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Photographs / Images: Evelyn Lindgren Carlson in her US Cadet Nurse Corps uniform 1945; Graduation Program, Immanuel Hospital School of Nursing, February 20, 1948; US Cadet Nurse Corps brochure excerpts; Charlotte Burgess; Dr C W M Poynter; St Catherine’s Hospital nurses’ home unit, Omaha; Bishop Clarkson Memorial Hospital nursing school, Omaha; Army hospital brochure
NEBRASKA NURSING EDUCATION DURING WORLD WAR II

By Michele L. Fagan

"These are troubled times, fearful times, yet it is an exciting and exhilarating period," the president of the Nebraska State Nurses' Association told other members after the United States entered World War II. These words must have struck home for administrators of Nebraska's nursing schools as federal involvement in nursing education grew in response to the wartime crisis.

Even before December 1941 national nursing organizations, government agencies, and the public feared that the United States faced a critical shortage of registered nurses (RNs) to cover the rapidly growing civilian and military health care needs. Shortly before the war many schools started expanding anyway as more people, aided by the development of health insurance, public health programs, and social security benefits, began to enter hospitals for care instead of being treated at home. In response to this need Congress in July 1941 passed the Labor-Federal Security Appropriation Act of 1942 to fund nursing education and bring inactive registered nurses back to work. The U.S. Public Health Service administered this act, working with individual schools to attract new nursing students.

When the legislation did not produce the hoped for numbers, Congress passed the Nurses' Training Act of 1943 (Bolton Act) that called for a nation-wide uniformed corps of nursing students based in schools meeting the program's standards. Learning from the problems that arose during attempts to rapidly enlarge the student nurse population under the Labor-Federal Security Appropriation Act, the originators of the Bolton Act sought to streamline and centralize the recruitment efforts by working closely with state boards of nursing. The U.S. Cadet Nurse Corps produced enough students to cover civilian needs without disrupting the schools. Omaha and Lincoln schools of nursing exemplify the increasing federal participation in nursing education that was another aspect of the wartime government's efforts to draw more women into the workforce.

Congress made its first appropriation to fund nursing education in July 1941, five months before the Japanese attack on Pearl Harbor. The Labor-Federal Security Appropriation Act of 1942 made $1.2 million available to increase nursing school enrollments, to provide refresher courses for inactive graduates, and to support postgraduate education in special fields. Federal funds enabled school administrators to offer individual scholarships for enrollment costs and subsistence to qualified but financially strapped students. Other clauses of the act provided for hiring more instructors, adding certain types of facilities, and affiliating with other schools or groups for specialized training. The act did not subsidize the construction of new buildings, although its provisions could be stretched to include "securing additional dormitories."

The federal funding delighted many nursing leaders because the government appropriation implicitly recognized the profession's importance. However, the act's requirements worried some educators who feared that the proposed shorter or accelerated curriculum would turn out many half-educated nurses and jeopardize hard-won professional gains.

Only a few years earlier during the Depression hospitals began to employ RNs on the wards and nursing students spent more time in the classroom. Before that hospitals had depended almost entirely on nursing students for patient care. Hospitals, in fact, traditionally had established nursing schools to provide cheap labor while the graduate nurses usually entered the private duty field. The wartime demands for more students and a shorter training period seemed to be forcing hospitals and schools to return to the recent past when students did most of the nursing. The president of the Nebraska State Nurses' Association alluded to this concern when she wrote to the director of the state's Bureau of Education and Registration for Nurses requesting that each school increase the size and number of its classes to meet the emergency without "sacrificing the quality of its educational program."

Some Nebraska nursing educators supported the accelerated class schedule or at least complied willingly. Eugene McAuliffe, the vice-president of Bishop Clarkson Memorial Hospital (Omaha), strongly disapproved of the shorter training period and interference from the federal government, but he concluded that the change was probably inevitable since the Univer-

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Although the federal government pressed for a thirty-month course, most state boards of nursing, including Nebraska's, required thirty-six months of schooling. In January 1942 Charlotte Burgess, director of the University of Nebraska School of Nursing, told Thomas Parran, U.S. Surgeon General, that "the Lieutenant Governor has informed us that unless our present law is amended the three-year program must be adhered to. The Legislative Committee of the Nebraska State Nursing Association will present to the state Legislature, in the near future, either a recommendation for shortening the three-year program for the duration, or if necessary, an amendment of our present law." Eventually the need to accelerate obliged nursing schools to restructure their curriculum.

