 1918. Affiliation with civilian hospitals in pediatrics, gynecology, obstetrics, psychiatry, and public health was carried on. The time allowed for affiliation was one year, with eight weeks of service in each department. There was an eight hour working day; one hour of class and one hour of study throughout.

A course in occupational therapy including the teaching of all forms of invalid occupation was included in their education; and eight months was allotted in the dental and eye, ear, nose, and throat clinics.

With this very brief outline of the course offered by the Army School of Nursing it is possible to realize what a thorough and efficient training they must have received. No work was neglected because of their affiliations with the civilian hospitals with the work which the Army hospitals did not afford. However, the Army gave up it's school of nursing because of the effort and expense entailed. The present system of appointing graduates from civilian hospitals who pass the rigorous examinations and giving them a three months probationary period has proven very successful and the energies of the nursing staff are expended in other directions.

To be eligible for appointment in the Army Nurse Corps and applicant must be a young woman of good character, unmarried, a citizen of the United States, between twenty-two and twenty-eight years of age, at least sixty-two inches in height, and standard weight for her age and height. She must be a graduate of an accredited high school giving a four-year academic course, and of a school of nursing of approved standards; a member of her Alumnae Association and of the American Nurses' Association. Preference being given those nurses who have had at least two years of successful graduate nursing experience, and who are enrolled in the American Red Cross.

The application should be accompanied with an unmounted photograph not more than two years in age and a statement from the high school from which the applicant graduated signed by the proper official, giving the date of graduation and her standing in the graduation class.

The applicant is given a thorough medical exam by the board of medical examiners at the nearest Army post about one month preceding the consideration for appointment. Travel for this procedure is at the expense of the applicant.

Approved applicants are placed on the eligible list until vacancies occur. No nurse is to be appointed unless she shall agree to serve for a period of three years. The Surgeon-General may discharge any nurse for unsuitability, conduct prejudicial to the service, professional inefficiency, and, in proper cases, on her own application.

Pay received upon entrance is the same as that offered by the Navy Nurse Corps, \$840 a year and full maintenance. The pay is increased every three years for nine years when a maximum of \$1560 a year for the grade is reached. A leave of absence with pay for one month is granted for each completed year of service.

Nurses are not commissioned officers but have relative standing ⁱⁿ the Army corresponding to that of commissioned officers. Upon entrance, they are given the relative rank of Second Lieutenant. Promotion being determined by length of service and the special qualifications of the individual nurse.

Nursing in the Army includes the care of members of the Army proper and their families, also of other patients entitled to care in Army hospitals. Except in cases of emergency the working day is eight hours in length.

The first assignment to duty will be in the United States in order to acquaint the nurse with military usages. Foreign duty assignment does not enter in until after the first year of service. The tour of foreign duty is for two years, and that in the United States is four or more years.

Living conditions in the United States Army Nurse Corps approach the ideal. They are afforded every comfort possible in modern housing and are included in all the social activities of the post. With the chance for advanced study, travel, the adequate pay, and allowances, the nurse of to-day is offered a fine career in the Army if she wished to avail herself of the opportunity.

A fine tribute was paid to the Army nurses by Major-General C.P. Summerall, Chief of Staff of the United States Army, in an address presented to the graduates of the Army Medical School of January 31, 1928, from which I shall quote:

" Nor would I omit an expression of admiration for all of the personnel of the medical department. Indeed I should place the noble women who for so many years have devoted themselves to the service as nurses on an even higher plan than their brothers. In peace and in war they have transformed our hospitals and even our field stations into establishments incomparably superior to those of the period when nurses were not provided. No one who saw the distressing conditions of '98 can look upon the ministration of ~~our~~ nurses today and in the years that have passed since then with feelings other than those of devout thankfulness."

Rank for the Army nurse has increased the efficiency of the nursing headquarters to a great extent. All orders regarding the Nurse Corps are now signed directly from the nursing headquarters as final authority and do not have to be held up for approval of the Surgeon-General of the Medical Department. The position of the Superintendent in Chief was coupled with authority and the privilege of being held responsible for her own official acts. She is also welcome to participate in all official ceremonies to which the heads of the other corps. are summoned.

