American Association for the History of Nursing
30th Annual Conference
The Art and Rhythm of Nursing through the Years

Co-Sponsored by The Stanley Shalom Zielony Institute for Nursing Excellence and American Association for the History of Nursing, Inc.

September 26-29, 2013
Cleveland, Ohio
September, 2013

Dear Conference Participants,

I am delighted to welcome you to the American Association for the History of Nursing’s 30th Annual Research Conference. The AAHN’s annual conferences enjoy a well-deserved reputation for stellar scholarship, valuable networking opportunities and an all-around fun time in which those who do history and those who delight in it come together to revel in historical insight. The paper and posters sessions included in this year’s conference represent cutting edge historical research covering diverse topics of interest to the nursing and health care community. And, because AAHN members do not believe in “all work and no play” there are enough social events planned to make this a most entertaining time for everyone.

This year we are honored to have Dr. Naomi Rogers as our 2nd Eleanor Krohn Herrmann Keynote Speaker. Dr. Rogers is an Associate Professor at Yale University and an expert on the history of disease, public health, gender and medicine, nursing, alternative medicine and health policy. Her keynote address is titled “The Most Admired Women in America: Remembering and Forgetting in the History of Nursing.” The conference will then proceed to the awards ceremony, Friday evening reception, silent auction, paper and poster sessions, and of course the live auction—for which we hope you will all bid very generously on the diverse array of items collected. Please don’t forget to come to the Sunday morning membership meeting at which you will hear all the interesting activities the Association has planned for the future.

This conference would not have happened without the tremendous work put into it by the Local Arrangement Committee, chaired by Karen Price and Anna Mary Bowers. Planning a conference involves a tremendous amount of effort and the Association truly appreciates Karen and Anna Mary’s work. We also send huge kudos to Marcia Pecjak who kept everyone organized and to all the members of the Local Arrangements Committee. Special thanks go to the AAHN’s 2nd Vice President and Program Chair, Mary Gibson who worked tirelessly to make this an outstanding conference. Thanks, too, to our generous hosts, the Cleveland Clinic and the Stanley Shalom Zelony Institute for Nursing Excellence under the leadership of Executive Chief Nursing Officer K. Kelly Hancock and to Associate Chief Nursing Officer Joan Kavanagh who had the vision and foresight to bring the AAHN to the Cleveland Clinic.

And now, on to the Conference!

Jean C. Whelan, PhD, RN

President, AAHN
September 26, 2013

On behalf of The Stanley Shalom Zielony Institute for Nursing Excellence, welcome to Cleveland!

We are honored to host the annual conference of the American Association for the History of Nursing in our great city. With a history rooted in manufacturing and rock ‘n roll, Cleveland has transformed itself into an epicenter of medical innovation and world-class care. During your stay, we hope you can find time to visit some of our museums, The Dittrick Medical History Center, The Rock & Roll Hall of Fame as well as tour some of Cleveland Clinic’s beautiful 167 acre campus.

Cleveland Clinic is a nonprofit, multispecialty academic medical center that integrates clinical and hospital care with research and education. Cleveland Clinic was founded in 1921 by four renowned physicians with a vision of providing outstanding patient care based upon the principles of cooperation, compassion and innovation. Numerous medical breakthroughs and innovations have happened at Cleveland Clinic in fields ranging from basic science to brain surgery. Medical breakthroughs including isolation of serotonin, a key factor in hypertension, the first coronary angiography, first minimally invasive aortic heart valve surgery and the nation’s first near-total face transplant, among many others. We are hopeful you’ll find our setting inspirational and reflective of the great advances made in the profession of nursing and the practice of medicine.

Throughout the conference, we will celebrate the rich, vibrant history of the nursing profession and recognize 30 years of historical scholarship. The Stanley Shalom Zielony Institute for Nursing Excellence oversees the practice, development and education of more than 11,000 nurses within the Cleveland Clinic health system in inpatient, outpatient, rehabilitation and home care fields.

We are thrilled to welcome keynote speaker Dr. Naomi Rogers, PhD, associate professor in the Women’s, Gender, and Sexual Studies and History of Medicine Departments at the Yale School of Medicine. She is a renowned expert and researcher of the history of disease, public health, gender and medicine, nursing and alternative medicine in 19th and 20th century America.

We extend our welcome and invite you to take advantage of all Cleveland has to offer!

Sincerely,

K. Kelly Hancock, MSN, RN, NE-BC

Executive Chief Nursing Officer, Cleveland Clinic
September 26, 2013

AAHN Conference Attendees:

Welcome to Cleveland and to Cleveland Clinic!

It is with great pleasure that the Local Arrangements Planning Committee (LAC) welcomes you to the Cleveland Clinic. We are honored to co-sponsor the 30th Annual Conference for the American Association for the History of Nursing. This is the second time the AAHN Conference has been in Cleveland, the first time was back in 1996 and so much has changed here since then. We hope you have some time to tour our campus and our city.

The LAC has worked diligently over the last three years to try to see to every detail of the conference. It is exciting to welcome participants here from across the United States, Europe, Asia, and South America. We are honored to be a part of the AAHN’s mission and vision to “stimulate national and international interest and collaboration in the history of nursing,” to educate other nurses regarding the rich history of our profession, and to “encourage and support research in the history of nursing.” Through the wide array of posters, presentations, and awards, this conference showcases the AAHN’s commitment to recognize “outstanding scholarly achievement in nursing history.”

We are delighted to share with you and the AAHN to celebrate 30 illustrious years of historical scholarship. Please join us for the Opening Welcome Reception on Friday evening in Ballroom A/B, 5:30 p.m. – 7:30 p.m. Come mingle with friends and make new acquaintances.

Please let us know if you have any questions or need assistance. We would be more than happy to help. Committee members are identified by red ribbons on their badges and our volunteers, by orange ribbons. Once again, thank you for attending and welcome to Cleveland!

Sincerely,

The Local Arrangements Planning Committee, Cleveland Clinic
<table>
<thead>
<tr>
<th>Cleveland Clinic</th>
<th>Administrative Support</th>
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<tbody>
<tr>
<td>Cleveland Clinic Local Arrangements Committee</td>
<td>Marcia Pecjak, AAB, CAP-OM</td>
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<tr>
<td>Joan Kavanagh, MSN, RN</td>
<td>Sandra Shumway, MSN, RN</td>
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<td>Associate Chief Nursing Officer</td>
<td>Consultant (Ret’d.),</td>
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<td>Cleveland Clinic Health System</td>
<td>Nursing Administration</td>
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<td>Mandy Barney, MBA</td>
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<td>Marketing Manager</td>
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<td>Anna Mary Bowers, MSN, RN</td>
<td>Mary E. Gibson, PhD, RN</td>
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<tr>
<td>Clinical Information Systems Analyst</td>
<td>Assistant Professor</td>
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<td>Office of Nursing Informatics</td>
<td>Assistant Chair, Department of Family,</td>
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<td>Community, and Mental Health</td>
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<tr>
<td>Ann Dugan, MBA, MSN, RN</td>
<td>Assistant Director, Center for Nursing</td>
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<tr>
<td>Nursing Education Specialist</td>
<td>Historical Inquiry</td>
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<tr>
<td>Office of Nursing Education &amp; Professional Practice Development</td>
<td>University of Virginia School of Nursing</td>
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<tr>
<td>Mary E. Gibson, PhD, RN</td>
<td>AAHN Program Chair and Liaison, AAHN</td>
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<tr>
<td>Assistant Professor</td>
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<tr>
<td>Andy Mahowald, MA, RN</td>
<td>Mary Kennedy, MBA, BSN, RN</td>
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<tr>
<td>Executive Director, Ohio League for Nursing</td>
<td>Chief Nursing Officer</td>
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<tr>
<td>Karen Price, MSN, RN</td>
<td>Lutheran Hospital</td>
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<tr>
<td>Clinical Instructor / Skills Lab Coordinator</td>
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<tr>
<td>Office of Nursing Education &amp; Professional Practice Development</td>
<td>Terry Spark, BSN, RN</td>
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<tr>
<td>Cynthia Willis, MSN, RN</td>
<td>Marymount Hospital</td>
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<tr>
<td>Senior Director, Nursing Education</td>
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<td>Marcia Pecjak, AAB, CAP-OM</td>
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<td>Nursing Administration</td>
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# CONFERENCE OVERVIEW

## THURSDAY, SEPTEMBER 26, 2013

### Pre-Conference Program

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>11:30 AM-5:00 PM</td>
<td>Registration</td>
<td>Ballroom A Foyer</td>
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<tr>
<td>1:00 PM-3:30 PM</td>
<td><strong>Pre-Conference Program: Oral Histories and Biography</strong>&lt;br&gt;1. “Talking and Listening…..Making Sense of Oral History Technique”&lt;br&gt;Kath Start, RGN RNT BSc (Hons), Nursing MSc Nursing PG Dip (OD)&lt;br&gt;2. “Biography as a Method of Historical Interpretation”&lt;br&gt;Laurie K. Glass, PhD, RN, FAAN</td>
<td>Ballroom A</td>
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*Dinner on your own*

## FRIDAY, SEPTEMBER 27, 2013

### Conference Program

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>8:30 AM-5:00 PM</td>
<td>Registration</td>
<td>Ballroom A and B Foyer</td>
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<tr>
<td>8:30 AM-9:00 AM</td>
<td><strong>AAHN Board of Directors Breakfast</strong></td>
<td>North Foyer</td>
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<tr>
<td>9:00 AM-12:30 PM</td>
<td><strong>AAHN Board of Directors Meeting</strong></td>
<td>Room 201</td>
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<tr>
<td>9:00 AM-12 Noon</td>
<td>Optional Tours – Information available at Registration Table</td>
<td></td>
</tr>
<tr>
<td>12:00 PM-1:00 PM</td>
<td><strong>AAHN Board of Director Luncheon</strong></td>
<td>North Foyer</td>
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<tr>
<td>1:00 PM-3:00 PM</td>
<td><strong>Welcome and Opening Remarks</strong></td>
<td>Ballroom A and B</td>
</tr>
<tr>
<td>1:30 PM-2:30 PM</td>
<td><strong>Eleanor Krohn Herrmann Keynote Address:</strong> Naomi Rogers, PhD: “The Most Admired Woman in America: Remembering and Forgetting in the History of Nursing”</td>
<td>Ballroom A and B</td>
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<tr>
<td>2:30 PM-3:00 PM</td>
<td><strong>Awards Presentation</strong></td>
<td>Ballroom A and B</td>
</tr>
<tr>
<td>3:00 PM-3:30 PM</td>
<td><strong>Break</strong></td>
<td>Ballroom A and B Foyer</td>
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### Concurrent Session I
### 3:30 PM-5:00 PM: Responding to Deadly Diseases

1. “Beyond Private Charity”: Virginia’s Early Initiatives to Combat Tuberculosis 1900-1925
   - Mary E. Gibson, PhD, RN, University of Virginia, Bjoring Center for Nursing Historical Inquiry

2. “Nursing the “Big Sickness”: Alaska and the Influenza Epidemic, 1918-1919
   - Arlene W. Keeling, PhD, RN, FAAN, The University of Virginia School of Nursing

3. “We Had Nothing to Offer but Ourselves”: First impressions from the early aids pandemic in the United States through oral histories of founding members of the Association of Nurses in Aids Care (ANAC) and historically situated messages of poster art, political cartoons, professional literature and popular media, 1981-1987
   - Ella P. Curry, PhD, MTS, RN, ACRN, Division of Infectious Diseases, MedStar Georgetown University Hospital, Washington, D.C.

### Maternal Child Nursing

4. “Poor Pregnant Women Deserve a Safe Delivery for Themselves and their Babies”
   - Barbara Brodie, PhD, RN, FAAN, Professor Emerita, University of Virginia

5. “Black and White: Photography and Race in Early Neonatal Intensive Care Units”
   - Briana Ralston, MS, RN, University of Pennsylvania School of Nursing

   - Gerard Fealy, PhD, RGN, UCD School of Nursing, Midwifery and Health Systems, University College, Dublin, Ireland

### Nursing the Pacific and Beyond

7. “Cold War Politics and Nursing: Jessie Scott Assesses Nursing Manpower in India Through a U. S. Lens”
   - Jeannine Uribe, PhD, RN, Assistant Clinical Professor, Drexel University, College of Nursing and Health Professions

8. “Mable Smyth – Hawaii’s First Public Health Nurse”
   - Winifred C. Connerton, PhD, CNM, Assistant Professor, Lienhard School of Nursing, College of Health Professions, Pace University

### 5:30 PM-7:30 PM: Welcome Reception: Hors d’oeuvres and Beverages

**Room 207**

**Moderator:** Deborah Gleason

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**SATURDAY, SEPTEMBER 28, 2013**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>8:00 AM-9:30 AM</td>
<td>Registration</td>
<td>Ballroom C Foyer</td>
</tr>
<tr>
<td>8:00 AM-9:00 AM</td>
<td>Continental Breakfast Meet the Editor: Patricia D’Antonio, <em>Nursing History Review</em></td>
<td>Ballroom C</td>
</tr>
<tr>
<td>8:00 AM-5:00 PM</td>
<td>Exhibits</td>
<td>Phillips Break Area</td>
</tr>
<tr>
<td>8:30 AM-4:00 PM</td>
<td>Posters Available for Viewing</td>
<td>Room 202</td>
</tr>
<tr>
<td>9:00 AM-9:40 AM</td>
<td>General Session: “Thirty Years Young...AAHN” Brigid Lusk and Friends!</td>
<td>Ballroom C</td>
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<tr>
<td>9:00 AM-2:30 AM</td>
<td>Silent Auction Open</td>
<td>Room 207</td>
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<tr>
<td>9:40 AM-10:30 AM</td>
<td>Break</td>
<td>Ballroom C Foyer</td>
</tr>
<tr>
<td>9:40 AM-10:30 AM &amp; 3:00 PM-3:30 PM</td>
<td>Poster Presenters Available for Discussion</td>
<td>Room 202</td>
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**Concurrent Sessions II**
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>10:30 AM-12 Noon</td>
<td><strong>Nursing as a Religious Mission</strong></td>
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</table>
|                     | 9. “Caring for Christ’s Poor”  
Linda Howe, PhD, CNS, CNE, Associate Professor, University of Central Florida             |
|                     | 10. “Edna Earle Teal, RN: Heritage and Legacy of a Transformational Leader, 1908-1942”  
Gail Godwin, MSN, RN, Georgia College & State University                                    |
|                     | 11. “Two American Women’s Nurse Training Experience at Kaiserwerth 1893-1895”  
Lisa M. Zerull, PhD, RN, FCN, Academic Liaison, Winchester Medical Center/Valley Health System |
|                    | **Nursing Education and Practice Challenges**                                               |
|                     | 12. “Housekeepers, Charwomen and the New Trained Nursing”  
Carol Helmstadter, BA, BSN, MA, University of Toronto                                        |
Annemarie McAllister EdD, RN, Columbia University, New York                                  |
|                    | **Early Ideas in Support of Nursing**                                                       |
|                     | 14. “Once a Nurse, Always a Nurse”: Isabel Hampton Robb in Cleveland, Ohio, 1894-1910  
Karen J. Egenes, RN, EdD, Loyola University, Chicago, Illinois                              |
|                     | 15. “Well Trained and Prudent Nurses”: Educating and Distributing Nurses in 19th Century Philadelphia  
Jean C. Whelan, PhD, RN, Adjunct Associate Professor of Nursing, Philadelphia, Pennsylvania |
|                     | 16. “Nursing, Houston, and the Great Depression”  
Adrian Melissinos, PhD, RN, Houston, Texas                                                   |
| 12 Noon-1:30 PM     | **Doctoral Student Luncheon**                                                               |
| 12 Noon-1:30 PM     | **Conference Attendee Luncheon**                                                            |
| Concurrent Sessions III | **Influences on Nursing Practice**                                                          |
| 1:30 PM-3:00 PM     | 17. “A Stable, Well-Trained Nursing Staff”: Nursing and Medical Research at the Hospital of the University of Pennsylvania, 1943-1965”  
Amanda L. Mahoney, MS, RN, University of Pennsylvania                                        |
Mary Ann Bradford Burnham, PhD, RN, Emerita Professor, Dept. of Nursing, Otterbein University, Westerville, Ohio |
Pauline Brand, Staff Tutor/Senior Lecturer, Faculty of Health and Social Care, The Open University in the East of England |
The Path to University for Nurses

