President’s Message
Spring 2014

Looking Forward

If all goes according to plan you will be reading this President’s message during springtime (or fall depending in which hemisphere you are located) and the birds will be chirping and the flowers will be in bloom and one of the worst winters on record will be a distant memory. Over the past several months, I heard from members who due to weather conditions were without electricity for several days, who had snow day closures in places where it seldom snows and who received warnings from local authorities to shelter in place. Now however is the perfect time to erase all thoughts of the winter and look forward to not only better weather but also to the fantastic programs and events the AAHN has in store for the next several months.

The most exciting upcoming event is the 2014 Annual Conference the Association is co-sponsoring with the University of Connecticut’s School of Nursing which takes place September 18-21 in Storrs and Hartford, CT. The Local Arrangement Committee (LAC), under the leadership of Co-Chairs Jennifer Telford, Brigid Lusk and AAHN Program Chair John Kirchgessner, is working diligently at putting together an exceptional program. The 2014 Eleanor Krohn Herrmann Keynote Speaker is Dr. John Harley Warner of Yale University who will speak on “Bedside Stories: Clinical Narrative and the Transformation of the Hospital Chart,” a topic which resonates strongly with our membership. And there is more good news. The LAC has invited Indiana University-Purdue University Professor of English and 2014 University of Connecticut Visiting Guest Professor, Dr. Jane E. Schultz to present a Special Plenary Lecture on “Transformation of the Sickroom: War Nursing, Technology and Authority.” Dr. Schultz’s talk will complement recognition of the 150th anniversary of the American Civil War and the 100th anniversary of the beginning of World War I. Further adding to the scholastic excellence of the conference are the program paper and poster presentations. Abstract Review Chair, Jeannine Uribe and her committee received close to 60 submissions, a record number, which indicates that we can look forward to some superb scholarship. The pre-conference program, a THATCamp Workshop, promises to be innovative and topical. For those unfamiliar with THATCamp, it is an informal collaborative workshop in which participants work on projects...
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Memorial Moment
Alice Marie (Howell) Friedman
by Mary Ellen Doona

Nursing history’s devoted servant, Alice Marie (Howell) Friedman (17 February 1922-14 January 2014), died in Amherst, Massachusetts one month before her ninety-second birthday from the sequelae of a fall. A 1944 graduate of the Massachusetts General Hospital School of Nursing, Alice continued her education at Teachers College (1947) in New York City defying those who insisted on her staying at the MGH. Stronger than any nursing authority was Alice’s dream that had long before determined her path into nursing.

Her baccalaureate degree testified to achieving one of her goals as a teenager: to go to college. While at Teachers College, she cared for families at the Henry Street Settlement House and then returned to Boston to care for its families as a nurse with the Visiting Nurses Association. Thus was another goal reached:
she became a public health nurse as her Howell aunt, a graduate from the Brooklyn Methodist School of Nursing, had been. She polished that achievement with a graduate degree in Public Health Nursing from Boston University (1967). An academic career that began at Boston College, a Jesuit University in Chestnut Hill, Massachusetts; and continued at the University of Massachusetts at Amherst where after eighteen years she retired as an emeritus.

The arc of Alice’s professional life had its roots in her childhood. She was born in Fort Eustace, Virginia, the only daughter of two children born to Army careerist Albert Howell and Mary Burquist, a native of Belgium. Watching her father move up the ranks in the United States Army from enlistee to colonel may well have set a pattern for Alice to follow in her own professional development. Moving with her family from base to base-Fort Eustace, Virginia, Fort Taunton, in Queens, Fort Hancock, Sandy Hook, NJ, and the Panama Canal Zone in Central America-anticipated Alice’s practice as a public health nurse. Moving into new neighborhoods, meeting new people and assessing their needs all the while depending on her professional competence would be more deliberately done when caring for families, but it was not all that different from skills Alice was learning as a child.