Rank has made the status of the nurse corps definite, and unquestionable and has brought about an ease and clarity in the mechanics of the administration that cannot be disputed.

It has established a better cooperation with the nurses by officers and enlisted men; and psychologically has been a great aid to the nurses themselves.

After much discussion pro and con it has definitely been decided by the majority that rank has placed the Army nurse in an advantageous position and has raised their standards to an enviable position.

Military influence served to reinforce rigid discipline in nursing service and hospital observances. Examples of this may be found in: hospital etiquette; distinction of rank with respect for seniority; attitude of attention when addressed by superiors; correctness and tailoring of uniforms; stripes on caps; insignia of pins, etc. to designate superiority relative to rank in the Army.

Nurses need organization like the type found in the Army to be ready for service in time of fire, flood, hurricane, disasters, earthquakes, etc. In such emergencies, which call for the finest type of patriotism and the most heroic of services, nurses will find their "moral equivalent for war." (7)

NAVY NURSE CORPS.

As early as 1811, a young surgeon of the Navy, by the name of Dr. Barton, included in his plans for systematizing the medical department of the Navy a recommendation for nurses to be a part of the Naval Medical Staff. This is remarkable when you think that this was even nine years prior to the birth of Florence Nightingale, who was even considered far advanced for her period. Of Nurses Dr. Barton says:

" The nurses whose number should be proportionate to the extent of the hospital and the number of patients, should be women of humane disposition and tender manners; active and healthy. They should be neat and cleanly in their persons, and without vices of any description. They should reside in small convenient apartments adjoining the wards they belong to. They are to attend with fidelity and care upon all the sick committed to their charge; should promptly obey their calls, and, if possible, anticipate their reasonable wants. They should administer all medicines and diets prescribed for the sick, in the manner and at the times specified in their directions. They should be watchful of the sick at all hours and should, when required, sit up with them at night. They should attend the physician and surgeon in their visits to the wards, to give information respecting the patients, and to receive orders and directions. They should make up all the beds, and keep the wards clean and should report to the assistant physician and surgeon's mates, whenever it is necessary to have them washed; and should not wet them, when they think proper for the sake of the sick, to omit it at that time. They should report all sudden changes in the disorders of the sick, and all deaths, immediately to the assistant physician'

or surgeon's mates. They should obey punctually all orders from their superiors; and should exact a ready acquiescence in their commands, from the attendants under them." (4)

In the early history of the Navy afloat, the care of the sick was in the hands of the surgeon and his mate, with the assistance of members of the crew. There were no trained nurses and the situation was handled as best as it could be under the circumstances.

Conditions improved gradually and on June 17, 1898, an organized nursing unit was established, by Act of Congress, called the Hospital Corps. of the United States Navy, and it's designation is the same to-day. The first trained nurses were a group of women employed at the Naval Hospital, Norfolk, Virginia, to care for the wounded of the Spanish-American War. These nurses were neither enrolled nor enlisted and were not even sure of being paid for their services. There was a verbal agreement that they be reimbursed for their traveling expenses and receive moderate pay if the means could be found. They served 50 days and were reimbursed from a fund which was not appropriated by Congress.

After the Army Nurses had demonstrated their value to the Surgeon-General and his reports were decidedly in favor of the trained nurse corps. the Bureau of Medicine and Surgery of the Navy began it's struggle for similar corps. of women for the Navy.

In 1902 a Bill was introduced into the Senate for the establishment or organization of the Navy Nurse Corps. but this did not pass Congress. Initial pay recommended was \$50 a month.

1904 produced another attempt to get a bill through for the Nurse Corps. Initial pay recommended was \$40 a month.

In 1907 the Surgeon-General urged the enactment of legislation to create a corps. of trained women nurses to better the efficiency of the medical department and put it on a par with that of the Army.

In conclusion he added:

" The Government supplies physicians and surgeons, splendidly equipped hospitals, and complete emergency facilities on every ship. The most serious omission in this excellent establishment is the want of that skilled nursing which civil institutions enjoy." (5)

A Bill was introduced in 1908 which was brief and to the point.