20. “Margaret Bridgman (1892-1984): The Right Woman at the Right Time”
Mary Ellen Pike, PhD, APRN, ACNS-BC, Bellarmine University

21. “Nurse Clinician” at the Bedside: The Ideas of Francis Reiter, 1940s-1970s”
Sandra B. Lewenson, EdD, RN, FAAH, Pace University Lienhard School of Nursing, Pleasantville, New York

Jaime Lapayre, RN, PhD Candidate, Lecturer, University of Ottawa

Nursing Roles in War

Rebecca Coffin, MSN, RN, University of Virginia School of Nursing

24. “Nurses Roles in Military-Civilian Partnerships: The Fort Lewis Maternity Project of 1941 As A Case Study”
Nena Powell, RN, PhD, James Madison University

25. “Nursing Men with Psychological Trauma During the First World War – A Case Study of the Lord Derby War Hospital”
Claire Chatterton, RGN, RMN, BA (Hons), MA, PGCE, PhD, Staff Tutor, The Open University in the North West, Manchester, UK

3:00 PM-4:30 PM Silent Auction Check Out
3:00 PM-3:30 PM Break
3:00 PM-3:30 PM Poster Presenters Available for Discussion
4:00 PM-4:30 PM Poster Pick Up

Concurrent Sessions IV

3:30 PM-5:00 PM Public Health Nursing

26. “Must Be Prepared to Perform Any Domestic Duty Necessary”: Miss Broadwood’s Cottage Nurses”
Karen J. Engenes, RN, EdD, Loyola University, Chicago, Illinois

Janna Dieckmann, PhD, RN, Clinical Associate Professor, School of Nursing, University of North Carolina at Chapel Hill

Specialized Nursing in Rural Communities

28. “Access to Care in Appalachia: A Mobile Nursing Clinic in Appalachia and Remote Area Medical”
Audrey Snyder, PhD, RN, ACNP-CS, FAANP, FAEN, Assistant Professor, University of Virginia School of Nursing

Sarah White Craig, RN, MSN, PhD Student, University of Virginia

5:00 PM Evaluations and CNE Certificates
6:30 PM-7:30 PM Welcome: Annual Banquet and Live Auction
7:30 PM-9:30 PM Annual Banquet and Live Auction

SUNDAY, SEPTEMBER 29, 2013

7:30 AM-9:30 AM Breakfast
7:30 AM AAHN General Meeting
7:30 AM Closing Remarks
7:30 AM Presentation for 2014 Conference at University of Connecticut
9:30 AM Adjourn
INTERCONTINENTAL HOTEL
CONFERENCE FLOOR PLAN
SECOND FLOOR

American Association for the History of Nursing
30th Annual Conference
The Art and Rhythm of Nursing through the Years

202 203 204 205 206 207

201

Six Continents Room

Amphitheater

Philips Break Area

Coat Check

Elevators

Ballroom A

Ballroom B

Ballroom C

The Founders Ballroom

Break Area
THURSDAY, SEPTEMBER 26, 2013
PRE-CONFERENCE

11:30 AM-5:00 PM
Registration
Ballroom A Foyer

1:00 PM-3:30 PM
Pre-Conference Program: Oral Histories and Biography
Ballroom A

1. Oral Histories
“Talking and Listening… Making Sense of Oral History Technique”
Kath Start, RGN RNT BSc (Hons), Nursing MSc Nursing PG Dip (OD)

Professor Kath Start is a Visiting Professor of Health and Medical Sciences at the University of Surrey, United Kingdom. She is the Director of Workforce Development, South East Coast Ambulance Service (NHS). A registered nurse and nursing tutor, Kath has held a number of senior nursing and education roles throughout the NHS, including Head of Nursing at Kingston University and Deputy Dean at St George’s, where she developed the first Paramedic Practitioner course. Kath was the lead researcher for the “Nurses’ Voices” oral history project (2002-2007) which captured the voices of over 150 nurses from London teaching hospitals including St Bartholomew’s, St Thomas’ and Guys Hospital as well as her own teaching hospital of St George’s. As Chair of the Nurses’ League for St George’s, Kath commissioned the production of a book using the oral history interviews. The methodology used in the production of the oral history archive was unique in the usage of volunteers who were also subjects. This methodology has been presented at oral history conferences internationally and with the support of the UK oral history society. Kath will present the method, the advantages, and the challenges in an interactive workshop designed to give participants a flavour of the method and its use in developing personal or institutional histories.

Dinner on your own

2. Biography
“Biography as a Method of Historical Interpretation”
Laurie K. Glass, PhD, RN, FAAN

Laurie K. Glass is a Professor Emerita and Director of the Center for Nursing History at the University of Wisconsin-Milwaukee College of Nursing. She received her PhD in Nursing Research and Nursing History from the University of Illinois at Chicago. Her specific interest is the historical analysis of nursing leaders and their impact on issues and events, and the history of professional organizations. Dr. Glass has been a member of various national committees which focus on nursing history and is a past president of the Wisconsin Nurses Association. She also is an Adjunct Associate Professor at the University of Illinois-Chicago College of Nursing. CDR Glass retired from the US Navy Nurse Corps in 1991 after serving 21 years.

Dr. Glass has been at UWM since 1975. She taught Foundations of Nursing, Issues and Trends, Research, and Nursing History to undergraduate and graduate students. She has served on numerous college and university committees, and has authored three books and numerous articles. Funded projects include the Contributions of Katharine Densford Dreves, the History of the Operating Room Nurses Association, the History of the University of Minnesota School of Nursing and the inventory and preservation of records and artifacts from three hospitals in Milwaukee.

Dr. Glass has also been involved in the adoption community for 25 years, particularly international adoptions. She volunteers to travel with families returning to their child’s country of birth.
FRIDAY, SEPTEMBER 27, 2013
CONFERENCE PROGRAM AND ABSTRACTS

8:30 AM-5:00 PM
Registration
Ballroom A and B Foyer

8:30 AM-8:30 AM
AAHN Board of Directors Breakfast
North Foyer

8:30 AM-12:30 PM
AAHN Board of Directors Meeting
Room 201

9:00 AM-12 Noon
Optional Tours – Information available at Registration

12:30 PM-1:30 PM
AAHN Board of Director Luncheon
North Foyer

1:00 PM-3:00 PM
General Session
Ballroom A and B

Welcome and Opening Remarks

Welcome:
• Karen Price, MSN, RN, Co-Chair AAHN Local Arrangements Planning Committee, Cleveland Clinic

Opening Remarks:
• Jean Whelan, PhD, RN, Adjunct Associate Professor of Nursing, University of Pennsylvania School of Nursing and President, American Association for the History of Nursing
• K. Kelly Hancock, MSN, RN, NE-BC, Executive Chief Nursing Officer, Cleveland Clinic Health System and Chief Nursing Officer, Main Campus
• Mary Gibson, PhD, RN, Second Vice President, Chair Program, American Association for the History of Nursing

1:30 PM-2:30 PM

Keynote Address: Naomi Rogers, PhD
“The Most Admired Woman in America: Remembering and Forgetting in the History of Nursing,”

The Association is honored to have Dr. Naomi Rogers deliver the Eleanor Krohn Hermann Keynote at this year’s conference. Dr. Rogers is an Associate Professor in the Women’s, Gender, and Sexuality Studies and History of Medicine and History departments at Yale University, whose professional interests range across the history of disease, public health, gender and medicine, nursing, and alternative medicine in 19th and 20th-century America. She is the author of numerous publications and scholarly works, presents frequent papers, and is a superb academician. Dr. Rogers earned a B.A. from Melbourne University and a PhD from the University of Pennsylvania. She is known for her lively talks and engaging manner. Dr. Rogers’ keynote address presents her work on Sister Elizabeth Kenny, the intriguing and controversial nurse credited with revolutionizing polio treatment in the mid-20th century. Ballroom A and B

2:30 PM-3:00 PM
Awards Presentation
Ballroom A and B

3:00 PM-3:30 PM
Break
Ballroom A and B Foyer
**Concurrent Session I**
3:30 PM-5:00 PM  
Room 207

**Focus: Responding to Deadly Diseases**

Moderator: Deborah Gleason

1. “Beyond Private Charity”: Virginia’s Early Initiatives to Combat Tuberculosis 1900-1925  
Mary E. Gibson, PhD, RN, University of Virginia, Bjoring Center for Nursing Historical Inquiry

**Abstract:**

**PURPOSE:** The purpose of this paper is to describe and analyze the earliest efforts in Virginia to address the imposing menace of tuberculosis, and to explore the role of Public Health Nurses in the prevention and treatment of the disease.

**RATIONALE AND SIGNIFICANCE:** In 1900, one in ten deaths over all age groups was due to tuberculosis in the United States. During what we expect to be the most productive time in life for humans, the ages of 15 to 45, fully one third of deaths occurred due to the disease.¹ In the South, where states still focused on the debt question of the Civil War, and continued to struggle to regain economic stability while maintaining white supremacy, few states offered organized programs to address the ravages of the “White Plague.” What we now call racial health disparities abounded among tuberculosis patients. African Americans were twice as likely to die from tuberculosis as their white counterparts in Richmond in 1906. The prevalence and death toll from tuberculosis created an urgency to reconsider the role of health care as an outreach of government, and spurred charitable nursing endeavors to address its containment and treatment.

**FINDINGS/CONCLUSIONS:** William Washington Baker introduced the bill to reorganize Virginia’s State Health Department in 1908 and to establish a tuberculosis sanatorium, with the full recognition that tuberculosis care and eradication was “beyond private charity.”² Four of his six children had died of tuberculosis. As a member of the legislature, he promoted the establishment of the first state sanatorium at Catawba. His efforts succeeded. At the same time, individual visiting nursing efforts in Richmond’s Instructive Visiting Nurses Association and Norfolk’s King’s Daughters Visiting Nursing program provided both clinic and individual home care for tubercular patients. In Richmond, Pine Camp provided a refuge and place of care for tubercular individuals and in Norfolk, an Infant Sanatorium served babies at risk for tuberculosis in summers at Virginia Beach, spearheaded by the King’s Daughters nurses. Both visiting nurse associations staffed clinics and worked within contemporary racial boundaries to care for those who were victims of tuberculosis. By hiring African American nurses in the early 1910s, these nursing ventures addressed the needs of both races. Agnes Dillon Randolph, a Richmond trained nurse and great granddaughter of Thomas Jefferson, became the executive secretary of the Virginia Tuberculosis Association, and was the driving force in the founding of the first sanatorium for African Americans in the state in 1918.

**METHODS/SOURCES:** The historical project utilized a social history framework, and employed sources from the Virginia State Health Department records, including Board of Health minutes, state health education publications, American Lung Association of Virginia archival sources (University of Virginia Health Sciences Library Historical Collections), archival sources of the King’s Daughters Visiting Nurse Service (Children’s Hospital of the King’s Daughters in Norfolk), and the papers of the Richmond Instructive Visiting Nurses Association at Tompkins McCaw Library (Richmond, VA), as well as relevant secondary sources.


2. “Nursing the “Big Sickness”: Alaska and the Influenza Epidemic, 1918-1919”  
Arlene W. Keeling, PhD, RN, FAAN, The University of Virginia School of Nursing

**Abstract:**

**AIMS:** The purpose of this paper is to describe and analyze the nurses’ role in responding to the 1918-1919 influenza epidemic in coastal towns and remote villages in Alaska. It focuses specifically on the roles played by itinerant Red Cross nurses recruited by the U.S. Public Health Service from the west coast of the United States to travel to Alaska. It considers their roles within the social, political, medical and nursing context of the period.

**RATIONALE & SIGNIFICANCE:** Alaska remains on the U.S. “watch list” for emerging pandemics of influenza, particularly avian flu (H5N1) and influenza A (H1N1), the novel strain that caused the “most lethal influenza pandemic on record.” (Taubenberger and Morens, 2010). The study of previous pandemics may help guide current and future pandemic planning. This paper fills a gap in...
what is known about nursing in Alaska in the 1918-19 pandemic.

METHODS / SOURCES: Traditional historical methods with a social history framework were used for data collection, data immersion, the development of a chronology and themes. Critical analysis of social, political, and economic context, as well as the state of the art of nursing, public health and medicine, was also done. Primary sources included the American Red Cross (ARC) reports from the National Archives Records Administration, College Park (NARA-CP, RG 803.11), American Red Cross reports from the regional archives in Seattle, Washington, and excerpts from the Alaska Flu 1919 Senate Hearings, January 1919. Secondary sources were also used.

FINDINGS / CONCLUSIONS: Influenza first broke out along coastal towns of Alaska, rapidly spreading to small towns in southeastern Alaska. It then spread to the north, striking Nome, where there were more than 1,000 deaths, 90% of which were among the Eskimos. Kodiak had about 50 deaths, leaving hundreds of orphans. The towns of Nicknik, Kogiveng, Latouche and Juneau were also struck. The lack of access to care and the lack of physicians and nurses were critical factors in determining mortality rates. ARC nurses volunteered to accompany USPHS physicians, traveling by ship to reach the remote areas, and going “hut to hut” to give care for both patients and orphans. The Alaskan Red Cross Chapter was also involved in the local response. Interprofessional cooperation was a necessary factor in promoting access to care and survival.

3. “We Had Nothing to Offer but Ourselves”: First Impressions from the Early Aids Pandemic in the United States through Oral Histories of Founding Members of The Association Of Nurses in Aids Care (ANAC) and Historically Situated Messages of Poster Art, Political Cartoons, Professional Literature and Popular Media, 1981-1987

Ella Pritchard Curry, PhD, MTS, RN, ACRN Division of Infectious Diseases, MedStar Georgetown University Hospital, Washington, D.C.

Abstract:

BACKGROUND: The purpose of this study was to preserve, through in-depth interviews and in historical context, the oral histories and experiences of nurses in the United States, during the pre-treatment years 1981 through 1987, who were among early responders to the emerging pandemic and who acted to form ANAC in 1987.