The administrators of the Omaha and Lincoln schools who applied for federal funds under the Labor-Federal Security Appropriation Act had to implement a rapid expansion before they could receive money. This caused many headaches as they tried under wartime conditions to attract and house students, hire more staff, build new facilities, meet federal deadlines, and fill out federal forms.

Nursing school directors had to increase class size over the 1940-41 enrollment, which the U.S. Public Health Service used as a base figure for eligibility for federal funding. As the director of the St. Elizabeth Hospital School of Nursing in Lincoln discovered, class numbers needed to increase before the school could apply for any aid except individual scholarships. Because of the federal deadlines, schools projected their budgets before the student count was definite, but if it was less than originally estimated, the Public Health Service reduced that school's allotment. Etta Lubberts of Nebraska Methodist Hospital in Omaha had originally expected fifteen students in February 1943, but only ten actually attended. "Last minute changes, alterations of family plans, all affect prospective students."

Expansion in 1940 had hurt Lincoln General. A new addition to the hospital that year caused the school to accept one of its largest classes to care for the increased number of patients. The Public Health Service used this extraordinarily high figure as the base for its calculations and expected Lincoln General to keep increasing. The University of Nebraska School of Nursing faced a similar situation. Charlotte Burgess, director of nursing, understood that since the September 1942 class was only one person larger than the September 1941 class, she could offer only one student financial aid. Unfortunately three students in this class had recently withdrawn to "return to the business field as they are unable to meet the expenses of their nursing education."

Prospective students learned that they might be able to get financial help, but this led to some confusion. As Burgess said, "Students are hearing about it, of course, from so many sources, and they seem to think, they have been given to understand that anyone who wants help may apply for it." In fact the University of Nebraska School of Nursing had so many inquiries that Burgess realized she had requested too little financial aid in her earlier budget projections. With youthful confidence and an incomplete understanding about registration procedures, many applicants had written to recruitment committee members as radio broadcasts suggested. The girls thought that the letters they received acknowledging their inquiry assured them of aid and a place in some school.
Some resigned from jobs before they had even applied and been accepted by a nursing school. Many who were awarded scholarships were grateful. Burgess wrote on behalf of eight students who received aid, “These students are most appreciative, I can assure you. They asked me if they should write to you individually to express their thanks and to let you know how much this assistance is meaning to them. They would like you to know that this help is making it possible for them to continue their nursing work.” The students did not seem to connect the financial aid with a shortage of nurses.

Even with financial help some students were not able to continue because family obligations often took precedence over education for daughters. Burgess tried to get a scholarship for Eileen Weiss, a member of the September 1942 class, because financial difficulties at home were forcing her to quit school. The director, taking time for individual student cases as many of the administrators seemed to do, suggested that Weiss return home and “find what the real situation is. I am very reluctant to lose her, and she is quite as reluctant to give up her work.” Burgess was able to get the student a scholarship, and Weiss returned to school. After a short time, however, “she was obliged to return home because of the serious illness of her father. She will not be returning to the school at present.”

At the beginning of the war Lincoln and Omaha schools followed their unaggressive peacetime recruiting procedures. St. Elizabeth administrators had one of the most active programs, routinely sending copies of the school bulletin to high school vocational directors and giving some pre-nursing courses. Most schools simply waited for inquiries. Both Nebraska Methodist and Creighton St. Joseph’s sent bulletins to prospective students. Lincoln General took a more individual approach. The staff made “a conscientious effort to take time to describe in detail when inquiries were made.”

When the nursing demand became critical in 1942, Clarkson students originated their school’s most successful recruiting measures. The nursing students themselves went back to their high schools to speak about their experiences. Acting at the state level, the Nebraska State Nurses’ Association and State Nursing Council for War Service persuaded Governor Dwight Griswold to declare the first two weeks of May 1943 as Nurse Recruitment Weeks. Judith Whitaker then toured the state, giving talks and showing the film, RN—Serving All Mankind, to more than fifty groups.