Alice was no stranger to travel that expanded her own horizons. During a year as an honorary research associate in the multidisciplinary Centre for Research in the Social Sciences at the University of Kent at Canterbury she enlarged her perspective on the delivery of health care and analyzed educational systems for health professionals. At that time she met with educators in universities at Edinburgh, Manchester and Wales. Knowing that such travel broadened her perspective on community health nursing she encouraged her students to venture beyond their own comfort zones. She created the exchange program at UMASS/Amherst with the nursing program at the University of Wales in Cardiff. This opportunity paved the way for other experiences in Ireland, Jamaica, Puerto Rico and Ghana.

Alice seized opportunities even when there seemed to be no time. At the 1994 American Association for the History of Nursing annual meeting in Chicago, for example, Alice passed up lunch following the morning session to race to the Art Institute of Chicago where for an hour she viewed exhibits and then raced back for the afternoon sessions. This trick of managing time played a large part in Alice’s ability to blend in her life as a professional woman with her roles as wife to her beloved Harvey who predeceased her, and mother to Joel, Suzanne, and Elizabeth. As she was such a master at managing time, she able to fulfill her commitment to professional organizations, serving as vice-president of the MNA 1964-67, chair of its Economic and General Welfare Committee and member of the Board of Directors of its western district. Serving on the local Board of Health and Amherst’s Health Planning Committee was a labor of love. And, serving as secretary to the MGHSON Alumni Association suggests that Alice had forgiven her alma mater that once had tried to jettison her nursing education.

If community health nursing was Alice’s center, nursing’s long and often troubled journey to full professional status was her love. She was a member of the Nursing Archives Associates at Mugar Memorial Library at Boston University and served as its president in 1985. She also held membership in the American Association for the History of Nursing, the Society for Nursing History and the National Oral History Association. Answering the clarion call of Stella Goostray and Mary Ann Garrigan to preserve nursing history, Alice did an oral history of Mary A. Mahler, the founding Dean of nursing programs at Boston College and UMASS/Amherst. Before long, Alice herself became the subject of an oral history which was completed by Mary Ellen Doona and is archived at the Burns Library at Boston College. Already gracing the shelves of the library is the history of the nursing program at UMASS/Amherst that Alice helped to write for its fiftieth anniversary.

At its centennial in 2003 the Massachusetts Nurses Association interviewed Alice on her pioneering efforts for collective bargaining in 1964. In that interview, Alice recalled a time when Boston nurses were earning $86 a week, the same as beauticians in the area. Medical records librarians and medical social workers in hospitals earned $106 and $107 respectively, while dieticians earned $98 and physical therapists earned $94. Only lab and x-ray technicians among those working in hospitals earned less than
which blend technology and the humanities. As growing technological resources brings our work as historians into the field of digital history, sessions like THATCamp will provide us with the tools and information to succeed in the 21st century. Please visit http://aahn2014.thatcamp.org/ to learn more about the pre-conference. And, just in case you are wondering, no, you do not have to bring a sleeping bag to THATCamp but we may entertain the thought of having a marshmallow roast!

To assist us in the planning phases of the Annual Conference, we ask for some help from you, the membership. First, we request that all members join in spreading the word about the conference. We hope of course to see a record number of attendees, but please share conference information with your colleagues, students and friends who may not be members. We invite all interested parties who have an interest in nursing and health care history to come and enjoy what are always stellar conferences and we need member assistance to advertise widely. Of course, we need members to attend the conference, and if you are coming—bring a friend or maybe two! Secondly, we ask that you start scouring your closets, offices, basements and attics for items suitable for the annual auction. Last year, our celebrity auctioneers raised an amazing $7000 for the AAHN research grant program. This allowed the Association to boost the number of 2014 grants to three. Our goal is to increase even further the number of grants awarded but to do so we need to raise sufficient funds. This requires receiving plenty of items to sell. Please begin thinking about what you can donate to the auction. Remember, one historian’s junk is another historian’s treasure, so no item is too small or too useless...
to consider. In the event that you do not have an item to donate, you can always do your part by contributing directly to the Research Endowment Fund ([http://www.resourcenter.net/Scripts/4Disapi08.dll/store/30-for-30-years-research-endowment-fund](https://www.resourcenter.net/Scripts/4Disapi08.dll/store/30-for-30-years-research-endowment-fund)). As with auction items, there is no donation too small and each donation goes a long way to insuring support for cutting edge nursing and health care historical research.