METHODS: The study was designed in a social history framework using oral history methodology. Research was approved and reviewed annually by the George Mason University Human Subjects Review Board. In-depth audio-taped interviews were conducted with a purposeful sample of nine nurses (5 females, 4 males) from seven states and Washington, D.C., who were identified in historical documents as among the founding members of ANAC. Transcripts were reviewed by participants for accuracy and correction. Content was interpreted using Denzin’s Interpretive Interactionism and analyzed in the context of historical, socio-cultural, and political events, professional and popular literature, and multimedia images during the years 1981 through 1987.

RESULTS: The study yielded 17.5 hours of digitally recorded oral histories, over 400 pages of transcripts, and a rich array of documents, images, art, cartoons, and literature through which historical context was discovered. Participant locations of care were diverse (New York, California, Texas, Florida, Virginia, Maryland, Vermont, and Washington, D.C.), affording a wide geographic perspective on the early pandemic. Primary sources included first person oral histories, ANAC organizational records, minutes, and correspondence; secondary sources included concurrent historical accounts discovered in popular and professional literature, newspapers, art projects, and cultural events.

CONCLUSIONS AND SIGNIFICANCE: The study revealed a number of recurrent themes in the nurses’ oral histories: pride in the nursing profession and the care provided; relentless multiple losses of patients and peers with little time to reflect; vivid recollections of first AIDS patient encounters; burdens of stigma and discrimination; and the pain and privilege of being present to serve at that particular time in history. Findings make significant contributions not only to nursing history during the time of a newly-identified and devastating viral infection when little was known and fear was paramount, but also to perspective on the emergence of increased multidisciplinary collaboration, complex case management, and the primacy of fundamental nursing care.
Six Continents Room  
Focus: Maternal Child Nursing  
Moderator: Shannon Perry  

4. “Poor Pregnant Women Deserve a Safe Delivery for Themselves and their Babies”  
Barbara Brodie, PhD, RN, FAAN, Professor Emerita, University of Virginia  

Abstract:  
PURPOSE: The purpose of this study was to study the functioning of the Chicago Maternity Center (CNS). Created in 1932, in one of the poorest sections in Chicago, the Center’s purpose was “to bring safe maternity services to poor women during their confinement in their own homes and to teach doctors, students, and nurses the practice of obstetrics.”  

RATIONAL AND SIGNIFICANCE: The Chicago Maternity Center was the outgrowth of the Maxwell Street Dispensary of the Chicago Lying in Hospital founded by the famous obstetrician Dr. Joseph De Lee in 1895. In the 1930’s approximately 60 percent of babies were born at home thus it was thought that physician and nurses needed to be taught how to deliver babies in their own homes. Although the hospitalization of women for the delivery of their infants would become the norm many poor women continued to seek home deliveries for their families.  

METHODOLOGY/SOURCES: The major source of primary data was the archival documents of the Chicago Maternity Center found in the collections of the Northwestern Memorial Hospital Archives. Additional data was located in the Chicago Historical Museum and the Chicago Public Library. Secondary sources included historical, medical and nursing texts of the era.  

FINDINGS: The CNS met an essential need of many families at a time when few hospitals had adequate maternity services and poor families lacked the money to pay a private physician or a hospital. Moreover, the center provided safe, competent and family oriented maternity services to families in the confines of their own homes. The Center averaged over 1,000 births per year and trained hundreds of physicians, nurses and other medical personal during its 40 years of existence.  

CONCLUSION: The Chicago Maternity Center’s Mortality and morbidity statistics for mothers and infants were better than those found in hospital maternity units and families enjoyed the support of their loved one during confinement. The push by the medical profession and society to medicalize the delivery of babies has not pleased all families and home births with nurse and lay midwives are still offered in some communities.  

5. “Black and White: Photography and Race in Early Neonatal Intensive Care Units”  
Briana Ralston, MS, RN, University of Pennsylvania School of Nursing  

Abstract:  
PURPOSE OF STUDY: The purpose of this study is to use photographs to examine how issues of race affected who was cared for and who provided care in the early years of neonatal intensive care units to better understand how these NICUs developed into the spaces considered common in hospitals today.  

RATIONALE AND SIGNIFICANCE: Premature infants have been clustered together in hospitals since the 1920s, but it was not until the 1960s that hospitals transitioned to NICUs. These new NICUs served as spaces where critically ill newborns received care unique to their medical and developmental needs. Premature infant units existed at a time when racial segregation existed in healthcare institutions and services, and the implications of ‘separate but equal’ played out in tangible ways in hospitals across the country. By the early 1960s, the federal government enacted Title VI and within the next two years would pass Medicaid, both of which held implications for equal access to health services. The establishment of these early NICUs coincided with vast changes in American healthcare policy. The secondary literature regarding the development of NICUs is silent regarding how issues of race, class, and the consideration of age as a theme and might affect how historians approach the history of neonatal intensive care.  

METHODOLOGY: The data for the study is derived from photographs from neonatal intensive care units in hospital archives in Philadelphia. I analyzed the photographs as structured data images of how the creator and the viewers imagined the formation of these early units.  

PRIMARY AND SECONDARY SOURCES: Secondary sources include histories of the development of neonatal intensive care and also the cities and hospitals in which these photographs were taken. Primary sources include photographs from Philadelphia hospitals and documents from archives in Philadelphia that provide a context for the photograph itself.  

FINDINGS: Women, both Black and White, participated in delivery
of care in NICUs in Philadelphia within starkly white sterile environments. These women are depicted performing similar jobs but their depiction is nuanced in different ways. The photographs themselves are black and white and highlight stark contrasts when different racial groups are shown in the white sterile environments of the NICUs in the 1960s. These photographs tell us about these women in how they are depicted, specifically who is portrayed and who is not. We also see who received care and how the photographers chose to present the patients within these highly technological NICU environments.

CONCLUSIONS: Nurses have been instrumental in how neonatal intensive care developed, but these units did not arise independently of the social and medical contexts of the time. This work will challenge how we understand who received this innovative care in a particular time and place. By asking questions regarding how race influenced who gave and received the highly specialized care of the new NICUs, this work can challenge how we think about the development of care today.

Gerard Fealy, PhD, RGN, UCD School of Nursing, Midwifery and Health Systems, University College, Dublin, Ireland

Abstract:
PURPOSE OF STUDY: The purpose of the study was to develop an authoritative and critical history of the Cripples’ Home and its successor organization Sunbeam House, a voluntary organization near Dublin.

RATIONALE AND SIGNIFICANCE: In Ireland, voluntary or ‘charity’ institutions played a central role in the provision of indoor medical relief in the nineteenth century and were commissioned by the Irish state to provide a range of services following Irish independence. Aside from commemorative histories of large voluntary hospitals, there are few critical studies of small voluntary care homes. One such institution was the Cripples’ Home, founded by nurse and philanthropist Lucinda Sullivan.

DESCRIPTION OF METHODOLOGY: The study was based on an analysis of historical documentary sources contained in the archives of Sunbeam House Services. The analysis and interpretation of sources was informed by the broad paradigm of social history and sources were interpreted in the light of charity and disability discourses of the period.

SOURCES: A range of documentary primary sources was consulted, including the minute books of the Board of Trustees of the Cripples’ Home, the writings of Lucinda Sullivan, newspaper reports, case notes of individual children and miscellaneous letters and correspondence. Secondary sources, including a short commemorative history of the organization published in 1997, were also consulted.

FINDINGS AND CONCLUSIONS: The Cripples’ Home was founded as a philanthropic act by a gentlewoman who was part of a cadre of middle class ladies in Ireland who promoted various social causes, notably sanitary and nursing reform, educational reform and the welfare of poor and disabled children. The first institution of its kind in Ireland, the Cripples’ Home provided treatments and schooling for children with a range of deformities that resulted from nutritional deficiency, tuberculosis and injuries. Children who were ‘very delicate and crippled with rickets’ experienced a range of surgical and other corrective treatments and a regime in which they were ‘not petted or pampered [but] … corrected and governed with wisdom’. The history of the early decades of the Cripples’ Home offers a case study of voluntary service and a window on the discourses of charity and disability associated with crippledom.

Room 204
Focus: Nursing the Pacific and Beyond
Moderator: Annemarie McAllister

7. “Cold War Politics and Nursing: Jessie Scott Assesses Nursing Manpower in India Through a U.S. Lens”
Jeannine Uribe, PhD, RN, Assistant Clinical Professor, Drexel University, College of Nursing and Health Professions

Abstract:
PURPOSE: The purpose of this study was to examine the work of Jessie Scott, Deputy Chief of the Division of Nursing, during her short stay in India. In a political move, the Indian government requested a “top-level” US nurse to study and recommend changes to direct the future of Indian nursing, bypassing their nurses and international aid organizations already in the country.

RATIONALE AND SIGNIFICANCE: US nurses enthusiastically participate in international health projects and professional nursing exchanges. Nurses who travel to other countries represent the USA and diplomacy is an important skill to utilize in these exchanges. This study documents one example of nursing being used in a political relationship between governments and expands
our knowledge of technical programs offering US consultants to other countries during the Cold War era.

METHODOLOGY: This study uses historical methods with a political lens to examine the data and sources. Primary sources include the Jessie M. Scott papers in the Barbara Bates Center for The Study of The History of Nursing, and the papers of the Technical Cooperative Mission of India in the National Archives. Journal articles from the American Journal of Nursing are also examined. Secondary sources include books on US/India relations during the Cold War period and Indian history.

FINDINGS: Jessie Scott traveled to India under the US government program called the Technical Cooperation Mission of India (TCM). While there, she introduced and utilized the same quantitative methods she used to study US nursing manpower and nursing work analysis issues. During her three-month assignment, she met with many nurses and health care providers and taught the Indian nurses research methods. In her report to the Indian government, she boldly called for the Indian nurses to be recognized to analyze and recommend policy changes. Jessie Scott was the lead administrator of the Nurse Training Act of 1964 and continued to refine her survey and statistical methods to promote nursing in the USA.

CONCLUSIONS: The TCM allocated $475 million to India to assist the country to modernize its industry and improve its health care system. Jessie Scott brought research methods to India to assist the Indian nurses to quantify and analyze nursing education, employment and professional issues. She promoted the idea that Indian nurses and Indian communities could determine their needs. Ultimately, Indian nurses did not carry out any studies due to budget restrictions when India went to war with China.

8. “Mable Smyth – Hawaii’s First Public Health Nurse”
Winifred C. Conneron, PhD, CNM, Assistant Professor, Lienhard School of Nursing, College of Health Professions, Pace University

Abstract:
PURPOSE OF STUDY: The purpose of this study is to trace the evolution of public health nursing from a singular district nursing project in Honolulu, to a territory-wide service that included municipal and plantation programs, through the work of Hawaiian nurse Mable Smyth.

RATIONALE AND SIGNIFICANCE: Hawaiian nursing history has been overlooked within the history of nursing in the U.S. The first hospital in the islands was founded by Kamehameha IV and Queen Emma in 1859, and trained nursing introduced in 1886 when two nurses were recruited from San Francisco and New York. Hawaii, though distant, followed trends in health care from the mainland U.S. but adapted them to local conditions. Public health in Hawaii reflected the multinational population of residents and caregivers. Smyth, a native Hawaiian who received her nursing education in Massachusetts, was credited with coordinating public health nursing across the Hawaiian islands.

METHODOLOGY AND SOURCES: Sources for this biographic and historical study include records from the Palama Settlement, the Territorial Board of Health, the Hawaiian Nurses’ Association, the Hawaiian State Archives and Hawaiian newspapers.

FINDINGS: Mable Smyth was the first native Hawaiian public health nurse in the territory of Hawaii. Smyth’s mother was Hawaiian, and her father Irish. She left the islands to study nursing in Springfield Massachusetts, and returned to the islands at a time when public health was just developing there. She began working at the Palama Settlement, which operated a district nursing program, and later a special tuberculosis program as well. Smyth was the head nurse of the Palama nursing service for 10 years, working with a collection of American, Hawaiian, Japanese, Filipino and Chinese nurses. When the Territorial Board of Health absorbed the Palama district nursing service, and expanded public health nursing to the outer islands and plantation facilities, she was invited to administer the program. Smyth returned to the mainland, at the behest of the Board of Health, to study public health nursing in Boston, and to conduct a survey of public health programs across the country. When Smyth died of post-operative complications at the age of 43, she was widely mourned by many members of the Hawaiian community.

CONCLUSION: Smyth’s legacy was a comprehensive territorial public health nursing service. She succeeded in combining the techniques of mainland settlement houses, municipal and private public health campaigns to meet the needs of a multicultural population spread across six islands in municipalities and plantation worker camps.

5:30 PM-7:30 PM
Welcome Reception: Hors d’oeuvres and beverages
Ballroom A and B
Dinner on your own
Abstract:

PURPOSE OF STUDY: The Dominican Sisters of Hawthorne are very little known. Much has been written about their founder, Rose Hawthorne, but very little about the sisters who have come after and who are carrying on the mission of the order. All nurses, these selfless individuals take care of indigent terminal cancer patients who come to them, for no monetary return. Their numbers are dwindling, and their story needs preserved. This study is to preserve the history of this group.

RATIONALE AND SIGNIFICANCE: It is important to document this order of nurses who have given care to thousands of indigent cancer patients over the last century. Their contribution to nursing in the United States, care of the cancer patient, and long-term care is valuable and should not be lost. It is a significant piece of nursing history in the United States.

DESCRIPTION OF METHODOLOGY: Archival research was done in the archives of the Dominicans of Hawthorne at Rosary Hill in Hawthorne, New York. Many letters, newsletters, memos, and plans were reviewed and original documents were photocopied for cataloging. From there themes were identified through grounded theory and selected themes were identified for a paper, saving many others for a longer manuscript in the future. I wanted to answer the questions: Is the order preserving the original mission? What are the reasons the order is closing their facilities. Why didn’t the facility in Africa survive? What is the possible future for this order of Dominicans?

IDENTIFICATION OF MAJOR PRIMARY AND SECONDARY SOURCES: Primary sources are from the archives at the convent in Hawthorne, NY. Secondary sources are from multiple books where the Rose Hawthorne story was documented. There were some areas of disagreement, so I verified it with the primary sources when there were questions of credibility.
FINDINGS AND CONCLUSIONS: The work designed by Mother M. Alphonsa (Rose Hawthorne) in 1900 has continued since her death in 1926. The sisters have continued to care for “Christ's Poor” for nearly a century, even attempting to establish a hospice in Africa, which did not survive due to misunderstanding the culture. I also found I have enough information for a book, rather than a paper, but the paper comes first, so a thought narrative emerged. The research documented the consistency of the order, but also foreshadowed the possible demise of the order due to a paucity of postulants and a decrease in funding from private donations.

10. “Edna Earle Teal, RN: Heritage and Legacy of a Transformational Leader, 1908-1942”
Gail Godwin, MSN, RN, Georgia College & State University

Abstract:
PURPOSE OF STUDY: In the nursing profession, transformational leaders like Florence Nightingale, Clara Barton, and Lillian Wald enriched the pages of nursing history books. However, there are many little known nursing leaders who have served diligently and succeeded in lifting up, teaching, healing, motivating, and indeed transforming lives. One such leader, Edna Earle Teal, personified the definition of transformational leadership which “occurs when one or more persons engage with others in such a way that leaders and followers raise one another to higher levels of motivation and morality” (Burns, 1978, p. 20). The purpose of this paper is to present a précis of the life of Edna Earle Teal and her heritage and legacy as a transformational leader.