As to the matter of pay the Bill stated:

" That the Superintendent, chief nurses, and nurses shall receive the same pay, allowances, emoluments, and privileges as are now enjoyed by or in pursuance of law for the Nurse Corps. (female) of the Army." (6)

The Bill passed Congress and became a law on May 13, 1908.

Many applications were sent in directly upon hearing that the Bill had been passed. The applicants were required to take oral, written, and physical examinations, which lasted over the duration of three days, and were to be held in Washington, D.C., the applicants supplying their own transportation to the seat of the examinations and their maintenance in Washington, D.C. during the examinations. Due to this regulation the majority of applicants were from the Eastern Coast.

The nucleus of the Navy Nurse Corps. established in 1908, was a Superintendent, Miss Esther Voorhees Hasson, a chief nurse, and nineteen nurses. The chief nurse and nurses were assigned to duty at the Naval Hospital, Washington, D.C. They ran up against a strong wall of opposition. Many of the older Naval doctors disliked "petticoat" supervision in the wards of the Naval Hospitals. However, in general, they were considered a distinct addition.

In 1909, the Corps. was doubled and they continued to prove

their reason for existence in the Navy.

When the United States entered the War the Nurse Corps. numbered 160 members. From then until the signing of the Armistice on November 11, 1918, they increased rapidly to 1,476 members. Additions were made from the Naval Reserve Corps. and the Red Cross.

The World War was the first war in which the United States Navy was supplied with a corps. of trained women nurses and their services were indeed appreciated by all concerned. They served at hospitals in this country and in Europe, and also on hospital ships and transports, standing in the same danger as the troops on board.

After the Armistice was signed the Nurse Corps. was gradually reduced to a peace time status of about 500 nurses.

The teaching and training of the Corpsmen has been one of the Naval nurse's outstanding achievements. Not only were the Corpsmen well educated but also the members of the Nurse Corps. were given every opportunity to participate with outside classes and keep up with all the modern nursing methods of civilian life. They were encouraged to enroll in classes in dietetics, laboratory technique, anesthetics, physiotherapy, and instructing.

Many Bills were sent in to Congress for the advantage of the Navy Nurse and the two most outstanding that passed Congress were the Pay Bill in 1922 and the Retirement Bill in 1926.

The Naval Nurse Corps. is to be congratulated in its rate of progress and the high standards and spirit of service set up by the pioneers of the service.

The History of the Navy Nurse Corps has not been followed through with possible beginnings as has the Army Nurse Corps. for obvious reasons, but it is well worth the time and energy to review the requirements for admittance to the Corps. at present and its standards.

The Naval Nurse Corps. is very similar to that of the Army and there is every reason to believe that the Army Corps. having taken a successful lead, was the pattern from which the Naval Nurse Corps. was copied. It is interesting to note the quick growth and progress that the Navy has made in it's nursing service. At present the Army and Navy can be set apart as equals in their distinct services.

Taken directly from the circular for the information of nurses desiring to enter the Navy Nurse Corps. some cut and dried facts which will give a quick resume of the set-up of the Corps. to the reader.

" Application for appointment in the Navy Nurse Corps should be by letter in the handwriting of the applicant to the Surgeon-General of the Navy, Bureau of Medicine and Surger, Navy Department, Washington, D. C., who will direct that the necessary forms be sent. An applicant must be a registered nurse, a citizen of the United States, single, and between the ages of 22 and 35. She must be a graduate of a school of nursing whose educational and professional standards are approved by the Surgeon General of the Navy. The physical examination shall be conducted by a member of the Medical Corps. of the Navy whenever practicable. Such additional certificates and other evidence of professional qualifications, as required by the Surgeon General, are compiled in the office of the Superintendent of the Navy Nurse Corps. The completed papers of the applicant will be submitted to a board of examiners. The bureau will notify the candidate of her acceptance or rejection based upon the findings of the board.

The first six months after assignment to duty will be regarded as a probationary period during which the professional, moral, mental, and physical fitness of a nurse for naval service in connection

' with the special instruction, duties, and adaptability to community environment peculiar to the Navy may be observed. Failure to meet the physical requirements for duty in any climate or inaptitude for the service will be sufficient reason for revocation of appointment.