All in all, the 2014 conference is shaping up as an incredible conference with all the familiar activities everyone loves and some new and exciting fun events. Please visit the conference website for all up-to-date information ([http://www.aahn.org/conference.html](http://www.aahn.org/conference.html)) and also don’t forget to view the e-blasts announcements as they come out over the next several months.

The AAHN has also been busy on many other fronts. We continued our popular Talking History sessions with two outstanding sessions. In November, 2013, Dr. Cindy Connolly, Chair of the Research Review Panel, spoke on issues surrounding funding and grant writing. In February, 2014, AAHN Archivist Trudy Hutchinson hosted a session on all things archival. If you missed the sessions, you can listen to them via the links on our website ([http://www.resourcenter.net/images/aahn/store/recordings/2014/120514-TalkingHistory.mp3](https://www.resourcenter.net/images/aahn/store/recordings/2014/120514-TalkingHistory.mp3) and ([https://www.resourcenter.net/Scripts/4Disapi08.dll/4DCGI/members/recordings.html](http://resourcenter.net/Scripts/4Disapi08.dll/4DCGI/members/recordings.html) [past sessions]). We look forward to the next session, Nursing History Centers: What They Are and What They Are Not, which will be hosted by Dr. Arlene Keeling, Director of the University of Virginia’s Eleanor Crowder Bjoring Center for Nursing Historical Inquiry and will be held on May 8 from 12-1:30PM (EST). Arlene will speak on and entertain questions about nursing history research centers, their role in the work of historians and what they can offer AAHN members. To date, the Talking History sessions have been well attended and receive good reviews. As we plan for the future we ask you to share with us what you think about the sessions and whether we should continue them, and if so what future topics would be of interest to discuss. Or, if you have suggestions on other types of programs we should consider putting in place please let us know.

The Association is always on the search for innovative and interesting ideas that meet the needs of the membership.

In other news the Association is pleased to announce that our management company Resource Center has begun a new partnership with a larger association management company, the Kellen Company which acquired RC effective February 1, 2014. The acquisition has many positive and complementary benefits for the AAHN— a more robust infrastructure, more connections, more experience with various contractual and planning scenarios, and so forth. At a time of growth for AAHN, having access to these enhanced services will certainly help us accelerate and streamline our activities. Best of all, our key contact at RC, AAHN Executive Director Dave Stumph will still be available for us in Denver, with Dave remaining as our Executive Director and main point of contact. This transition has been smooth and productive and we look forward to working with the Kellen Company.

I also take this opportunity to remind members of various benefits available through the Association. For example, members receive reduced subscription rates to the AJN. This is a really good deal and as the longest running nursing professional journal, a subscription to the AJN carries on a strong historical tradition. Members also receive, via the AAHN website and the many e-blasts sent out, current information on happenings in the nursing and health care history community. A quick look at our website reveals two interesting publishing opportunities available to members, one a new book series, Nursing History: Narrative for the Twenty-First Century via the Johns Hopkins University Press and the second, a call for papers for a new journal Health Emergencies and Disaster Nursing which welcomes manuscripts on historical studies. As we continue to keep members informed, we ask that you send us news items on anything you
think might be of interest to the membership.

Finally, we have some promising news on the membership front. In recent years, our membership numbers have been on the decline, a problem I frequently identified as a major challenge for the Association. I am happy to report that we have experienced a welcome surge in numbers, with membership steadily increasing upward to 390 members as of the end of February. Now, of course we need to expand well beyond that number, but this represents a very welcome trend in the right direction. The Institutional Membership Plan is one method we hope will add to our membership numbers. This plan, created last year, allows history centers, schools and departments of nursing, or any agency, organization or corporation with an interest in history to join and receive membership for four representatives, reduced group pricing and discounted exhibitor space for the annual conference and recognition on the AAHN home page. To date two institutions have joined in this category, the Barbara Bates Center for the Study of the History of Nursing and the Samuel Merritt University. Please visit our home page to see how they are featured (http://www.aahn.org/) and consider telling your home institution about this great opportunity.