RATIONALE AND SIGNIFICANCE: Edna Earle Teal, RN graduated from Baptist Tabernacle Infirmary and Training School for Christian Nurses (Georgia's oldest nursing school now known as Georgia Baptist College of Nursing of Mercer University) in 1908, worked as its head nurse for two years, and then served as a Baptist missionary nurse in Yangchow, China from 1910 until 1942. This research enhances nursing history scholarship on early missionary nurse roles in China specifically examining nurses’ work. There is no other known analysis of a Georgia Baptist missionary nurse.

METHODOLOGY: Traditional historical methodology with a social history framework was utilized to examine and analyze the life of Teal and how her work was influenced by culture, religion, gender, and economics. Sources include the published autobiography of Edna Earle Teal (2004), her unpublished letters and papers, interviews with her living relatives, newspaper articles, Georgia Baptist College of Nursing (GBCN) archives, and the Southern Baptist Historical Library and Archives.

FINDINGS: At the turn of the century, most training schools for nurses were organized by hospitals for the main purpose of using the students to care for the patients. In stark contrast, Baptist Tabernacle Infirmary and Training School for Christian Nurses was founded with express idea to train Christian nurses to care for the sick as well as missionary work at home and abroad. As an early graduate of the school, Teal's autobiography gives specific examples of how her training motivated her work and how her work navigated the channels of gender, culture, religion and economics to inspire, guide, uplift, and change the lives of those she served.

CONCLUSIONS: Edna Earle Teal's heritage included her quiet beginnings in a rural community near Villa Rica, Georgia to nursing training in the city of Atlanta and on to Yangchow, China where she served as a teacher, nurse, and missionary. She is still remembered today at GBCN with an award given in her honor to a graduate who is recognized for service to God and humanity.

11. “Two American Women’s Nurse Training Experience at Kaiserwerth 1893-1895”
Lisa M. Zerull, PhD, RN, FCN Academic Liaison, Winchester Medical Center/Valley Health System

Abstract:
PURPOSE: From an examination of two women’s diaries, this study identifies the American woman’s experiences during nurse training at the Kaiserswerth Deaconess Institution 1893-1895. The writings of Jennie Christ and Lucy Eyster provide a rich description of the women’s motivations, religious calling, struggles, and unanticipated events while preparing to become Lutheran deaconess nurses.

RATIONALE AND SIGNIFICANCE: Much of what has been written to date about the Lutheran Deaconess movement in America in the 1890’s has been written by male clergy and is limited to the organizational and administrative aspects of the movement. This research reveals the day-to-day experiences of two American women selected by the Lutheran General Synod to travel from America to Germany for deaconess nurse training. Leaving family behind to pursue a religious vocational calling, the women struggled to learn the German language while receiving formal instruction in the deaconess nurse ways. Their writings speak to the rigor of instruction and personal challenges of nurse training at Kaiserswerth in the 1890’s.
METHODS/ SOURCES: The study used historical and biographic methods as part of the overall nursing historiography taking into consideration social, religious, gendered, and denominational influences. Primary sources included diaries, correspondence, and photographs obtained from the Evangelical Lutheran Church in America Archives. Secondary sources included books and printed literature where necessary to provide context and interpretation.

FINDINGS AND CONCLUSIONS: Constrained by the social norms of domesticity during the period with limited opportunities for education or work outside the home, two American women from Kansas and Pennsylvania answered the call to become Lutheran deaconess nurses. In so doing, the women embarked on journeys that included education, travel, spiritual formation, and expanded opportunities beyond initial expectations. The Kaiserswerth nurse training provided rigorous religious and scientific instruction in the classroom, practical experience in hospital wards, and intentional spiritual guidance designed to shape and nurture the women with high expectations for discipline required of well-trained nurses. The women’s diaries revealed personal observations, varied experiences, and intense desires to excel in preparation for becoming parish deaconesses well-prepared to provide nursing care that addressed the physical, spiritual, and social needs of the Baltimore community.

Room 204
Focus: Nursing Education and Practice Challenges
Moderator: Audrey Snyder

12. “Housekeepers, Charwomen and the New Trained Nursing”
Carol Helmstadter, BA, BSN, MA, University of Toronto

Abstract:

PURPOSE OF STUDY: This paper demonstrates a major, and what would prove to be a lasting difficulty, which reformed nursing faced in nineteenth century England: nursing’s origins in the lowest stratum of domestic service. From the time of the Reformation hospital nurses had been charwomen and the matrons housekeepers. This long history of domestic service made it very difficult for the nineteenth century public and hospital governors to grasp the fact that the new trained nursing was work which was based on knowledge and professional experience. Using the experiences of Maria Machin, Flora Masson and Emily Aston, all Nightingale trained matrons who tried to introduce Nightingale nursing at hospitals in Montreal, London, Oxford, Ceylon and Gibraltar, this paper explores the changing character of hospital nursing and the barriers which hindered those changes.

RATIONALE, SIGNIFICANCE AND PURPOSE: Scholars have studied the way the class-bound nature of Victorian society, the gendered ideal of a lady, the restricted finances of the hospitals in which the new nursing was born, the resistance of conservative hospital governors to a female controlled nursing service, and the isolation of nurses in their individual hospitals with no effective professional association all created problems for the new nursing. However, nursing’s origins in the lowest rungs of domestic service was perhaps the most difficult obstacle with which nursing leaders struggled and is an area which has not been investigated.

METHODOLOGY AND SOURCES: I use social history methodology to analyze primary sources in the archives of the University of Toronto, the Montreal General Hospital, St. Thomas’s and St. Bartholomew’s Hospitals and the Radcliffe Infirmary as well as the extensive Nightingale papers. Secondary sources include the work of Monica Baly, Sioban Nelson, Judith Godden, and Anne-Marie Rafferty.

FINDINGS AND CONCLUSIONS: As doctors kept pressing for better nurses and heavier and heavier nurse staffing the escalating cost of the new training schools for cash-strapped hospitals which were 100% dependent on their endowments and charitable donations became a major hindrance to the development of the new nursing. Nursing’s origins in domestic service, however, was an even more important barrier to the recognition of nursing as a profession than these crucial economic factors. It was simply impossible for the greater part of the public, most hospital administrators, and even some doctors to understand that able nurses needed many more competencies than did charwomen.

Annemarie McAllister EdD, RN, Columbia University, New York

Abstract:

PURPOSE OF THE STUDY: The Associate Degree model for the education of nurses (AND), developed at Teachers College (TC), Columbia University, was the direct result of the publication of
Mildred Montag’s (1950) dissertation entitled: Education of nursing technicians: A report of a type B project. This study focuses on the leadership of Dr. Montag and R. Louise McManus, Dean of the Department of Nursing Education at TC during the years 1947 to 1961. McManus served as the advisor on Montag’s dissertation and influenced the development and implementation of the AND model placing TC at the center of what became the most common level of entry into practice for nurses. The success of the model remains a divisive issue for the nursing profession.

RATIONALE AND SIGNIFICANCE: The implementation of this radical new way to educate nurses achieved the long held goal of many nurse leaders to move the education of nurses from the apprenticeship model into the American system of higher education. The model that Montag proposed and McManus championed, rapidly moved forward and soon became the most common pathway into the nursing profession. As intended, it outpaced the diploma model. Unexpectedly, it also outpaced the baccalaureate model, an unintended consequence that continues to haunt the profession. An examination of how that occurred and the leadership qualities that were necessary to make it happen could have implications for today’s nurse leaders.

DESCRIPTION OF METHODOLOGY: An historical descriptive approach was used to examine the ideas of McManus and Montag and their efforts to institute a new model for the education of nurses. Particular emphasis is placed on the years between 1951 when Montag completed her dissertation and 1959 when the results of the Cooperative Research Study were published showing that nurses educated at the AND level performed as well or better that baccalaureate trained nurses.

PRIMARY AND SECONDARY SOURCES: Primary sources included reports, meeting minutes, letters, and videotaped interviews of Drs. Montag and McManus located in the Teachers College (TC) Archive. Materials were accessed at the Rockefeller Archive in Pocantico, New York, the Barbara Bates Center for Nursing History at the University of Pennsylvania, and the Adelphi University Archive in Garden City, New York. Interviews with subjects who were students of and faculty members with Dr. Montag were included. Secondary sources include newspaper articles, narratives, and published interviews with Montag and McManus.

FINDINGS AND CONCLUSIONS: McManus and Montag led the development of the AND, facing challenges to the development and acceptance of this model by other nursing leaders. Yet the larger world stage, the distinct milieu at TC, and the foresight and focus of these two nurse leaders created a perfect storm of events that ushered the nursing profession into the system of higher education in America. This history, considered in light of today’s issues, enables us to see how the progression in nursing education evolved and provides insight into future possibilities.

Room 201
Focus: Early Ideas in Support of Nursing
Moderator: Marjorie Baier

14. “Once a Nurse, Always a Nurse”: Isabel Hampton Robb in Cleveland, Ohio, 1894-1910
Karen J. Egenes, RN, EdD, Loyola University, Chicago, Illinois

Abstract:
AIM: In June, 1894, when Miss Isabel Hampton resigned her position of Superintendent of Nurses at the Johns Hopkins Hospital to marry Dr. Hunter Robb, many of her colleagues mourned the loss of the preeminent US nursing leader. In keeping with Victorian era mores, it was assumed that Miss Hampton would assume a role in the private sphere, providing support to her husband, and obstetrician who had been recruited to a post in Cleveland. However in a break from tradition, the new Mrs. Robb successfully negotiated a role that allowed her to meet the demands of domestic duties while continuing to provide leadership in the profession of nursing. Among her many accomplishments during the years she resided in Cleveland, Mrs. Robb helped to found the first nursing associations, authored the books, Nursing Ethics and Educational Standards for Nursing, and helped to establish the Lakeside Training School and the Cleveland Visiting Nurse Association. Some of her endeavors to advance nursing led to confrontations with her spouse’s colleagues the medical community. Yet she simultaneously reared two sons and was reputed to be a devoted wife and mother.

RATIONALE AND SIGNIFICANCE: The life of Isabel Hampton Robb following her marriage presents a unique case study of a woman’s successful break from the culture of domesticity and her concurrent maintenance of a societal role deemed appropriate for the time. This study presents Mrs. Robb’s life in Cleveland as a “private citizen”, coupled with her prominent leadership in the profession. Although prior research studies have focused on Mrs. Robb’s extraordinary professional accomplishments, this study describes her life in the private sphere as a context for her achievements.

METHODOLOGY AND SOURCES: Methods of social history were used in this study. Primary source materials included materials
from the archives of Case Western Reserve University. Secondary sources included published biographies of Isabel Hampton Robb, as well as contemporary journal and newspaper articles.

FINDINGS AND CONCLUSIONS: Isabel Hampton Robb's sudden death in 1910 on Euclid Avenue, Cleveland's main street was heralded by the British Journal of Nursing as "an international calamity". Rather than marking the end of her leadership in nursing, Mrs. Robb's married life served as a catalyst for her embarkation into new venues in which to extend her influence. The skills she developed to navigate her divergent roles may have added to her strength as a nurse leader.

15. “Well Trained and Prudent Nurses”:
Educating and Distributing Nurses in 19th Century Philadelphia
Jean C. Whelan, PhD, RN, Adjunct Associate Professor of Nursing University of Pennsylvania School of Nursing

Abstract:
PURPOSE OF STUDY: This paper examines the Philadelphia Nurse Charity, an early 19th century nurse education and distribution program designed to deliver nursing care to the poor and general public. It will identify problems connected with initial nurse education and distribution schemes and successes and failures in maintaining an adequate supply of nurses.

RATIONALE AND SIGNIFICANCE: Traditionally, the introduction of professional nurse education in the United States is dated from the latter half of the 19th century. Yet programs to educate nurses existed in the US from the beginning of the Republic. The most ambitious and systematized effort to both train and supply paid nurses to those needing care was the Philadelphia Nurse Charity. The Nurse Charity, which was later subsumed into the Philadelphia Lying-In Hospital and Training School, began operations in 1838 as a benevolent effort to supply nurses to indigent birthing women. As part of this plan, the Nurse Charity offered working women a course of lectures and practical, supervised instruction in nursing which upon completion of the program enabled them to hire out as private nurses. The establishment of the Nurse Charity is a compelling example of an innovative effort to launch a substantial and successful nurse training program in the years before the Nightingale era. Examination of the workings and organization of the Nurse Charity sheds light on the formation, problems and issues facing the 19th century nurse workforce; problems which persisted well into the 20th century.

METHODOLOGY, PRIMARY AND SECONDARY SOURCES: This study was carried out using the methods of social history research. It is a case study of the Philadelphia Nurse Charity and Philadelphia Lying-In Charity Hospital and Nurse Training School. Primary sources used were the records of the Nurse Charity, the Lying-In Hospital and the Roberta West Collection. Records examined included statistical reports, minutes of meetings, correspondence and annual reports. Secondary sources used which enhanced, confirmed and validated findings were historical studies of 19th century Philadelphia and US.

FINDINGS AND CONCLUSIONS: The Philadelphia Nurse Charity, which credibly claimed that it was the first school of nursing in the United States, presents an intriguing example of how a pioneer nursing education program linked instruction, clinical practice and work to produce nurses. Additionally, the Nurse Charity devised a groundbreaking nurse distribution scheme which was replicated and used extensively by professional nurses in the first decades of the 20th century.

16. “Nursing, Houston, and the Great Depression”
Adrian Melissinos, PhD, RN, Houston, Texas

Abstract:
Adrian Melissinos, PhD, RN
Shirley Morrison, PhD, RN

PURPOSE: Despite the implementation of Works Progress Administration (WPA) projects throughout the state of Texas, nurses within Houston, as elsewhere, struggled with unemployment needs during the Great Depression as hospitals reduced employment and demands for private duty nurses decreased. This study investigates the response by Houston nurses on a local level to the needs of their colleagues.

RATIONALE AND SIGNIFICANCE: Houston nurses responded by implementing a remarkable fundraising project that engaged not only nurses but the wider Houston community as well. While relying upon their own professional members, the nurses sought and received support from the citizens of the city. The efforts of the Houston nurses contribute to an understanding of why public support of nursing can be helpful in furthering the goals of the profession.

METHODOLOGY: Historical methodology using primary and secondary sources was utilized. Archival sources include, but are not limited to, documents, brochures, minutes, artwork, and newspaper accounts from the Texas Nurses Association.
FINDINGS: TNA District #9 in Houston sponsored a benefit performance “History of Nursing Pageant” in December, 1933 in the midst of the Great Depression. Directors of nursing, students from schools of nursing, graduate nurses from local hospitals and institutions, and community members participated. Proceeds from the project were used to create a student loan fund and monies awarded for educational purposes.

CONCLUSIONS: The Houston nurses demonstrated that creative efforts utilizing community support could be effective in meeting professional goals. Within the Student Loan Fund instituted by the TNA District #9 nurses in 1933 lies the origin of the Scholarship and Research Fund which continues to this day and provides financial support for nursing scholarship.