Early in 1943 Nebraska Methodist administrators saw that they were having trouble getting students, as did the
大学的住房问题。虽然美国公共卫生署要求增加住院学生数和更换医院的病房，但国家对医院的住房援助并未覆盖足够的空间。八月，圣约瑟夫医院的院长米歇尔·昂吉的院长，表达了她对一些政府资金为医院提供新设施和在防御区小范围内的住房问题的关心。她想知道该医院的住房情况。圣约瑟夫医院于1942年5月获得批准进行现有建筑的改造工作。26

林肯总医院的护士长表示，她在1942年7月报告说，医院的护士长必须搬进护士宿舍。因为医院在学生中人数增加，教育和护理人员短缺。在美国卷入战争后，对护士的需求不断增加，虽然医院的注册护士和专业护士人数在增加，但很难找到合格的护士来替代。32 再次，医院的教育和护理人员短缺问题被提到，管理机构被要求增加学生人数。33 《美国护士教育》
tors on the staff who have been teaching have left or are leaving.” Director of Nursing Hazel Hinds spent much more of her own time on the wards to cover staff losses. This frustration undoubtedly caused her to remind Lucile Petry, her former instructor at the University of Minnesota in 1940, that “you emphasized the education of students before getting hospital work done.”

Provisions of the Labor-Federal Security Appropriation Act included salaries for new staff, but no one at the federal or state level knew where to find more teachers.

The necessity of coordinating federal deadlines and class schedules, sometimes on short notice, hampered the school’s funding. The University of Nebraska College of Medicine school calendar and the U.S. Public Health Service plan would not mesh, obliging the University of Nebraska School of Nursing to follow the medical school. The previous February Burgess understood that her school would not be eligible for federal funding unless the beginning of class was postponed until June. Since the medical college would not offer necessary courses to accommodate summer nursing classes, the nursing school had to proceed with a February class, losing a chance to apply for federal funds. Dean C. W. M. Poynter of the University of Nebraska College of Medicine frankly doubted if the school could qualify for any of the money in 1943 because the forms had been returned to Washington late.

The federal deadlines and time schedules also lost students for some schools. Sister M. Livina of St. Joseph’s School of Nursing, struggling to produce a larger class, notified the Public Health Service in June 1942 that if her school began classes earlier to squeeze in three classes a year, several promising applicants who were working during the summer for tuition money could not attend St. Joseph’s. These young women would not be financially able to begin school sooner, delaying or perhaps forfeiting their chance to enter nursing school, and leaving St. Joseph’s with a smaller than anticipated class.

Hazel Hinds, Lincoln General, tried to help two students who had dropped out of school for financial reasons. But by the time she had received permission from Washington to offer the young women scholarships, they had already “secured positions and do not wish to give them up.”

Being dependent on yearly congressional appropriations and new legislation also obliged directors to give uncertain answers to students about scholarships. In February 1943 Burgess reported to Washington that the University of Nebraska was getting requests for scholarships for the coming September, but she had to inform students “that whether or not the Government will provide this assistance will depend upon legislation. If it is possible to give them more assurances than this, I shall appreciate your advice in the matter.” Burgess knew that new legislation was being debated in Congress which eventually did establish the Cadet Nurse Corps, but none of the nursing school directors had yet learned what the requirements for the new program would be.

Bookkeeping for the federal funds presented small but persistent problems for nursing school administrators. Since nursing schools had traditionally been part of hospitals, administrators found these new responsibilities confusing. Before World War II hospital administrators did not do basic accounting and “most hospitals did not know the cost of running a training school.”

St. Catherine’s administrators, for example, had to rework the budget to meet federal guidelines. Application Form 100 confused Dean Poynter of the University of Nebraska. He wrote to the U.S. Public Health Service for clarification “as to how the blanks should be filled out in a number of questions,” because the Medical College and the School of Nursing shared the same cost-accounting system and the salaries of the director and assistant director came from both the hospital and the school.

Charlotte Burgess, Courtesy of UN Medical Center.
woman from Ohio, sponsored the 1943 Nurse Training Act to remedy quickly the difficulties of recruiting young women for the nursing profession. While still based in individual schools the Cadet Nurse Corps was a centralized, nationwide recruiting drive specifically designed to attract interest and fill civilian hospitals with student nurses. At the state level under the Bolton Act, the U.S. Public Health Service officials now worked with the nursing boards rather than with the individual schools.