We view the recent increase in membership in a very promising light recognizing that we must continue to recruit members to sustain the Association. Please join me in welcoming all new members, and re-greeting renewing members. And also continue to recommend the AAHN as the must join professional association for those interested in nursing and health care history to all your friends and colleagues.

Looking forward is the title of this message and I end with some looking forward thoughts. I look forward to seeing as many members as possible at the Annual Conference and for those of you unable to come we will miss you. I look forward to a continued increase in membership numbers. As usual, I look forward to hearing any thoughts, comments and suggestions for how the AAHN may better serve the membership and grow the Association. And, I join you all in looking forward to making this the best year ever for the AAHN.

Best,

PRESIDENT’S MESSAGE — CONTINUED FROM PAGE 4

From the Editor’s Desk

It’s hard to believe that one year has passed since I started as The Bulletin editor. It has been a year of learning and great collaboration. Thanks so much to the members of the Publications Committee and to all of you, my fellow members of AAHN, who enrich this newsletter with your contributions! Please keep those articles and information coming. The deadline for submission for articles for the Fall/Post 31st Conference issue is September 15, 2014. Highlights from the conference will be a central focus of Issue 110.

Until the Conference,
31st Annual
Nursing and Health Care History Conference
September 18 – 21, 2014

Let’s all convene in Hartford, CT at the Hilton Hotel …

And at UConn School of Nursing in Storrs, CT

Photo Credits: University of Connecticut, Dr. John Warner, Chris Foard, Dr. Sandra Lewenson
to hear Dr. John H. Warner, Eleanor Krohn Herrmann Keynote Speaker

address Bedside Stories: Clinical Narrative and the Transformation of the Hospital Patient Chart

This talk explores the remaking of the hospital case record in the United States over a long 19th century, how we can explain it, and more broadly what we stand to gain by thinking about the practice of writing as a clinical practice. It will first trace how during the final third of the 19th century the production of clinical narrative was fundamentally transfigured. An activity that served many ends—institutional, clinical, pedagogic, and legal—the clinical practice of writing was also a kind of performance that was important in fostering careers and expressing and establishing professional identities. The talk will reconsider how experimental laboratory science first entered and altered practice at the bedside, reshaping clinical representation and, through it, clinical cognition. Changes in the ways American clinicians represented patients and their illnesses were constitutive of a larger transformation in the ways they conceptualized the sick and themselves that had profound and remarkably durable social, epistemological, and moral implications. The talk will then turn to the first two decades of the 20th century, when the formal changes of the late 1800s were fixed in place, partly through the continent-wide program to use newly standardized hospital cases as a catalyst for the wider standardization of medical practice, institutions, and practitioners. It will close by cautioning against the impulse to script the making of the modern case, its animus, and its meaning into any too-simple story about the embrace of a reductionist aesthetic, and will draw attention to new relationships between patient charts and clinicians’ identities that emerged early in the 20th century.

Also Dr. Jane Schultz will present a Special Plenary Lecture
Transformations of the Sickroom: War Nursing, Technology and Authority

This talk will discuss how the 19th-century professionalization of nursing was jump-started by a deeply ingrained contradiction: that women proved useful to the state in times of war, bringing their experience in private sickrooms to the politically charged public space of war zones. Culturally coded as givers and sustainers of life, women who served as war nurses became oddly complicit in the taking of lives, helping the ill and wounded recover so that they might again face enemy fire, or easing their mortal passage.