12 Noon-1:30 PM
Doctoral Student Luncheon
Room 203

12 Noon-1:30 PM
Conference Attendee Luncheon
Ballroom C

Concurrent Sessions III:
1:30 PM-3:00 PM
Six Continents Room
Focus: Influences on Nursing Practice
Moderator: Barbara Maling

17. “A Stable, Well-Trained Nursing Staff”:
Nursing and Medical Research at the Hospital of the University of Pennsylvania, 1943-1965"
Amanda L. Mahoney, MS, RN University of Pennsylvania

Abstract:

PURPOSE OF STUDY: The purpose of this study is to examine nurse staffing for medical research studies at a Philadelphia hospital between 1943 and 1965. This exploration of how administrators, physician investigators and others defined the skills and knowledge necessary to make an effective research nurse reveals much about the day to day activities of clinical trials, the work of research nurses, and issues such as patient safety and data integrity during the post-World War II decades. This paper lays the groundwork for a wider study of the work of nurses in mid-twentieth century medical research between 1943 and 1965.

RATIONALE AND SIGNIFICANCE: During the post-war decades, physicians at the Hospital of the University of Pennsylvania (HUP) maintained strong institutional ties to the Office of Scientific Research and Development (OSRD), a federal agency formed to coordinate military-related scientific research during World War II and other organizations such as the National Institute of Health (NIH). Despite consistent funding from these sources and others, physician researchers at HUP faced numerous challenges when rolling out new studies. One such challenge, staffing nurses for research work troubled investigators developing clinical trials in 1943, 1957 and 1960. Physicists and administrators struggled with identifying the skills and education necessary for good research nurses, recruiting nurses for the work, and had difficulty securing such research nurses within the hospital’s nursing infrastructure.

DESCRIPTION OF METHODOLOGY: Historical analyses of primary and secondary sources related to medical research at HUP and the University of Pennsylvania were used. Considering the hospital and components of the research “team” as a socio-technical system using the theoretical framework of Science, Technology and Society (STS) opens up the history of medical research to include activities, knowledge and objects related to less-visible historical actors.

IDENTIFICATION OF MAJOR PRIMARY AND SECONDARY SOURCES: Primary sources included the archives of the Visiting Nurses Association (VNA) of Philadelphia, which contracted with HUP to provide in-home care to cancer study patients, the personal papers of physicians involved in clinical trials at HUP, and administrative records from HUP and the University of Pennsylvania and the HUP Training School. Secondary sources such as nursing and medical journals contemporary to research at HUP and educational materials related to nursing practice provided context.

FINDINGS AND CONCLUSIONS: Physicians coordinating research work at HUP seemed certain that “right” nurses were critical to the success of clinical trials, but were less certain of how to define the “right” set of skills, knowledge and experience. Physician-researchers were willing to part with precious research funding and resources to attract highly qualified nurses to their research group, but still had difficulty hiring them. The difficulties researchers faced in securing research nurses may have led to the creation
of a dedicated research unit at HUP. In some instances, nurses working within the HUP research community may have used their role in a new and expanding field as an opportunity to expand their professional responsibilities and knowledge.

Mary Ann Bradford Burnham, PhD, RN, Emerita Professor, Dept. of Nursing, Otterbein University, Westerville, Ohio

Abstract:

PURPOSE: This study was to describe Barbara Nash and Pamela Dickerson’s experiences in creating an independent private nursing practice in the State of Ohio before the State Nurse Practice Act authorized independent nursing practice.

RATIONALE AND SIGNIFICANCE: It was common knowledge among many local advanced practice nurses that Barbara and Pamela were in the forefront of independent nursing practice in Ohio. It was important to make a record of their experience and have their story archived at the Medical Heritage Center at The Ohio State University, Columbus, Ohio. Their story is important to the nursing history of central Ohio and Ohio, since Ohio was the last state to enact legislation recognizing advanced practice nursing.

METHODOLOGY AND SOURCES: Unstructured face-to-face interviews were tape recorded with supporting written notes over many sessions in 2011 and 2012. Recordings were reviewed and clarifications made at following sessions. In April 2012, Barbara Nash and Pamela Dickerson gave a presentation at the Medical Heritage Center about their independent practice for the annual nursing celebration to precede National Nurses’ Week. The interviews, notes, and Heritage Center presentation are the sources for this presentation.

FINDINGS AND CONCLUSIONS: Barbara Nash and Pamela Dickerson decided how they wanted to practice nursing and developed a plan to make that dream a reality in the form of an independent nursing practice from 1982 until 2010 when the practice was sold.

In 1983, they forced a meeting with the Ohio Board of Medicine and went away with its “blessing to practice nursing” many years before there was legislation to support independent nursing practice. Over time they expanded their practice from direct interaction with “clients” to consulting and running a university health clinic. They came to see themselves as “pioneers” after receiving the 1986 National Award, “Excellence In Innovative Nursing Practice,” from Sigma Theta Tau International.

Pauline Brand, Staff Tutor/Senior Lecturer, Faculty of Health and Social Care, The Open University in the East of England

Abstract:

PURPOSE OF STUDY: This paper traces the development of the training and role of nurses working in the field of birth control nursing from the 1920s onwards. It demonstrates how the work of the nurses in birth control clinics varied according to the influence or availability of the medical profession with some nurses permitted to work autonomously while others were restricted to the role of a handmaiden.

RATIONALE AND SIGNIFICANCE: The provision of contraceptive services is one of the most important developments in primary care. Although the history of the birth control movement is well documented, the contribution made to the provision of services by nurses or midwives and the training for, and development of the role is conspicuous by its absence. Thus this paper provides a distinctive record of the development of the training and role of nurses working in contraceptive and sexual health services.

DESCRIPTION OF METHODOLOGY, IDENTIFICATION OF MAJOR PRIMARY AND SECONDARY SOURCES: Primary archival sources from the Marie Stopes, Family Planning Association (FPA) and English National Board archives and a range of secondary sources were interrogated and supplemented by oral history interviews with nurses who had undertaken the FPA training, to produce a narrative account of the content and development of the training and subsequent roles undertaken by the nurses.

FINDINGS AND CONCLUSIONS: This paper highlights two aspects of relevance to the history of the specialism and to contemporary practice; firstly the way in which the role was established in the 1920’s; second how the training for nurses working in the field of contraception and sexual health provided by the FPA and later the English National Board evolved over the ensuing decades. It is argued that the origin of differences in approach to the training and role of the birth control nurse can be traced to the consequence of a disagreement in the 1930’s between the Stopes organization and the National Birth Control Council (NBCC), later to become...
the FPA. This disagreement produced distinct approaches to the delivery of care and as a result impacted on the scope of practice permitted for the nurses working within the birth control clinics. Within the Stopes’ organization, a seamless woman-to-woman autonomous nurse-led service was adopted while the traditional ‘handmaiden’ approach held sway in clinics under the auspices of the NBCC which was to become the dominant organization. In the latter the introduction of the routine use of the vaginal speculum by doctors for every woman attending the clinic acted as a means to maintain the supremacy of the medical profession.

To conclude, this paper reveals not only how nursing practice evolved in this specialism, but how the dominance of the medical profession and the clinical practices adopted as routine were allowed to impact on the training, role and the scope of nursing practice; a situation which persisted even after the absorption of family planning into the National Health Service (NHS) in 1974 and the creation of the English National Board courses for family planning.

Room 204
Focus: The Path to University for Nurses
Moderator: Lisa Zerull
20. “Margaret Bridgman (1892-1984): The Right Woman at the Right Time”
Mary Ellen Pike, PhD, APRN, ACNS-BC Bellarmine University

Abstract:

PURPOSE OF STUDY: This study explored how the personal and professional background of nursing education consultant Margaret Bridgman, a non-nurse, uniquely prepared her to guide the transition of nursing education from the hospital to the collegiate setting in the late 1940s.

RATIONALE AND SIGNIFICANCE: Bridgman’s keen understanding of the importance of nursing to the health of Americans in the post-World War II era strengthened her commitment to quality nursing education. Although major nursing reports had long recommended that nursing move from the hospital to the collegiate setting, the Brown Report (1948) prompted the transition of a large number of programs. Bridgman served as a consultant for the Russell Sage Foundation and then for the National League for Nursing, guiding programs through the various stages of the process including accreditation. Her contributions are largely forgotten despite their merit.

DESCRIPTION OF METHODOLOGY AND SOURCES: Biographic methods were used for this study.

Primary resources included Bridgman’s personal papers at the Schlesinger Library on the History of Women at Harvard and documents from the archives of the Russell Sage Foundation, the Rockefeller Foundation, Lake Forest College, Skidmore College, and the National League for Nursing. Secondary resources included books, newspapers, and interviews. Bridgman also authored several articles and one text which were reviewed for the study.

FINDINGS: Margaret Bridgman’s personal and professional life prepared her well for the compelling role she played in nursing education. Her unique qualifications included being a third generation educator, twenty years as an academic dean, experience with Skidmore’s excellent nursing program, and her close working relationship with Skidmore nursing chair and National League for Nursing Education president, Agnes Gelinas. These experiences provided her with an exceptional background to not only champion nursing’s move to collegiate education but its parity with other disciplines.

CONCLUSION: Margaret Bridgman’s consultation services contributed enormously to nursing education. Although unheralded, she played a significant role in transitioning programs from the hospital to the collegiate setting and fostering quality programs. Bridgman’s conclusions and recommendations in Nursing in the Collegiate Setting (1953) remain surprisingly relevant sixty years later.

21. “Nurse Clinician” At the Bedside: The Ideas of Francis Reiter, 1940s-1970s”
Sandra B. Lewenson, EdD, RN, FAAH Pace University Lienhard School of Nursing Pleasantville, New York

Abstract:

PURPOSE OF STUDY: This paper focuses on the work of the mid-twentieth century nursing leader, Francis Reiter, and how her innovative ideas about clinical practice and nursing education continue to be relevant today.

RATIONALE AND SIGNIFICANCE: The recent American Association of Colleges of Nurses master’s essentials document highlights some of the important characteristics that graduate nurses must possess in order to be successful in the current health care environment. Many of these characteristics, like interprofessional care teams, translation of evidence into practice, and concern for quality outcomes at the bedside appear in
Reiter’s writing about nursing practice and education throughout her career. Reiter sought master’s level entry into practice at a time when nursing had not yet achieved a baccalaureate entry into practice requirement and confusion still existed between the roles of a technical and professional nurse.

DESCRIPTION OF METHODOLOGY: Archival records were used from Teachers College, online Pocket Collections and from Pace University Historical Nursing Archives of Westchester/Rockland, found in the Mortola Library, Pleasantville, New York. Secondary sources included professional literature reflecting nursing’s efforts to move into higher education.

FINDINGS: Reiter became the first Dean of the graduate program at New York Medical College in 1960 that later moved to Pace University in 1973. She believed that nurses with advanced degrees needed to be at the bedside providing direct care to individuals and their families. Reiter advocated entrance into nursing with the baccalaureate degree as a minimum and chaired the committee that wrote the American Nurses Association (ANA) baccalaureate entrance into practice proposal presented at the ANA 1964-1965 convention. Reiter’s ideas about a “nurse clinician,” a term she coined in the 1940s, led her to envision nursing education within the walls of academia, but never far from the clinical site. She questioned the prevailing nursing leadership at the time that directed nursing education away from the matrix of clinical practice. Her strongly held beliefs led her to begin the innovative program at New York Medical College.

CONCLUSIONS: Reiter believed in a direct link between practice and education and is responsible for one of the first accelerated degree programs in nursing. She was ahead of her time in believing that nurses needed to be educated at the graduate level, in collaboration with other health professionals, and needed to use this clinical expertise at the bedside. Uncovering the ideas of Frances Reiter provides links with the past and raises questions as to why and how the profession continues to struggle with aligning the professional role of the nurse and higher education.

Jaime Lapeyre, RN, PhD Candidate, Lecturer University of Ottawa

Abstract:
PURPOSE: To highlight the influence of the work of philosopher and educator John Dewey on the successful reform agenda of prominent American nurse leader Annie Goodrich during the early 20th century.

RATIONALE AND SIGNIFICANCE: Nursing underwent significant educational reform during the early 20th century. During this period Annie Goodrich one of the primary leaders of this reform, advocated for the movement of nursing education outside of the hospital and into higher education institutions. Primary source material suggests that Goodrich’s ideals in education were influenced by her reading of the work of philosopher and educator John Dewey. In particular Goodrich used Dewey’s work to support her claims for increasing the knowledge of nurses and oppose concerns regarding an “overtrained” nursing workforce.

DESCRIPTION OF METHODOLOGY/SOURCES: An examination of primary source material including the personal papers of Annie Goodrich held within the Barbara Bates Centre for the Study of Nursing History, as well as correspondence between Goodrich and Rockefeller Foundation officers found within the Rockefeller Archive Center, highlights both Goodrich’s reform efforts as well as her reliance on the work of Dewey.

FINDINGS: Goodrich drew upon the work of Dewey to further her claims for higher education for nurses, and in particular the importance of both “contemplative” and “practical” knowledge in improving the work of the nurse. Goodrich’s ideals for nursing education were in line with other progressive era reformers during this period including the influential executive officers within the Rockefeller Foundation (RF).

CONCLUSIONS: By aligning her ideals with those of the RF, Goodrich was able to gain significant support and funding towards the reform of nursing education in the USA, in particular towards the formation of the Yale School of Nursing (of which she was appointed the first Dean). Goodrich’s reform agenda was also felt abroad as her ideas came to impact the Foundation’s international nursing education program during the mid-1920s.
Focus: Nursing Roles in War
Moderator: Adrian Melissinos

Rebecca Coffin, MSN, RN University of Virginia School of Nursing

Abstract:
PURPOSE OF STUDY: The purpose of this paper is to describe and analyze the role of nurses at Poston, Arizona, the largest of ten Japanese-American War Relocation Centers (WRC) established in the western United States during World War II. Caucasian and Japanese-American nurses worked together to provide care for the evacuated Japanese-American people. Racial, cultural, and other factors are examined to determine their impact on the nursing care provided at this camp.

RATIONALE AND SIGNIFICANCE: Today there is a renewed emphasis on compassionate care in nursing (Schantz, 2007; van der Cingel, 2011). While many busy hospital environments are seen as “uncaring” and driven exclusively by hard science, care provided in the hospitals and clinics in the WRCs depended on the art of nursing to compensate for care delivered in an environment where a lack of doctors, nurse, and medical supplies was the norm. Perhaps there are lessons to be learned from the past. While much has been written about nurses in World War II, there is a gap in the historical nursing literature about the role of nurses in these camps. This paper will fill the gap in this unique nursing environment.

METHODOLOGY AND SOURCES: Traditional historical methods with a social history framework were used. Primary sources obtained from the Sally Lucas Jean Papers in the Wilson Library at the University of North Carolina at Chapel Hill and Denshō Archives include photographs, reports, minutes, newspaper articles, and oral histories. Secondary sources included books and journal articles.