A reserve list is being developed of nurses to be called in time of emergency. A nurse who wished to come into the Navy to familiarize herself with the service, may be put on the reserve list after three years of active duty. Those who so request, will not be transferred to distant stations.

Nurses are appointed for a period of three years; however, the resignation of a member of the Navy Nurse Corps will be accepted at any time for good and sufficient reasons. The Government will not furnish return transportation to her home unless she has served at least three years.*

* A first assignment to duty is usually to the station nearest the place from which the nurse is ordered to duty. After assignment, nurses will be given instruction necessary to prepare them for their professional work in the Navy. They will serve in the United States at least six months before being assigned to duty beyond the continental limits or on board hospital ships or transports. Requests for transfer involving long-distance travel or for duty on hospital ships will be considered in connection with the exigencies of the service. Adaptability to the service and physical condition are given consideration. As a rule, the tour of duty at stations beyond the continental limits of the United States and those which involve extensive travel is a minimum of two years."

There are sixteen possible places to which a nurse may be assigned in the United States and seven possible stations outside

the continental limits. All of the base stations are in interesting locations and certainly offer a variety of travel and education.

" Naval nurses are also assigned to duty on the hospital ships attached to the Battle Fleet and to the Scouting Fleet, on the naval transports on which the personnel of the Navy are transferred from coast to coast via the Panama Canal, and to the Pharmacist's Mates' School at Norfolk, Va., and to the Hospital Corps Training School near San Francisco.*

* All appointments in the Navy Nurse Corps are for general duty and are dependent upon the needs of the service; however, special qualifications of nurses entering the service are given consideration. In taking advantage of the special courses offered to nurses who desire to specialize in laboratory technique, anesthesia, dietetics, instruction or physiotherapy, nurses not only advance in professional knowledge of the subjects, but are able to render invaluable service to the Navy.*

* During the first six months after reporting for duty any plain white uniform; i.e., skirt, not shorter than 10 inches from the floor; sleeves, full length. The waist, at the neck, must open not lower than $2\frac{1}{2}$ inches from the interclavicular notch. With this uniform, nurses are required to wear the Navy Nurse Corps cap, which may be procured upon arrival at the first station of duty, pearl cuff links, plain white hosiery, plain white oxfords or white boots which have been fitted with rubber heels.

After the completion of a probationary period of six months, if physical examination and all recommendations prove their aptitude and fitness for the service, members of the Navy Nurse Corps are required to wear the regulation uniform, and they may apply for the initial issue provided by the Navy, of six uniforms, the uniform

hats, cape, and sweater.

The naval hospitals which are equipped with laundries will launder the uniforms of nurses, not to exceed four in one week. Nurses are required to meet the expenses of their personal laundry other than uniforms.

Navy nurses are under the supervision of the chief nurse, whose position in a naval hospital, so far as naval conditions permit, is analagous to that of the superintendent of nurses in a civilian hospital whose staff is composed of graduate and pupil nurses. The work of the Navy nurse is chiefly among men both as patients and coworkers. Nurses must not only care for the critically ill in the Navy, but are required to teach and demonstrate nursing methods to the Hospital Corps, of whom there are approximately 3,600 in the Navy. Instruction of the young men of the Hospital Corps in modern methods of nursing is an important duty with which not only the chief nurse but all of the Navy nurses are concerned. Each member of the Navy Nurse Corps must realize that the members of the Hospital Corps who are under her supervision wherever she may be on duty, will later be responsible for the nursing of the sick upon the vessels of the Navy to which members of the Navy Nurse Corps are not assigned, and the nursing ability of each hospital corpsmen will depend, in a large measure, upon the care with which he has been instructed by the Navy nurse. Tact, dignity, and executive ability are, therefore, necessary for success in the work of the Navy Nurse Corps. Of especial importance are these qualifications in nurses assigned to the insular possessions, where the prestige of the Government is dependent upon each and every one of its representatives.

Two schools for members of the Hospital Corps are maintained;

one at Norfolk, Va., and the other at San Francisco, Calif.