This concentrated effort to attract students has been called one of the “greatest recruitment[s] of nursing students in history.”45 It was certainly one of the most widely advertised with information and photos appearing in national magazines, radio programs, movie shorts, posters, and department store window displays. Many nurses found the Madison Avenue approach distasteful, but promoters countered the complaints by arguing that the stiff competition from other areas for potential students made drastic measures necessary.46

Before Congress appropriated the money for the corps, congressional committee members heard from a number of interested parties, perhaps the most convincing being hospital administrators who painted a desperate scene in the civilian hospitals. After a few months of training it was argued, three student nurses would be able to replace two graduate nurses for many hospital activities and free the graduates for other posts.47

Army officials, perhaps believing that the Cadet Nurse Corps would train future Army Nurse Corps (ANC) officers, supported the program during its embryo stages, but by 1944 despite the military-sounding name and uniform, the corps remained a civilian measure. Later when battle casualties rose and military nurses seemed in short supply an Omaha reporter questioned whether “someone slipped when the Cadet Corps was established as a civilian rather than a military agency.”48

Participation in the Cadet Nurse Corps program benefited both schools and students. In addition to the uniformed corps of student nurses the Bolton Act of July 1, 1943, provided for postgraduate training grants to RNs. Schools shortened the coursework period from thirty-six to thirty months, and students spent six months more as

Dr. C. W. M. Poynter. Courtesy of UN Medical Center.
for the duration of the war.” However, the pledge each took was not a legally binding contract, but only a statement of good intentions. The Labor-Federal Security Act had only offered financial help to those in need. The Cadet Corps provided the same type of support to anyone who joined.

Another program, the National Defense Housing Act of 1940 or Lanham Act, now allowed schools to get funds to expand residences and add additional facilities. The U.S. Public Health Service officials convinced the Federal Works Agency to use funds provided in this older law for construction of student housing.

Members of the corps moved through different levels during their education. The first nine months constituted the pre-cadet period. During this time a student received one winter and two summer uniforms and a monthly allowance of $15. Then she became a Junior Cadet with $20 per month. After twenty-one months in the program members became Senior Cadets with the option of working in another hospital. Senior Cadets who spent six months in federal service received a monthly allowance of $60; those who went to civilian hospitals generally got $30.

Inside the hospitals students wore the traditional school uniform although federal subsidies paid for it. The outdoor uniform, designed by Molly Parnis and also covered by federal funds, was “worn with pride, but obtained with difficulty.” Wartime cloth shortages prevented some of the cadets from getting their uniforms from J. C. Penney as quickly as they would have liked.

The outdoor wear was chosen for its attractiveness and appeal. The winter uniform included a gray flannel skirt, jacket with silver buttons, beret with the Public Health Service insignia, gray flannel reefer coat, raincoat, blouse, and handbag. The summer uniform consisted of a gray and white striped dress and gray felt hat with red band.

The striking uniform and the publicity helped bring young women into the corps and eventually into nursing.

On the national level the Public Health Service made great efforts to recruit minorities into the program. The possibility of African-American applicants did not seem to concern Nebraska school directors, possibly because the state’s total black population was small, but they did have questions about responding to inquiries from young Japanese-American women.

When Lulu Wolf, professor of nursing education at Vanderbilt University, spoke at a two-day conference in Lincoln about the plans of the National Nursing Council for War Service to shorten training programs, several directors asked the consultant about admitting Japanese-Americans. She took a pessimistic view, pointing out “the responsibility that any school would assume in admitting one of these students. There would always be mistrust in the minds of the patients as well as the doctors and nurses.” These students also would be under FBI surveillance. She advised against it.

However, a few months after the Bolton Act passed, the National Japanese-American Student Relocation Council, headquartered in Philadelphia, asked state boards, including Nebraska’s, about which schools had the corps program. The National Nursing Council for War Service offered its assistance to the Relocation Council but was “greatly concerned that they [Japanese-American students] be admitted to good schools of nursing . . . Japanese-American students will be handicapped at best in securing employment, but it would be a great pity if in addition they were to be
graduated from schools which did not give them an adequate preparation." It is not known if any Japanese-Americans did apply to the Nebraska schools.39

To encourage esprit de corps and attract publicity the Public Health Service made the induction ceremonies as memorable as possible. The first pledging during which the cadets took their oath became a national media event with radio linking many inductions across the country at the same time. On May 13, 1944, celebrities gathered in Constitution Hall, Washington, D.C., with 750 cadets from the area for a ceremony that was broadcast throughout the country. In Omaha 500 cadets came to Joslyn Concert Hall to hear the broadcast and take the oath administered over the radio by Dr. Thomas Parran, Surgeon General of the U.S. Public Health Service. Eleanor Roosevelt, U.S. Representative Frances Bolton, and actress Helen Hays spoke in Washington while the cadets in Omaha listened. A number of high school girls interested in nursing education attended the Omaha ceremony as guests.56