FINDINGS: Nurses and medical supplies were in chronically short supply from the moment the hospital was put into service. Evacuees were eligible for release from the camps if they could provide evidence of employment or admission to school in locations outside of the restricted areas of the West Coast. This led to frequent turnover of nurses and nurse aids, further adding to the difficulty of providing quality care. The focus of care was preventive and curative. Caucasian nurses, such as Elizabeth Vickers and Sally Lucas Jean were in supervisory positions while the Japanese-American nurses worked directly with the patients.

CONCLUSIONS: Despite the racial tensions between the Japanese-American nurses and their Caucasian supervisors, inadequate nutrition, and the emotional and physical tolls of an involuntary evacuation, the overall health of the population was similar to or better than the health on non-evacuated Japanese-Americans. Compassion and the understanding and respect of culture contributed to these good outcomes.

24. “Nurses Roles in Military-Civilian Partnerships: The Fort Lewis Maternity Project of 1941 as a Case Study”
Nena Powell, RN, PhD James Madison University

Abstract:
PURPOSE: The purpose of this study is to highlight nurses’ roles in military-civilian partnerships using the World War II (WWII) Fort Lewis Maternity Project as a case study.

RATIONALE AND SIGNIFICANCE: The evolution and development of military dependent medical care services have been influenced by many factors including war. Stimulated by the first peacetime compulsory military training act of October 1941, thousands of sailors, soldiers, air force men and marines moved en masse to military training camps throughout the United States. The men’s wives soon followed, crowding into surrounding military encampments. Military medical services were quickly overtaxed, particularly with an ever increasing number of pregnant women. Indeed, the base facilities were not able to accommodate the rapidly expanding numbers of women in need of maternity care. One of the earliest communities to experience this growth was that of Tacoma City Washington, which housed the Fort Lewis military base. There, Colonel A.P. Clark, the head of the Fort Lewis medical corps, not only recognized the problem but also sought the assistance of state and local health leaders to find a solution. The Fort Lewis Maternity Care project was the outcome. From the outset both military and civilian medical leaders intended that the project would provide physician—managed pregnancy as well as hospital births and that nursing would play a critical role in this maternal/child initiative. This project, exemplifying a positive military-civilian partnership, proved to have far reaching implications on maternal and child health across the nation and was the prototype program for the Emergency Maternity and Infant Care program enacted by Congress in 1943.

METHODOLOGY AND SOURCES: A social history framework was used to guide the investigation. Primary sources included
FINDINGS: The medical care crisis of pregnant military dependents in Tacoma, Washington created by pre-WWII troop buildup was solved through a collaborative military-civilian partnership created between Fort Lewis, Tacoma City, and Pierce County. The Fort Lewis Maternity Project used a network of military-civilian clinics, physicians and nursing services to meet the identified needs of these military dependents. Additionally, military and civilian medical leaders sought and received the help of the United States Children’s Bureau to assist with administration of the project and with funds. In fact, the funds used by the Children’s Bureau for the Washington State project reflected how this organization, as administrator of Maternal Child Health funds under Title V, used a broad, but legitimate interpretation of Fund B monies to facilitate a local maternal and child health program. Despite the physician–managed pregnancy focus of the project nurses proved critical to its success. Specifically, local public health and hospital nurses proved invaluable to the care of these military dependents from pregnancy through delivery and beyond.

CONCLUSIONS: Although military dependent medical care was not provisioned from the inception of the U.S. Armed forces events such as the maternity care crisis in pre-WWII Fort Lewis have forced military medical leadership to seek solutions. The Fort Lewis Maternity project was one such solution that had far reaching implications for maternal/child health care not only in Washington State but as the war progressed across the nation and nursing proved to be a valuable part of this initiative.

25. “Nursing Men with Psychological Trauma During the First World War – A Case Study of the Lord Derby War Hospital”
Claire Chatterton. RGN, RMN, BA (Hons), MA, PGCE, PhD, Staff Tutor, The Open University in the North West, UK

Abstract:

PURPOSE OF STUDY: This study aims to explore the role of British nurses during the First World War in the treatment of the psychological trauma that was experienced by many soldiers. It will take a case study approach focussing on the Lord Derby War Hospital, England.

RATIONALE AND SIGNIFICANCE: Nurses during the First World War were expected to deal with both physical and psychological trauma and suffering. Hallett (2009) however, in her work on First World War Nursing, drew attention to the invisibility of nurses in accounts of what she terms the ‘emotional containment’ side of their work. Famous medical men, such as Rivers and Yealland, are frequently discussed in accounts of the treatment of mental disorders, such as shellshock, but much less is known about the nurses who assisted them and were expected to provide an environment which would promote and aid recovery. Nurses who were engaged in this work came from varying professional backgrounds and worked in a variety of settings. As the numbers of soldiers affected grew, the War Office began to requisition large public psychiatric asylums and used these as war hospitals for the treatment of mentally disordered soldiers. The study focuses on the Lord Derby War Hospital, which was situated in the North West of England and had been the former Lancashire County Asylum (Winwick). At 1,000 beds it was one of the largest of these hospitals.

By the end of World War One the British Army had dealt with 80,000 cases of shell shock and accounts have continued to fascinate as the success of Pat Barker's best selling novel ‘Regeneration’ and the subsequent film bear witness but little remains known about those who nursed mentally ill soldiers during this period and the nature of their work.

METHODOLOGY AND SOURCES: This paper draws on an analysis of archival sources. Primary sources include the hospital records situated in the Chester and Cheshire County Archives and records of some other war hospital in county archives are used for comparative purposes. It also utilises articles from contemporary journals such as the Journal of Mental Science.
FINDINGS AND CONCLUSION: This study gives an insight into the nursing work undertaken by staff within a large British war hospital. It illustrates the diversity of the approaches that were undertaken which largely depended on the stance taken by the doctors who ran these institutions and their interpretations of the aetiology of shellshock and its most appropriate treatment. Nurses’ work was to a very large extent governed by this and it was to be this that shaped and defined their work in this new area.

References:

3:00 PM-4:30 PM
Silent Auction Check Out
Room 207

3:00 PM-3:30 PM
Break
Six Continents Foyer

3:00 PM -3:30 PM
Poster Presenters Available for Discussion
Room 202

4:00 PM-4:30 PM
Poster Pick Up
Room 202

3:30 PM-5:00 PM
Concurrent Sessions IV:
3:30 PM-5:00 PM
Six Continents Room
Focus: Public Health Nursing
Moderator: Barbara Brodie

26. “Must Be Prepared to Perform Any Domestic Duty Necessary”: Miss Broadwood’s Cottage Nurses”
Karen J. Engenes, RN, EdD, Loyola University Chicago, Illinois

Abstract:
AIM: In 1883, Miss Bertha Broadwood, a non-nurse aristocrat from Lyne in Surrey, England, established the Cottage Benefit Nursing Association to provide home care and midwifery services to impoverished residents of rural districts who could not afford the services of a “fully trained” nurse. Although provision of nursing care was envisioned as the primary responsibility of the cottage nurse, the role also included housekeeping, meal preparation, and care of children and farm animals. To prepare for this work, cottage nurses received a six month training course which included instruction in bed-making, bed baths, dressing changes, female catheterization, assessment of symptoms, and midwifery care. However, Miss Broadwood soon found her “nurses” in competition with Queen's Institute Nurses, founded in 1887, who also provided home care, but who were graduates of hospital training schools.

RATIONALE AND SIGNIFICANCE: Although studies have focused on the evolution of district nursing in London, the establishment of Rural District Nursing in Gloucestershire, and the foundation of the Queen’s Nursing Institute, little attention has been given to cottage nurses, other than allusions to the shortcomings in their educational preparation. Yet cottage nurses played a role in the professional development of district nursing in the United Kingdom.

METHODOLOGY AND SOURCES: Methods of social history were used in this study. Primary source materials included the diaries of Miss Broadwood, from the Surrey History Centre. Secondary sources included published histories of district nursing, as well as contemporary journal articles from the British Medical Journal and the British Journal of Nursing.

FINDINGS AND CONCLUSIONS: British nursing associations were dismayed that Miss Nightingale’s minimum standard of one year of hospital training had been reduced to only a few months for the cottage nurses. The professional identity of the Queen's Institute Nurses, as well as their salaries, were threatened by nurses with lesser preparation. In contrast, some prominent physicians spoke in favor of the expansion of the scheme, citing the willingness of the cottage nurses to work under the direction of a physician and to follow his directives. With time, a Queen’s Institute Nurse was required to serve as county superintendent, responsible for the supervision of cottage nurses. However, the role of the cottage nurse may have indirectly influenced the passage legislation that required higher standards for midwives and the eventual passage of the Registration Bill for nurses.

Janna Dieckmann, PhD, RN Clinical Associate Professor, School of Nursing University of North Carolina at Chapel Hill

Abstract:
PURPOSE OF THE STUDY: The purpose of this study is to examine public health nursing (PHN) responses to East European immigration and southern African American migration into
Cleveland, Ohio, in relation to organizational mission, service district retraction, and patterns of residential mobility in the first half of the twentieth century.

RATIONALE AND SIGNIFICANCE: As a unique agency with service and educational missions, the University Public Health Nursing District (UND) has been overlooked as a model for public health nursing. Examination of its record enables exploration of factors and rationales contributing to progressive reductions in health services for urban minorities between 1920 and 1960.

DESCRIPTION OF THE METHODOLOGY: Historical methodology is used to analyze archived organizational records, reports, and board minutes, supported by the secondary literature.

MAJOR PRIMARY AND SECONDARY SOURCES: The major primary source is the archived organizational records of the UND (Case Western Reserve University Archives). Secondary sources on the UND and its work include published reports, journal articles, and book materials. Additional secondary sources on the study period include books and journal articles on public health nursing; the formation and movement of European ethnic and African American urban neighborhoods; urban health concerns, health disparities, and access to health services; and the discrimination in employment and housing directed toward Cleveland’s African American residents, and their resistance to it.

FINDINGS AND CONCLUSIONS: In 1916, the UND began providing public health nursing services, including both clinics and home-visiting, in a mile-square area of central Cleveland that was then the destination for East European immigrants and southern African American migrants. UND served as both a demonstration project and a clinical practice setting in “social training” for PHN students at all levels. As both agency staff and clinical instructors, UND’s PHN staff encountered the neighborhoods and their residents leading to engaged obligations toward their patients and families. The UND PHNs sought to preserve the agency’s joint missions when the service district was shifted by their Board in 1922, 1929, and 1937. Although attributed to a desire to accommodate population and industrial movement, UND’s relocation out of central Cleveland reduced services delivered in African American areas. Rather than measuring community benefit, the UND Board focused each relocation decision on the apparent practical suitability of the newer area for student-PHN education. The potential for service and “social training” that had originally characterized the UND was thus neglected and minimized.

Room 204
Focus: Specialized Nursing in Rural Communities
Moderator: Tess O’Neill

28. “Access to Care in Appalachia: A Mobile Nursing Clinic in Appalachia and Remote Area Medical”
Audrey Snyder, PhD, RN, ACNP-CS, FAANP, FAEN, Assistant Professor, University of Virginia School of Nursing

Abstract:
Audrey Snyder, PhD, RN, ACNP-CS, FAANP, FAEN, Assistant Professor, University of Virginia School of Nursing and Esther Thatcher, PhD(c), MSN, RN, University of Virginia

PURPOSE OF STUDY: The purpose of this exploratory study is to identify and describe the evolving role that nurses and nurse practitioners played in caring for low-income Appalachian families, from a roving health wagon in the 1980’s to the nation’s largest free health fair in the 2000’s. The nurse/nurse practitioner role is analyzed within the social, political and economic context of the period.

RATIONALE AND SIGNIFICANCE: Access to health care has been a factor for patients living in the isolated Appalachian Mountain regions. The Frontier Nursing service was pioneer in reaching those patients living in the most remote regions of Appalachia. Geography, demographics, and culture present obstacles for rural residents and healthcare providers. Rural areas have a strong sense of community responsibility and are creative at devising unique and creative ways to build social and physical infrastructures to provide care.

METHODOLOGY: Traditional historical methods with a social history framework were employed to examine the chronology of events in this organization, themes, and the context of historical events. Oral history interviews were conducted with the nurses, nurse practitioners (NPs) Sister Bernadette Kenny and Teresa Gardner, and others who had key roles in the Health Wagon and a stake in the health care of the community. Primary sources also included notes, brochures, and news articles in the personal files of the participants. Additional primary materials include RAM official statistics, local newspapers, library files, books and nursing scope of practice for the time period.

FINDINGS: The Health Wagon was established in 1980 by a medical missionary, Sister Bernadette Kenny, who partnered with a local non-profit hospital to provide health care service to poor
residents living in Central Appalachia in rural Southwest Virginia. She was the founder and initial Nurse Practitioner for the St. Mary’s Health Wagon. Identifying lacking patient medical, dental and vision care needs she partnered with Remote Area Medical (RAM) in 2000 to host the first Virginia RAM clinic event. What began as home visits to rural community patients evolved into a nurse-managed practice, including mobile and stationary clinics, and the organization of one of the largest yearly remote area medical episodic clinics in the world seeing over 2500 patients with over 5,000 patient encounters in a 3 day event.

CONCLUSIONS: The health wagon NPs provided access to care and broke down barrier of distance and cost for health care. They were on the front lines of health promotion and disease prevention. Their roles in bringing RAM to Southwest Virginia represented skillful recruitment of outside resources and developing community partners to scale up their work. The history of this mobile clinic work in central Appalachia provides insights that could shape health policies today.

Funded through an Intramural grant, University of Virginia

Sarah White Craig, RN, MSN, PhD Student, University of Virginia

Abstract:

PURPOSE OF STUDY: Industrialization of the southern United States changed the socioeconomic landscape of the post-Civil War South. This paper will examine nursing and health care practices in the North Carolina cotton mill villages operated by Moses and Caesar Cone. This paper seeks to recognize nursing’s contribution to public health in the industrial and community settings in cotton mill villages from 1915 to 1930.

RATIONALE AND SIGNIFICANCE: In 1915, on the eve of America’s entry into World War I, Levi Strauss contracted the majority of manufacturing rights to the Cone brothers for denim production. Proximity Mills’ labor population boomed as recruiters traveled all over Appalachia. Rural families, young unmarried men, women, blacks, and displaced farmers merged into one labor force. Industrial dominance changed many aspects of rural life. Due to a new transient labor force, traditional medical care in the home by family members was not always possible. Therefore, visiting nurses, clinics, and small hospitals were supported by the mill owners in order to provide care to workers. Understanding the history of mill workers’ access to medical care in the rural South is important to understanding class and race disparities in access to care today. The mill villages owned by Proximity Cotton Mills serve as a case study to synthesize the development of nursing and welfare work around the cotton mill industry in the rural South.

METHODOLOGY: Traditional historical methods with a social history framework were used for data collection, the development of research questions, and for data synthesis. In-depth analysis of rural health, industrial growth, paternalism, welfare works of nursing, and the evolution of socioeconomic status and health contribute to this study.

PRIMARY AND SECONDARY SOURCES: Primary sources included Cone Mills Incorporated papers, photos, correspondence, and contracts, the Greensboro Public Library, Bladen County Public Library, North Carolina state archives, personal papers of Harriet L. Herring social worker for several N.C. mill villages, and the Southern Historical Collection, Wilson Library, University of North Carolina, Chapel Hill. Secondary sources include historical accounts of Southern cotton mill industry spanning the late 1880s to mid-1930s.