“Transformations of the Sickroom” will explore how war nursing evolved in an ethical crucible, where caregiving and war making initially were strange bedfellows. In time, as women’s military-medical work was supported by government and publicly celebrated, nurses not only succeeded in carrying the domestic priorities of the sickroom into what were essentially male-identified spaces, but they also became catalysts for evolving definitions of womanhood. As images of all classes of women entering civic life saturated 19th-century media, the representation of nurses went far to resolve the contradiction between maternal prescriptions and work for the state. Whether we look at this evolution as positive or negative—as progress, in having done away with a variety of gendered restrictions, or as cooptation in making nurses (now male and female) complicit in waging war—I’d like to examine both sides of this question, taking care to consider how technology and what I refer to as the “scientification” of nursing raised the profile of the profession without the need to surrender its historic associations with home nurture.

Beginning with the 1850s war in Crimea and working up through the 20th century, I hope to show how women’s influence on sickroom etiquette changed military-medical relations and nursing’s professional aspirations alike.

Watch the AAHN website for registration information as it becomes available.
Thanks to M. Brian Bixby, who sent this link highlighting Edith Cavell, the first nurse martyred in World War I. Terry Arthur places a wreath at her grave. http://www.victorianweb.org/sculpture/frampton/28.html

Welcome New Members!

Helps us welcome the newest members of AAHN, who have joined since the end of the 2013 Annual Conferenece:

Katharine Adelstein
Patricia Beach
Francie Bernier
Celeste Ann Bethon
Rhonda Blender
Barbara Bonini
Caroline Burgess
Cassondra Burks
Carolyn Castelli
Jessica Clark
Brandy Clarke
Tiffany Collier
Elizabeth Croson
Joan Edelstein
Tamara Fischer-White
Cheri Gajewski
Joseph Goode
Christine Gowing
Lisa-Marie Griffiths
Pamella Hosang
Bruce Evan Koch
Mary Dahl Maher
Nadine Marchi
Bennie Marshall
Jill McFadden
Hannah Metheny
Kimberlee Miller-Wenning
Bethany Myers
Karen Nolte
Phillip Noriega
Tracy Ortelli
Eunice Park-Clinton
Kumiko Sato
Teresa Savage
Nancy Savignac
Kylie Smith
Erin Spinney
Marilyn Stoner
Maria Tackett
Carrie Thomas
Elizabeth Vane
Geraldine Varrassi
Gregory Washington
Lea Williams
Gina Wilmering
Chou Chuan Chiang Yao

Photo: Jacqueline Banerjee, 2009
Member News

Congratulations to Chris Foard MSN, RN, who sends: “I am honored to have items from my personal Civil War nursing collection on display at the National Gallery of Art in Washington DC. “Tell It with Pride: The 54th Massachusetts Regiment and Augustus Saint-Gaudens’ Shaw Memorial” will be at the National Gallery until January 20, 2014.

The exhibit will then travel to the Massachusetts Historical Society in Boston and be available to the public from February 21–May 23, 2014. I have included the website below and a photo of me at the opening reception. The exhibit has received rave reviews and I hope you will be able to include this in the next bulletin so members will have the opportunity to visit this extraordinary exhibition. “

http://www.nga.gov/content/ngaweb/exhibitions/2013/shaw.html

chris_foard@bayhealth.org or ectrn@aol.com

Congratulations to Gertrude B. Hutchinson upon receiving the: Julia O Wells Memorial Scholarship (sponsored by Albany Memorial Hosp, SON & Russell Sage College); Susan J. Fraley Memorial Scholarship (sponsored by Northeastern NYONE&L); and the Margaret McClure Scholarship (sponsored by the NYONE&L). Trudy is currently pursuing a DNS in Leadership & Education through the Sage Colleges of Albany.

On May 20, 2014, Trudy finishes her 2-year term as Vice President and starts her 2-year term as President of the Interagency Council of Information Resources for Nurses (ICIRN). She is the AAHN representative to ICIRN.

Please send along any member news for the next newsletter – Fall/Post-Conference edition – by September 15, 2014 if not before!
World War I is considered the most brutal and devastating of all wars. The new modern artillery created extensive and disfiguring injuries never before seen. Compounded by the Spanish influenza epidemic, it was a war of gas weaponry, frostbite, shellshock, and trench-related diseases. It was also the first war that allowed women to officially serve in the United States Army. Approximately 25,000 nurses served in World War I. These nurses who were faced with appalling conditions, placed their own lives at risk and made countless sacrifices at a time when they had neither commission nor the right to vote. Although the contributions they made are seldom recognized by historians, their first-hand accounts are still alive in the wartime writings some of them left behind. One such nurse was Sarah Sand Stevenson.