Members of the Medical Corps, of the Nurse Corps, and senior members of the Hospital Corps are assigned to these schools as instructors. It may be of interest to note in connection with the status of these schools, that they have been accredited eligible for registration. After completion of the course at the Hospital Corps Training School, the hospital corpsmen are detailed for duty at one of the large naval hospitals for practical work and the continuance of theoretical instruction. It is here that the follow-up work of the nurse instructor is of so much importance.

Schools of nursing to prepare native women for work among their own people are conducted in connection with the naval hospitals in Guam, Samoa, and the Virgin Islands. Members of the Navy Nurse Corps on duty at these stations are responsible for the supervision and instruction of these native women. Guam is an insular possession of the United States located on the direct route between the Hawaiian and the Philippine Islands. The island offers an excellent field for the Navy nurse who has had or who desires experience in public health and welfare work. At the Naval Hospital in Guam, special attention is paid to the training of native women in midwifery. Assignment to duty at Tutuila, or American Samoa is given added charm through the association of the Samoan Islands with Robert Louis Stevenson. A detail to the Virgin Islands is much coveted by the Navy nurse. Although these islands, recently acquired from Denmark, lie in the tropical West Indies, their climate is always pleasant.

The hospital ships of the Navy follow the fleet to which they are attached and are usually present at maneuvers. The U. S. S. Relief, the hospital ship of the Battle Fleet, is the only hospital

ship built as such from the keel up. It has a capacity of 500 patients and is as well equipped as any shore hospital, having the best X-ray and laboratory equipment, the finest operating room afloat, spacious wards, also contagious wards and eye, ear, nose, and throat departments. Twelve nurses are attached to this vessel. The U. S. S. Mercy is the hospital ship attached to the Scouting Fleet. It has a capacity of 250 patients and is fully equipped to provide any service rendered by the best civilian hospitals. Six nurses are attached to the Mercy.

Nurses traveling on Navy transports from coast to coast via the Panama Canal, either on duty or as passengers while being to new stations, have an opportunity to visit many places of interest, for transports usually stop a day or more at Colon, Panama, San Diego, San Pedro, and San Francisco. Transports crossing the Pacific stop at Hawaii, Japan, and the Phillipines. Aside from the unusual and interesting phases of duty on the hospital ships, on Navy transports, and on foreign stations, nurses who are fond of travel find added interest in these services. The majority of those attached to the Asiatic station visit China and Japan during a period of leave of absence, a few visit Australia, and some have returned to the United States by way of India, the Suez Canal, and Europe.

The Navy nurse is required to conduct her life in these diverse activities and to fulfill her professional duties in a manner that will react creditably to the record of the nursing profession."

This enumeration of the general activities of the nurses in the Navy has been made in order to banish from the minds of many the belief that work in the Government service is apt to stultify the active professional woman. Even from the brief outline here given

it will be realized that the nurse who will deteriorate professionally in the service of her country is the nurse who will deteriorate in any position she might hold. A nurse entering the Navy becomes an integral part of the hospital to which she is assigned, and should bring to her work the same loyal spirit of cooperation with the chief nurse and the same community adjustment to home life in the Navy as would be required from her in a civilian hospital where she may be employed as a graduate nurse. Having this point of view, she will soon learn to accept the military atmosphere as little different from that of any well-disciplined civilian institution."

The salary of either an Army or Navy nurse does not appear to be equal to that commanded by the civilian nurse in similar position, but the board, room, laundry, traveling expenses, and opportunity for further education, as well as the status received by having been attached with a government service certainly overshadows in the long run the amount received from civil life. Pay is increased every three years of service. It starts with \$70 monthly for the first three years, which is more than many general duty hospital nurses demand. Taking in the fact that this is tax exempt and no initial living expenses are withdrawn from it, ^{it} is a very good salary, may I say exceptional for a beginner in any nursing service.

The advantages that this nursing service offers seem to overbalance any draw-back which may be considered. The slogan for the Naval recruiting officer is "Join the Navy and See the World." The slogan for either the Army or Naval Nurse Corps might well be, "Join the Nurse Corps and receive an Education, with full pay."

The Government services certainly demand the cream of the crop, so to speak, and may she consider herself among the most fortunate when accepted.