PRELIMINARY FINDINGS AND CONCLUSIONS: Textile mill development rebuilt the southern economy from the ashes of the American Civil War. At the end of the First World War the population of rural cotton mill villages around Greensboro, North Carolina was drastically increased. Cotton mill owners provided health care programs showcased by health clinics, school inspections, visiting nurses, day nurseries for working mothers, health education initiatives, and monetary support for the establishment of hospitals and schools of nursing. Nurses were utilized in these village welfare programs to provide efficient and economic care to laborers. Race, class, gender, and U.S. labor policies shaped that care.

5:00 PM
Adjourn, Evaluations, and CNE Certificates Awarded
Coat Room Area

6:30 PM-7:30 PM
Welcome: Annual Banquet and Live Auction
Ballroom C Foyer

7:30 PM-9:30 PM
Annual Banquet and Live Auction
Ballroom C
SUNDAY, SEPTEMBER 29, 2013
CONFERENCE

7:30 AM-9:30 AM
Breakfast
AAHN General Meeting
Closing Remarks
Presentation for 2014 Conference
at The University of Connecticut
Ballroom A & B

9:30 AM
Adjourn
2013 AAHN CONFERENCE
POSTER PRESENTATIONS

Carole Wickham, DNS, CNS-BC

2. Nurses Chilean 1970-1980: Two Decades Of Transformation Of Identity, A Legacy For The Memory
Elizabeth Núñez Carrasco, Doctora, Enfermera, Academica Escuela de Enfermería Universidad de Santiago de Chile

3. “Above All, Let Her Remember to Do What She is Told to Do, and No More”: Isabel Hampton Robb (1859-1910) and The Dilemma Of Obedience
Michelle C. Hehman, MSN, RN

4. The Entry-Level RN Debate: Historical Barriers Prevent Resolution
April D. Matthias, PhD, RN, CNE, University of North Carolina Wilmington

5. Disaster in the Heartland: St. Anthony Hospital Fire of 1949
Linda Hatke Ruholl, RN, PhD

6. (Nearly) 101 Problems to Avoid in Writing a Hospital History!
Kathleen Kaufman, MS, RN, Associate Professor (Clinical) Emerita, University of Utah College of Nursing
Dianee N. Knorr, BSN, RN, Staff Nurse, LDS Hospital, Salt Lake City, Utah

7. The Hammon Gamma Globulin Field Trials in Siouxland: Ethical & Social Value Analysis (1951-1953)
Diane L. Smith, MSN, RN

8. Wartime Relief Activities of the Japanese Red Cross Nurses Dispatched to Burma in the Second World War
Yukari Kawahara, RN, PhD

9. Key Points Confronted while Researching the History of The University at Buffalo School Of Nursing
Janice Cooke Feigenbaum, RN, PhD

Donald G. Smith Jr., RN, MA, PhD, USAFE Col (ret)

11. Nursing’s Response to America’s View of Alzheimer’s Dementia from the Late 1800s to the Early 21st Century
Lisa Kirk Wiese, MSN, RN, doctoral candidate, Christine E. Lynn College of Nursing, Florida Atlantic University

Deborah L. Gleason, PhD, RN, CPNP

Mario R. Ortiz, RN, PhD, PHCNS-BC

14. The Amateur Archivist’s Tale: Thoughts on Creating a Working Nursing History Archive
Jennifer Casavant Telford, PhD, ACNP-BC, Assistant Professor
Jennifer Ryer, Doctoral Candidate, University of Connecticut

15. The World is My Neighborhood: A Visit with Lillian Wald
Diann L. Martin, PhD, RN, National Director of Medical and Nursing Programs, Concorde Career Colleges

16. Wherefore Art Thou? An examination of Nursing History in the Curriculum
Carolyn J. Lee, PhD

17. Work by Day, Play by Night: How Nurses of World War I Spent their Off- shifts
Jennifer Casavant Telford, PhD, ACNP-BC, Assistant Professor

18. Oral Histories from St. Kitts and Nevis: Experiences with Disasters
Audrey Snyder, PhD, RN, ACNP-CS, FAANP, FAEN, Assistant Professor, University of Virginia
Marcus Martin, MD, University of Virginia Office of Diversity and Equality
Jamela Martin, PhD, RN, Old Dominion University
## AAHN Past Presidents

- **2010-2012** Brigid Lusk, PhD, RN
- **2008-2010** Sylvia Rinker, PhD, RN
- **2006-2008** Arlene Keeling, PhD, RN, FAAH
- **2004-2006** Sandra B. Lewenson, EdD, RN, FAAH
- **2002-2004** Kathleen S. Hanson, PhD, RN
- **2000-2002** Eleanor Krohn Herrmann, EdD, RN, FAAH
- **1998-2000** Nettie Birnback, EdD, RN, FAAN
- **1996-1998** Marilyn Flood, PhD, RN
- **1994-1996** Eleanor M. Crowder, PhD, RN
- **1990-1992** Barbara Brodie, PhD, RN, FAAN
- **1988-1990** M. Patricia Donahue, PhD, RN, FAAN
- **1986-1988** Rosemary T. McCarthy, DNSc, RN, FAAN
- **1982-1984** Shirley H. Fondiller, EdD, RN, FAAN
- **1980-1982** Sydney D. Krampitz, PhD, RN
- **1979-1980** Teresa E. Christy, EdD, RN, FAAN

## AAHN Editors

### Nursing History Review

<table>
<thead>
<tr>
<th>Editor</th>
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<tr>
<td>Patricia D’Antonio, PhD, RN, FAAN</td>
<td>2003-present</td>
<td>11+</td>
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<tr>
<td>Joan L. Lynaugh, PhD, RN, FAAN</td>
<td>1993-2002</td>
<td>1-10</td>
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### AAHN Bulletin

<table>
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<tr>
<td>Beth Ann Reedy, PhD, RN</td>
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<td>Sylvia Rinker, PhD, RN</td>
<td>2008</td>
<td>97</td>
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<tr>
<td>Linda Sabin, PhD, RN</td>
<td>2002-2007</td>
<td>75-96</td>
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<tr>
<td>Susan Dudas, MN, RN, FAAN</td>
<td>1997-2002</td>
<td>56-74</td>
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<tr>
<td>Alma S. Woolley, PhD, RN, FAAN</td>
<td>1993-2002</td>
<td>46-55</td>
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<tr>
<td>Signe S. Cooper, MN, RN, FAAN</td>
<td>1986-1992</td>
<td>12-35</td>
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<tr>
<td>Bonnie &amp; Vern Bullough, PhD, RN, FAAN</td>
<td>1983-1986</td>
<td>1-11</td>
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</tbody>
</table>
Lavinia L. Dock Award

A staunch advocate of legislation to control nursing practice, Lavinia Lloyd Dock is also remembered for her outstanding contributions to nursing literature.

She graduated from Bellevue Training School for Nurses in 1886 and soon after became night supervisor at Bellevue. As both student and supervisor, Dock became aware of the problems students faced in studying drugs and solutions. As a result, she wrote Materia Medica for Nurses, one of the first nursing textbooks. In addition to serving as foreign editor of the American Journal of Nursing, she wrote Hygiene and Morality and in 1907, co-authored with Adelaide Nutting the first two volumes of the four-volume History of Nursing. Volumes III and IV were completed by Dock alone in 1912. During her multi-faceted career, Dock worked with Lillian Wald at Henry Street Settlement and with Isabel Hampton Robb at Johns Hopkins School for Nursing. She was also secretary of the International Council of Nurses for more than 20 years. Throughout her life, she was a devoted suffragette and political activist.

The purpose of the Lavinia L. Dock Award is to recognize outstanding research and writing produced by an experienced scholar in nursing history who submits a book.

2012
Carol Helmstadter and Judith Godden
Nursing before Nightingale 1850 -1899

2011
Patricia D'Antonio, PhD, FAAN, RN
American Nursing: A History of Knowledge, Authority, and the Meaning of Work

2010
Kara Vuic, PhD
Officer, Nurse, Woman: The Army Nurse Corps in the Vietnam War

2009
Julie Fairman, PhD, RN, FAAN
Making Room in the Clinic: Nurse Practitioners and the Evolution of Modern Health Care

2008
Cynthia A. Connolly, PhD, RN
Saving Sickly Children: The Tuberculosis Preventorium in American Life, 1909-1970

2007
Arlene W. Keeling
Nursing and the privilege of prescription, 1893-2000

2006
Barbara Mann Wall
“Unlikely Entrepreneurs”: Catholic Sisters and the Hospital Marketplace, 1865-1925

2005
Cynthia Connolly
Beyond Social History: New Approaches to Understanding the State and the State of Nursing History

2004
Tom Olson and Eileen Walsh
Handling the Sick, the Women of St. Luke’s and the Nature of Nursing, 1892-1937

2003
Arlene Keeling
Blurring the Boundaries Between Medicine and Nursing: Coronary Care Nursing, circa the 1960s
AWARD RECIPIENTS

2003
Geertje Boschma
*The Rise of Mental Health Nursing: A History of Psychiatric Care in Dutch Asylums 1890-1920*

Carol Helmstadter
*Early Nurse Reform in Nineteenth Century London: A Doctor Driven Phenomenon*

2002
Ellen Murphy and Laurie Glass
*AORN Emergence and Growth*

Elaine S. Marshall and Barbra Mann Wall
*Religion Gender and Autonomy – A Comparison of Two Religious Women’s Groups in Nursing and Hospitals in the late Nineteenth and Early Twentieth Centuries*

2001
Patricia D’Antonio
*Revisiting and Rethinking the Rewriting of Nursing History*
Bulletin of the History of Medicine

Karen Buhler-Wilkerson
*No Place Like Home: A History of Nursing and Home Care in the United States*
Johns Hopkins University Press

2000
Mary T. Sarnecky, RN, PhD
*A History of the U.S. Army Nurse Corps*

1999
Elizabeth M. Norman
*We Band of Angels*

1998
Julie Fairman and Joan Lynaugh
*Critical Care Nursing: A History*

1997
Susan Smith
*Sick and Tired of Being Sick and Tired: Black Women’s Health Activism on America, 1890-1950*
Philadelphia: University of Pennsylvania

1996
Michael Calabria & Janet Macrae (Eds.).
*Suggestions for Thought by Florence Nightingale: Selections and Commentaries*

1995
Sandra Lewenson
*Taking Charge: Nursing, Suffrage and Feminism in America, 1873-1920*

1993
Barbara Bates
*Bargaining for Life: A Social History of Tuberculosis, 1876-1938*
1991
Diane Hamilton
*The Cost of Caring: The Metropolitan Life Insurance Company’s Visiting Nurse Service, 1909-1953*
Bulletin of the History of Medicine, 63, 414-434.

1990
Darlene Clark Hines
*Black Women in White: Racial Conflict and Cooperation in the Nursing Profession, 1890-1955*
Indianapolis: University of Indiana.

1989
Karen Buhler-Wilkerson
*Public Health Nursing: In sickness or in health?*
American Journal of Public Health 75(10)1155-1161.

1988
Ellen Baer
“A Cooperative Venture” in *Pursuit of Professional Status: A Research Journal for Nursing*
Nursing Research, 36 (10), 18-25.

1987
Susan Reverby
*Ordered to Care: The Dilemma of American Nursing*
New York: Cambridge University.
M. Adelaide Nutting Award

Honored for her outstanding contributions to nursing and nursing education, Mary Adelaide Nutting was a noted educator, historian, and scholar. She was a strong advocate of university education for nurses and was instrumental in developing the first programs of this type.

When Nutting accepted the chairmanship of the newly developing Department of Nursing Education at Teachers College, Columbia University, she became the first nurse ever to be appointed to a university professorship. Earlier in her career, in 1894, Nutting became principal of the Johns Hopkins School of Nursing, where she had graduated from in 1891. During her lifetime, Nutting made significant contributions to nursing literature. She wrote A Sound Economic Basis for Nursing, co-authored with Lavinia Dock the first two volumes of the four-volume History of Nursing, and wrote many articles for nursing and health periodicals.

The purpose of the Mary Adelaide Nutting Award is to recognize outstanding research and writing produced by an experienced scholar in nursing history who submits, most often, a post-doctoral research manuscript or article. Manuscripts and articles by pre-doctoral students should be submitted to the Christy Award.

2012
Cynthia Connolly, Janet Golden and Benjamin Schneider
“A Startling New Chemotherapeutic Agent”: Pediatric Infectious Disease and the Introduction of Sulfonamides at Baltimore’s Sydenham Hospital

2011
Rima Apple, PhD
To Avoid Expense and Suffering: Public Health Nurses and the Struggle for Health Services

2010
Julie Fairman, PhD, RN, FAAN and Patricia D’Antonio, PhD, RN, FAAN
Reimagining Nursing’s Place in the History of Clinical Practice

2009
Barbra Mann Wall, PhD, RN
Catholic Sister Nurses in Selma, Alabama, 1940-1972

2008
Patricia D’Antonio, PhD, FAAN, RN
Nurses—and Wives and Mothers: Women and the Latter-Day Saints Training School's Class of 1919

2007
Carrie Howse
The Ultimate Destination for all Nursing

2006
Jean Whelan
A Necessity in the Nursing World: The Chicago Nurses Professional Registry, 1913-1950
AWARD RECIPIENTS

**Teresa E. Christy Award**

Throughout her professional career she was active in professional and civic organizations. A pioneer in the struggle to gain acceptance of historical research as a research methodology, her presence on the ANA Commission on Nursing Research brought recognition for historical research.

It was this work in historical research which has endeared Dr. Christy to nursing historians. Her “Portrait of a Leader” series for Nursing Outlook in 1969-70 were characteristic of her excellent documentation and ability to bring subjects to life. She advocated fostering critical thinking as well as independent thinking as a research methodology.

She was a founder and first president of the International History of Nursing Society, which was later named the American Association for the History of Nursing. Dr. Christy inspired many of the leading nursing historians today.

**The purpose of the Teresa E. Christy Award is to encourage new nursing history investigators, and to recognize excellence of historical research and writing done while the researcher was in a student status. The Christy Award is given for doctoral work and submissions usually are dissertations.**

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2012

**Annemarie McAllister**

*R. Louise McManus and Mildred Montage Create the Associate Degree Model for the Education of Nurses: The Right Leaders, the Right Time, the Right Place: 1947-1959*

University of Pennsylvania

2011

**Kara Dawn Smith, PhD**

*A Legacy of Care: Hesse and the Alice Frauenverein 1867-1918*

University of Alabama

2010

**Winifred C. Connerton, PhD**

*Have Cap, Will Travel: U.S. Nurses Abroad, 1898-1917*

University of Pennsylvania

2009

**Jacqueline Margo Brooks Carthon, PhD, RN, APRN**

*No Place for the Dying: A Tale of Urban Health Work in Philadelphia’s Black Belt*

University of Pennsylvania

2008

**Jennifer Lynn Hobbs, MSN, RN**


University of Pennsylvania

2007

**Deborah A Sampson**

*Determinants and determination*

University of Pennsylvania

2006

**Martha Anne Eastman**

*“All for Health for All”: The Local Dynamics of Rural Public Health in Maine, 1885-1950*

University of Maine

2005

**Sonja Joy Grypma**

*Healing Honan: Canadian Nurses at the North China Mission, 1888-1947*

University of Alberta, Edmonton.