In April, 1917 Sarah was Director of Nurses at the Bismarck Evangelical Hospital in North Dakota. Within twenty days after America declared war on Germany she volunteered her services and joined Base Hospital #60. During the war, many base hospitals were established at civilian hospital throughout the United States. Each unit was comprised of all the necessary staff and equipment to maintain a hospital in the war zone and could be ready to leave on short notice. They were financed and under the jurisdiction of the American Red Cross and were taken over by the government once they were mobilized. While waiting for Base Hospital #60 to be mobilized Sarah received numerous inoculations, put her affairs in order, and was given classes on emergency methods and procedures. She remained Director until April 29, 1918 when she received orders to report to Camp Jackson, South Carolina for basic training. It was then she took the oath of allegiance to the United States and officially became a member of the U.S. Army Nurse Corps.

The living quarters for the nurses at Camp Jackson were substandard. From the early part of May until mid-September, Sarah worked on various wards at the encampment caring for high volumes of seriously ill members of the military. At one point she was responsible for 285 patients with only the assistance of corpsmen who had no education and could barely read. Sarah’s only complaint while at Camp Jackson was how the nurses were publically humiliated for unintentional violations of Army regulations.

Lamp for a Soldier—the Story of a WW I Nurse
Joy Shiller RN, BSN, MSN, CAPA

CONTINUED ON NEXT PAGE
On September 11, the chief nurse notified all the nurses of Base Hospital #60 to be ready to leave camp immediately for New York. After their arrival they were assigned to a hotel, fitted for uniforms, fingerprinted, had photos taken and obtained identification tags. On September 27, they were told to report to Judson Church where they attended a simple military service and received communion. The following morning they lined up in Hoboken New Jersey and embarked onto the USS Leviathan.

Crossing the Atlantic in wartime was dangerous. The Leviathan sailed with convoys consisting of two submarine chasers. The accommodations for the nurses were deplorable. Sarah wrote about the nightmarish conditions and chaos she witnessed during a Spanish Influenza epidemic onboard the ship. When she contracted the disease and began hemorrhaging from her nose, ears, and throat, she knew her life was in danger. By the time the Leviathan arrived in France on October 7, 65 passengers had died.

After they disembarked the nurses were transported to their barracks in Camp Kerihou where they were humanely treated. Many were still ill and had to travel by ambulance. Three days after their arrival the chief nurse requested that they attend a gas mask drill and lectures on safety precautions. The following morning they were transported to Brest.

Several nurses were still so weak they had to help each other dress. While waiting for the transport truck Sarah spotted several large boxes removing corpses. A captain came over to her and said, “Keep your face to the front young woman or you will be no good.” It was at this point Sarah resolved that she would concentrate on those who were still alive and not dwell on those past help. “Keep your face to the front” became her motto which gave her courage and strength.

The truck brought the nurses to the railroad platform in Brest where they were assigned 3rd class passenger coaches. They were so overcrowded they could not straighten their limbs for 5 days while traveling across France. The windows on the train were broken. It was cold and they had no blankets. Since there was no water on the train they stopped only once each day to fill their canteens, wash
their faces and brush their teeth. The only decent and warm meal they had was provided by the Red Cross near Paris.

When the nurses arrived at Bazoilles Sur Meuse they were transported by truck to camp. Base Hospital # 60 had been opened for 6 weeks and nurses from a neighboring base hospital had provided care to the wounded until they arrived. That evening they were welcomed by the chief of the surgical staff and the commanding officer and advised of the pressing need for their services.