CONCLUSION

It has been said that the system of training suffered under military influence because of unnecessary emphasis on the routine duties and in many cases the subordination of qualities of reasoning, initiative, and individuality. This may be very true, however every young nurse should learn to curb her temper and pirit, pay respect to those who have advanced before them, learn to take criticism, and accept what has to be taught, so that they may have a standard upon which to base their criticism and ambitious reforms. The military influence brought about an order which evidently had been heretofore lacking to a great degree. Advancement in number can not hoped to be accomplished without order and discipline. No one is perfect in action, deed, or reasoning no matter how brilliant.

Labor in service with an understanding of the routines and make-up of an organization are absolutely necessary in order to instigate successful changes in order or definite reformation. It is a generally accepted fact that the seniors in capable positions are in by far, the majority of cases, the wiser. They have a view and working knowledge of the entire situation with a slightly mellowed acceptance of truth which is the enhancing factor of age and experience.

Please do not misunderstand me, I do not think that entire subordination of individualism and initiative is correct. But I do feel that heretofore because of the lack of order and the lack of subordination of individuality, turmoil was the only outcome. Organization was lacking to a marked degree. There are very few women who wish to help in carrying out plans, they all seem to have the burning desire to be the leaders. Every woman is a potential leader, may I say, a potential leader for an individual household, but there are few outstanding women who can organize a concentrated

undertaking of any huge dimensions. It seems to be evident between the lines of the foregoing chapters that there were few outstanding women in the history of nursing who could cope successfully with the vast jobs placed on their shoulders. Because of their connection with the military services during the War they were given the power necessary to stabilize and keep their jobs and their co-workers in line. Consequently a great amount of work was accomplished which may have been and could easily have been interrupted in their infancy by that spirit of individuality creeping up in the breasts of many of the younger potential leaders, who felt that their way alone was the right way.

You may feel after having read this that I hold faith in the old adage, "spare the rod and spoil the child," I hope that this is not true. I also do not believe that all young ideas are wrong, this would be foolish, for so many have been proven successful and correct until some newer and better ideas came along. But I do feel that the training period for a young lady in a school of nursing should be devoted to learning and listening with a certain amount of routine. The routine of general nursing during training days tends to take the biting edge off of rash points of view. It aids the young in learning how to accept conditions. After all, no one can be qualified to listen to individuals, balance their ideas, perceive the small faults in plans, and accept other's reasoning until he or she have had a wide knowledge and a sense of the just from experience. This also requires a certain degree of mellowness of character and personality which allow for the acceptance of other's ideas. It is the exceptional person indeed who has the keen foresight of thought, the qualities of reasoning, initiative, and the individuality to over-ride the judgment of

actual years of experience in a field and equal the fairness of judgment of the receptive, educated mind, which has had training in the acceptance of many ideas, and in the weighing of problems with a clear perspective of the entire situation.

Why is it that the pendulum swings to extremes? Could it be because of the human' mental make-up, the inability of the human race to accept changes unless they are as distinct as black and white, so as to startle them into a realization that change has been necessary for a long period and has been finally declared?

The abrupt and harsh influence first prevalent in nursing schools due to the military influence can be likened to the sudden wrath of the long-provoked mother who has finally reached her limit and turned on her children in a sudden outburst of anger, scaring them into the acceptance of obedience; then quieting herself down to a long afternoon, teaching and admiring them.

Military nursing has had a period in which to relax, expand, and tell about it's development and boast of it's progress since the Great War. This may be thought of as the long afternoon in which they are relaxing, progressing, in strength of organization, putting their household to-gether, preparing for any future, unforeseen emergencies.

A great deal of credit should be given the Army and Navy Nurse Corps. They have set the pace in nursing technique and administration. Their organizations approach perfection in standards, qualifacations, and advantages to those employed in them.

Upon placing the growth of these organizations down in black and white, step by step, the progress over a relatively short period of time, may be noted.

I join with the nursing world in congratulations on the

splendid work accomplished. Such results were not achieved overnight but only by diligent, step by step plodding.

The same spirit which guided the progress of the pioneers in military nursing, namely that of continued improvement, must guide their successors if further worthwhile accomplishments are to be obtained.

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