2004

**Cynthia Toman**

*Officers and Ladies: Canadian Sisters, Women’s Work and The Second World War*

Dissertation, University of Ottowa.

2002

**Katherine Dawley**

*Leaving the Nest: Nurse Midwifery in the US 1940-1980*

Dissertation, University of Pennsylvania
AWARD RECIPIENTS

2001
Ellen Clarke
*Professional Commitment and Activism in the Lives of Five African American Women*
Dissertation, Harvard University

2000
Cynthia Connolly
*Prevention through Detention: Pediatric Tuberculosis Preventorium Movement in the US 1909-1951*

1998
Susan Winters
* Enlightened Citizen: Frances Payne Bolton and the Nursing Profession*
University of Virginia 1997.
Dr. Barbara Brodie, Chair.

1997
Sylvia Rinker
*To Spread the Gospel of Good Obstetrics: The Evolution of Obstetric Nursing, 1890-1940*
University of Virginia,
Barbara Brodie, Chair

1996
Brigid Lusk
*Professional Strategies and Attributes of Chicago Hospital Nurses During the Great Depression*
Dissertation, University of Illinois,
Joyce Johnson, Chair.

1994
Victoria Grando
*Nurses' Struggle for Economic Equity, 1945-1965*
University of Kansas.

1993
Julie Fairman
*New Hospitals, New Spaces: The Development of Intensive Care Units, 1950-1965*
University of Pennsylvania, Joan Lynaugh, Chair

1992
Phyllis Healy
*Mary Eugenie Hibbard, Nurse, Gentlewoman, and Patriot*
Dissertation, The University of Texas at Austin,
Eleanor Crowder, Chair

1991
Barbara Peterson
*The Division of Nursing Education, Teachers College, Columbia University, 1947-1961, The McManus Years: Advances in the Professionalism of Nursing*

1990
Meryn Stewart
Dissertation, University of Pennsylvania,
Joan Lynaugh, Chair.

1989
Irene Poplin
*A Study of Kaiserworth Deaconess Institute's Training School in 1850-1851: Purposes and Curriculum.*
Dissertation, University of Texas at Austin.
Mary M. Roberts Award

Mary May Roberts served as editor of The American Journal of Nursing from 1921-1949. When she became co-editor in 1921 with Katherine DeWitt, she had 22 years of nursing experience, a baccalaureate degree, and a certificate in Administration of Nursing Schools from Teachers College, Columbia University. In 1923, she became sole editor, a post she would hold for more than a quarter century. During her editorship, the circulation increased from 20,000 to more than 100,000.

In 1934, concerned about the need for a sound public relations program for the profession, she launched the “Nursing Information Bureau,” almost wholly financed and administered by the Journal company. In 1949, she retired, becoming editor emeritus. During retirement, she authored books on nursing in America, including The Army Nurse Corps--Yesterday and Today, and maintained her keen and sensitive interest in nursing and the Journal. She died in 1959 while at work on an editorial in the Journal offices.

The purpose of the Mary M. Roberts Award is to recognize outstanding original research and writing in an edited book of nursing history.

2012

Barbra Mann Wall and Arlene Keeling

Nurses on the Front Line. When Disaster Strikes 1878-2010
<table>
<thead>
<tr>
<th>Year</th>
<th>Host</th>
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<tr>
<td>2012</td>
<td>School of Nursing, Georgia Southern University, Savannah, Georgia</td>
<td>Margaret Humphreys, MD, PhD</td>
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<td>2011</td>
<td>Harris College of Nursing, Texas Christian University, Fort Worth, TX</td>
<td>Laurel Thatcher Ulrich, PhD</td>
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<td>2010</td>
<td>Royal Holloway, University of London, England</td>
<td>Mark Bostridge &amp; Dr. Afaf I. Meleis</td>
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<td>2009</td>
<td>University of Minnesota, Minneapolis, Minnesota</td>
<td>Steven Berlin Johnson</td>
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<td>2008</td>
<td>University of Pennsylvania, Philadelphia, Pennsylvania</td>
<td>Barbara Brodie</td>
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<td>2007</td>
<td>Pace University, Pleasantville, NY</td>
<td>Anne Marie Rafferty</td>
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<td>Mayo Clinic, Rochester, MN</td>
<td>Barbara Dossey</td>
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<td>Emory University, Atlanta, GA</td>
<td>Anne G. Jones</td>
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<td>Medical University of South Carolina, Charleston</td>
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<td>University of Wisconsin-Milwaukee</td>
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<td>Mary E. P. Davis</td>
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<td>Susan Reverby</td>
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<td>Leah Curtin</td>
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<td>Judith Leavitt</td>
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<td>University of Illinois, Chicago, IL</td>
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<td>University of Pennsylvania, Philadelphia, PA</td>
<td>Claire Fagin</td>
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<td>Christopher Maggs</td>
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<td>University of California, San Francisco, CA</td>
<td>J.S. Halliday</td>
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<td>University of Texas, Galveston, TX</td>
<td>Anne Hudson Jones</td>
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<td>Johns Hopkins University, Baltimore, MD</td>
<td>Janie Brown</td>
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<td>University of Cincinnati</td>
<td>M. Louise Fitzpatrick</td>
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<td>1987</td>
<td>University of Texas, Austin, TX</td>
<td>Barbara Melosh</td>
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<td>1986</td>
<td>University of Iowa, Iowa City, IA</td>
<td>Mildred Montag</td>
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<td>1985</td>
<td>Villanova University, Villanova, PA</td>
<td>Vernice Ferguson</td>
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<tr>
<td>1984</td>
<td>University of Virginia, Charlottesville</td>
<td>Rozella Schlotfeldt</td>
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CALL FOR ABSTRACTS

American Association for the History of Nursing
Thirty-first Annual History of Nursing Conference
Storrs and Hartford, CT
September 18-21, 2014

The American Association for the History of Nursing and the University of Connecticut’s School of Nursing, are co-sponsoring the Association’s thirty-first annual conference to be held in Hartford and Storrs, CT. The conference provides a forum for researchers interested in sharing new research that addresses events, issues, and topics in any area of nursing and health care history broadly construed to encompass the history of nursing, global nursing history, nursing practice, health care institutions, caring, illness, healing work and public health. Submissions pertaining to all areas and regions of the world are welcome. Papers and posters that expand the horizons of nursing and health care history and engage related fields such as women’s, labor, technology, and economic history and race and gender studies are encouraged. Individual papers, posters, and panel presentations are featured at the conference. Additional information about AAHN and the conference can be obtained at www.aahn.org.

Guidelines for Submission: A one-page abstract of a completed study will be accepted by email. Submit two copies of your abstract; one must include the title, author’s name(s), credentials, institutional affiliation, phone/fax and email. If more than one author is listed, indicate who is serving as the contact person. Indicate whether a paper, poster, or panel presentation is sought. The second copy of the abstract should include only the title, and mode of presentation with no other identifying information.

Abstracts must include: Purpose of study, rationale and significance, description of methodology, identification of major primary and secondary sources, findings and conclusions. Each section of the abstract should be clearly identified. Abstracts will be selected on the basis of merit through blind review.

Abstract preparation: Margins must be one and one-half inches on the left, and one inch on the right, top, and bottom. Center the title in upper case, and single space the body using 12 point Times (New Roman) font. Accepted abstracts will be printed as submitted in the conference program; thus, when printed, the abstract must fit one side of one 8.5” x 11” paper.

Submission date: Abstracts must arrive on or before January 31, 2014

Submit to: Abstracts@AAHN.org

All conference presenters must be AAHN members
Thank You, Cleveland Clinic!

Hello, University of Connecticut!

In 2014, Dean Cusson and the Faculty of the UCONN School of Nursing will proudly welcome you to the 31st Annual AAHN Conference

When: September 18 (Pre-Conference) to September 21, 2014

Where: Hartford Hilton Hotel, Hartford CT

Why: To encourage scholarship and interest in the history of nursing through presentation of research and discussion of ideas.

To enjoy the company of old friends and colleagues, and to meet new ones, while promoting the history of nursing.

To hear John Harley Warner, who will deliver the Eleanor Krohn Herrmann Keynote Lecture. Dr. Warner is the Chair and Avalon Professor in the History of Medicine and Professor of American Studies and History at Yale University. We are delighted to have him.

To experience a Pre-UnConference given by ThatCamp, (The Humanities And Technology Camp). (See their site at: http://thatcamp.org/ to understand unconferences).

To see the Mark Twain House and Museum or the Harriet Beecher Stowe Center, both in Hartford, on Friday morning.

What else? Transportation to and from the Storrs campus will be provided for the events on Friday. The opening ceremonies and the Friday presentations will be in the new Widmer wing of the UCONN School of Nursing, amid museum displays and facing the newly-dedicated Eleanor Krohn Herrmann Reading Room.

Later, mingle with colleagues and relax over wine during Dean Cusson’s’ welcoming reception on the college terrace garden, overlooking over the lovely Connecticut countryside.

We (AAHN and UCONN) hope to see you there!
### 15 GREAT RESTAURANTS IN CLEVELAND

<table>
<thead>
<tr>
<th>Name</th>
<th>Cuisine</th>
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<tr>
<td>Melt Bar &amp; Grilled</td>
<td>Sandwiches / Subs</td>
<td>13463 Cedar Road</td>
<td>(216) 965-0988</td>
<td>meltbarandgrill.com</td>
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<td>Cleveland Heights, OH 44118</td>
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<tr>
<td>Momochio</td>
<td>Mexican</td>
<td>1835 Fulton Road</td>
<td>(216) 694-2122</td>
<td>momocho.com</td>
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<td>Cleveland, OH 44113</td>
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<tr>
<td>Lola</td>
<td>International</td>
<td>2058 East 4th Street</td>
<td>(216) 621-5652</td>
<td>lolabistro.com</td>
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<td>Cleveland, OH 44115</td>
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<td>L'Albatros</td>
<td>French</td>
<td>11401 Bellflower Road</td>
<td>(216) 791-7880</td>
<td>albatrosbrasserie.com</td>
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<td>Cleveland, OH 44106</td>
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<tr>
<td>Blue Point Grille</td>
<td>Modern American</td>
<td>700 West Saint Clair Avenue</td>
<td>(216) 875-7827</td>
<td>bluepointgrille.com</td>
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<tr>
<td>Pier W</td>
<td>Seafood</td>
<td>12700 Lake Avenue</td>
<td>(216) 228-2250</td>
<td>selectrestaurants.com/piet/</td>
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<td>Lakewood, OH 44107</td>
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<tr>
<td>Bac</td>
<td>Asian / Vietnamese</td>
<td>2661 West 14th Street</td>
<td>(216) 938-8960</td>
<td>bactremont.com</td>
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<tr>
<td>Greenhouse Tavern</td>
<td>Gastropub</td>
<td>2038 East 4th Street</td>
<td>(216) 443-0511</td>
<td>thegreenhousetavern.com</td>
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<td>Flying Fig</td>
<td>Modern American</td>
<td>2523 Market Avenue</td>
<td>(216) 241-4243</td>
<td>theflyingfig.com</td>
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<tr>
<td>Parallax</td>
<td>International</td>
<td>2179 West 11th Street</td>
<td>(216) 583-9999</td>
<td>parallaxtremont.com</td>
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<tr>
<td>Mama Santa's</td>
<td>Italian</td>
<td>12301 Mayfield Road</td>
<td>(216) 421-2159</td>
<td>mamasantas.com</td>
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<tr>
<td>Fire Food &amp; Drink</td>
<td>Modern American</td>
<td>13220 Shaker Square</td>
<td>(216) 921-3473</td>
<td>firefoodanddrink.com</td>
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<tr>
<td>Crop Bistro &amp; Bar</td>
<td>Modern American</td>
<td>2537 Lorain Avenue</td>
<td>(216) 696-2767</td>
<td>cropbistro.com</td>
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<tr>
<td>Dante</td>
<td>International</td>
<td>2247 Professor Avenue</td>
<td>(216) 274-1200</td>
<td>restaurantdante.us</td>
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<tr>
<td>Zanzibar Soul Fusion</td>
<td>Southern</td>
<td>13225 Shaker Square</td>
<td>(216) 752-1035</td>
<td>zanzibarohio.com</td>
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</table>
## DINING OPTIONS

**INTERCONTINENTAL CLEVELAND / CLEVELAND CLINIC CAMPUS**

<table>
<thead>
<tr>
<th>Dining Option</th>
<th>Location</th>
<th>Hours</th>
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</thead>
<tbody>
<tr>
<td><strong>North Coast Café</strong></td>
<td>Located in the InterContinental Hotel Cleveland</td>
<td>Serving Breakfast and Lunch Monday through Friday 6:30am – 2:30pm Saturday and Sunday 6:30am – 3:00pm</td>
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<tr>
<td><strong>Table 45</strong></td>
<td>Located in the InterContinental Hotel Cleveland</td>
<td>Serving Lunch and Dinner Monday through Friday 11:00am – 11:00pm Saturday and Sunday 3:00pm – 11:00pm</td>
</tr>
<tr>
<td><strong>C2</strong></td>
<td>Located in the InterContinental Suites Hotel</td>
<td>Serving Breakfast, Lunch and Dinner Restaurant Hours Daily 6:30am – 11:00pm Bar Hours Daily 11:00am – 11:00pm</td>
</tr>
<tr>
<td><strong>Au Bon Pain</strong></td>
<td>(Two Locations) Artisan Breads, Pastries, Soups, Salads, Sandwiches Located in the A Building of the Cleveland Clinic Monday through Friday 6:00am – 6:00pm</td>
<td>24 Hours a Day / 7 Days a Week</td>
</tr>
<tr>
<td><strong>International Café</strong></td>
<td>(Cleveland Clinic Cafeteria) Located in the H Building of the Cleveland Clinic</td>
<td>Monday through Friday 6:00am – 7:30pm Saturday and Sunday 6:30am – 7:00pm</td>
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<tr>
<td><strong>Subway</strong></td>
<td>Located in the H Building of the Cleveland Clinic</td>
<td>Monday through Friday 8:00am – 7:00pm Saturday &amp; Sunday 10:30am – 7:00pm</td>
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<tr>
<td><strong>Moes</strong></td>
<td>(Mexican Cuisine) Located in the H Building of the Cleveland Clinic</td>
<td>Monday through Friday 10:00am – 7:00pm</td>
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<tr>
<td><strong>Starbucks</strong></td>
<td>Located in the H Building of the Cleveland Clinic</td>
<td>Monday through Friday 5:30am – 12:30am Saturday &amp; Sunday 6:30am – 10:00pm</td>
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<tr>
<td><strong>McDonalds</strong></td>
<td>Located in the H Building of the Cleveland Clinic</td>
<td>Open Daily 5:30am – 1:30am</td>
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<tr>
<td><strong>Zen</strong></td>
<td>(Sushi) Located in the Glickman Building Lobby</td>
<td>Monday through Friday 7:00am –5:00pm</td>
</tr>
</tbody>
</table>
Thank you for your attendance!

We hope you enjoyed your stay with us.
Have a safe trip home.