By the next morning Sarah was in charge of a surgical ward of fifty seriously wounded men inside the barracks and fifty less serious in an adjoining tent with only one nurse and 2 corpsmen to help her. On most days there was also a constant stream of wounded hobbling into the dressing room at the end of the ward where she irrigated wounds and applied dressings. The wound care she provided, which averaged 200 men per week, was in addition to the needs of her 100 other patients who required care and medications. The Red Cross trains continually brought new patients and she would have to move existing patients on short notice further down the line to make room for the more acutely ill and wounded. Sarah wrote about the frustration she felt when she had to transfer patients before they were ready and never knowing what happened to them.

In the later part of November she was put on night duty and assigned to a pneumonia ward. This assignment depressed her. She dreaded making rounds because she witnessed so many encounters with death. Her heart went out to a stretcher bearer who collapsed with pneumonia while carrying a wounded soldier and was brought to her ward. In his delirium, before he died, he thought she was his mother. Sarah spoke of the stoicism and her devotion to the seriously ill and wounded soldiers who had such a will to survive. She called them “her boys.” Whenever they were able they gladly and willingly assisted her with non-nursing tasks. She wrote about the time when thirteen wounded German POW’s were brought into her ward. Other than serving the American soldiers their meals first she treated the prisoners the same. When she observed the American soldiers cutting buttons off the German’s coats for souvenirs she made them stop. Sarah also developed a special relationship with the chaplains. She commented on their kindness and how they came whenever they were called...
both day and night to address her patients’ spiritual needs. When Armistice Day came on November 11, 1919 Sarah’s first thoughts were about going home. But by Christmas she was still working on the pneumonia ward. The nurses tried to forget their own heartaches and longings for home by trying to make “their boys” happy. They planned the holiday in great detail and used every spare moment off duty and their own money in preparation. When Christmas came they surprised them with individual baskets containing cigarettes, cigars, fruit and homemade candles. They also prepared dinner with all the extras and decorated the wards. Sarah was excited because on this one day she would be wearing a white uniform instead of the Army issued grey. Her big disappointment came when she was forced to wear her old muddy shoes since the two new ones she was issued were for the same foot!

After Christmas the demands on the nurses eased off. She was allowed time off and was able to visit some of the local tourist sites. In January she was placed on night duty in an infectious ward comprised of desperately ill patients with syphilis, diphtheria, scarlet fever, mumps and typhoid fever. All the corpsmen and nurses were required to wear gowns and masks and wash their hands in special basins. The weather was extremely cold, the supply of coal for the stove was scarce and changing gowns was a challenge while trying to keep warm. She was pleased that there were no incidents of cross infection and that all her patients except one survived. Throughout her stay in France Sarah never complained about the living conditions for the nurses, although, she did comment that it took courage and a strong constitution. She never had a warm bath or shower nor slept in a bed. Meals were served in mess halls and often consisted of only beans and black coffee. That winter was particularly cold. When water fell on the floor in the hospital it would freeze and they would glide across the frozen floors. Although they had stoves in the nurses’ quarters the windows were loose. Because of the weather, the nurses frequently had to put on clothing that was still not dried. The only fear that Sarah ever expressed was during the air raids when all the lights had to be shut off. One night she stood outside her barracks shivering until 2AM, observing a German plane overhead, and not knowing what was would happen to her.

On Feb 20, for the first time since entering the Army, she and fifteen other nurses went on a 14 day vacation. She commented how after witnessing so much suffering, desolation and sadness she craved just to be normal again. She traveled first class, paid her own expenses, and went to Paris on the first comfortable train since her arrival in France. Sarah and the other nurses stayed in a beautiful hotel, and were thrilled with having a warm bath and a real bed with a comforter for the first time in four months. They visited the tourist sites, bought souvenirs and trinkets and mailed cards to people back home.

Conditions at the hospital were now much improved and Sarah felt more content. Her patients were receiving more individualized care and better nutrition. She did her usual work until April 7 when she was given orders to transfer all the patients to other hospitals. She was thrilled. The officers at Base Hospital #60 gave the nurses a huge banquet and a dance complete with an enormous cake with a figure of Florence Nightingale. Each nurse was given a place card with their Golden Service stripe to be put on the cuff on their left sleeve. They were proud – not only of service stripe but of the kindness of the officers. Sarah stated, “For all their gruff and abrupt ways, we realized they had mighty kind hearts within.”

Before returning to the U.S. the nurses had to be properly inspected by General Pershing. The nurses from Bazoilles Sur Meuse formed in 2 lines in front of the corpsmen of Base Hospital #60. The General personally came over to the nurses and inspected them first. He told them how he would always appreciate their efforts in caring for the wounded.

After the wards were emptied and everything was packed the nurses tried to amuse themselves with moving picture shows at the YMCA, and dances and teas at the Red Cross huts. At this point, Sarah and the nurses found this monotonous and just wanted to go home. They departed on April 10, 1919 and again arrived at Camp Kerihou which was last remembered for disease and death. Now it was a place of joy and comfort. They were cared for extremely well and entertained with many celebrations.

On June 10 each nurse said farewell to France and stepped onto the USS Kaiserin Auguste Victoria for the nine day voyage back to the United States. On this voyage no one was ill. The staterooms were comfortable and there was plenty of food, entertainment and merrymaking. When Sarah saw the Statue of Liberty her eyes tears filled her eyes. As
they proceeded to the gangplank at Hoboken, New Jersey people were shouting to welcome them home. The mayor of New York also sent a welcoming committee. They took a ferry to New York where they were taken by ambulance to Poly-Clinic where they were issued slips of physical inspection. They were then transported to a hotel and free to visit the tourist sites and shop in New York. Sarah was back in the U.S. at last! Although she was elated about her safe return, she concluded her manuscript describing the painful emotions she felt about her comrades—emotions she would, no doubt, carry with her for the rest of her life. Sarah wrote:

The WW I nurse could never entirely escape from the thoughts of their wounded and dying comrades who had started out so bravely……… We had stood by their bedside in their misery and suffering and in spite of our best effort, we had seen the light fade from their eyes and bodies stiffen with death. We had marched with the men in the cemeteries in France where we had bowed our heads in prayer. Other thousands of soldiers were coming home wounded, with broken, handicapped bodies. Some were diseased, others injured with slow and deadly gases that would destroy their lungs and still others with shell shocked minds. Will these comrades ever again know happiness or must one spend their remaining days of their lives on some hospital bed cot, suffering for the devotion of their country? The French said the war is finished. Will the war ever be finished for our disabled comrades?

Sarah was awarded the Citadel of Verdun and Victory Medals and was discharged from the US Army Nurse Corps in July 1919. Following her discharge she accepted a position with the Red Cross as an instructor. In 1922 and again in 1923 she elected president of the North Dakota State Nurses Association. In 1923 she returned to her former position as Director of Nurses at Bismarck Hospital where she served until her marriage to George Stevenson in 1926. During this time she was appointed to the state and local committees of the Red Cross Nursing Service. Sarah died in January 1975 with her mind still intact at the age of 90. Among her possessions her family found two trunks of carefully preserved nursing memorabilia and a typed manuscript. They donated the manuscript and contents of the trunks to the North Dakota State Nurses’ Association who published her manuscript in 1976.

References


“Talking History” Forum – May 8, 2014

Have you ever visited a nursing history research center? Have you ever wondered what is involved with bringing a nursing research center to fruition? Do you wonder what goes on at a nursing research center? To get answers to these questions and more, join us at the next “Talking History” Forum on May 8, 2014, 12N-1:30PM (EST) hosted by Dr. Arlene Keeling, who as the Director of the UVA’s Eleanor Crowder Bjoring Center for Nursing Historical Inquiry is intimately acquainted with what it takes to start and operate such a center. Please bring your questions and comments to this informative session. For further information please visit http://www.aahn.org/index.html#TalkingHistory.
The AAHN Board of Directors enjoying a great dinner in preparation for a long and productive Spring meeting. (lt. side: Sandra Lewenson, Annemarie McAllister, Jean Whelan, John Kirchgessner, (center: Barbara Lee Maling) (rt. side: Rusty Lusk, Brigid Lusk, Jennifer Telford, Mary Tarbox, David Stumph)