That same day, May 13, 100 nursing students gathered in St. Paul's Methodist Church, Lincoln. After an introduction by Hazel Hinds, the director of nursing at Lincoln General Hospital and former chair of the Red Cross Nurses Recruitment Committee, Chief Justice Robert G. Simmons administered the induction oath. The Northeast High School Girls' Glee Club sang. At 3:30 P.M. the whole audience listened to the national broadcast over Radio WOW.57

The nation-wide induction became a tradition for the Cadet Corps and the second one aired over the radio in May 1945. In Joslyn Hall, Omaha, 283 students gathered to take their pledge on May 10 as "one of a series of nationwide ceremonies conducted simultaneously." A sixty-member Cadet Corps chorus formed part of the entertainment, and Major P. D. Widiner from Camp Carson, Colorado, spoke. He had previously been a public relations officer for General Patton's Third Army.58

Publicity also helped the corps keep in touch with its scattered members. Nebraska Methodist's Probe, for example, informed students, most of whom belonged to the corps, of news about the assignments of the school's Senior Cadets. Hospital newsletters where the Senior Cadets were stationed often carried news of their doings. The "Cadet Chatter" column of Cornhusker Veteran, the Lincoln VA Hospital's in-house publication, reported on the graduation of one of the cadets — "her last day as one of us."59

Individual schools submitted their own publications to the Cadet Nurse Corps News, the nationwide newsletter which often reprinted articles from the local ones. It praised the Probe, describing it as "literally stuffed with items of interest .... This paper is designed to keep students 'in the know' in all matters pertaining to nursing, their school, their city and their nation." The national corps made great efforts to make individuals feel that they were part of the organization and contributing to the war effort.60

In Nebraska the Office of the State Director of Nursing Education benefited as much as the students and the schools from the federal program. Since the office had been established its staff had pressed the Nebraska schools to standardize curriculum. The passage of the Bolton Act strengthened the director's ability to do this. When Lucille Petry, the newly appointed director of the corps, explained about the program to Blanche Graves, the state director, she stated that the Public Health Service administrators envisioned the state boards as the "clearing houses" through which the corps could reach individual hospitals. The board played a pivotal role in the Cadet Corps program, helping the schools establish their new accelerated programs, keep essential teaching staff, recruit students, and assign the Senior Cadets for their six months. These duties brought Nebraska's board into contact with other boards and nursing schools throughout the country.61

Joining the Cadet Corps offered the student potential travel to other parts of the country during the Senior Cadet experience. Some seniors preferred to do their last six months at their home schools, but a number of Nebraska students went to army or navy general hospitals in Springfield, Missouri; Denver; or San Diego. The majority stayed closer to home. Blanche Graves, Director of Education and Registration for Nurses who oversaw the placements, had slots in the Indian Service at Winnebago, the Veterans Administration Hospital in Lincoln, and the Omaha Visiting Nurses Association. Senior Cadets could do psychiatric work, for example, at St. Vincent's Hospital in St. Louis or in Omaha's Lutheran Hospital.62

A number of out-of-state hospitals able to accept Senior Cadets contacted Graves about their programs. The Nebraska Board of Nurses Examiners liked the one offered by the North Permanente Foundation in Vancouver, Washington. Graves sent the director of nursing a list of Nebraska schools with the cadet program, suggesting that she contact them.63 The Wisconsin State Sanitarium in State Fair informed Graves about that hospital's affiliation in tuberculosis nursing, stating that the approved course "follows very closely the course set up for student attaches, except that [Senior Cadets] are expected to carry more responsibilities."64

Recruitment for the Cadet Corps ceased in August 1945, but students registered for the program and in school by October 15 continued until they completed their education, including the Senior Cadet experience, in 1948. Hospitals throughout the country continued to seek their services. Johns Hopkins Hospital sent information in July 1945 and Kansas City General Hospital offered experiences in surgery in 1946, although the director warned that the cadets would find the
same post war difficulties with limited housing facilities that they would anywhere.65

Several federal government agencies that ran hospitals tried to attract the Senior Cadets including the Bureau of Indian Affairs (BIA) and the Veterans Administration (VA). In 1945 the VA had a large number of Senior Cadets from all over the country coming to their nation-wide facilities, so many that students encountered crowded living conditions. However, because RNs were in very short supply, "the service of these Senior Cadet Nurses are urgently needed at this time."66 After the war the VA oversaw the most Senior Cadets of any agency and benefited. When the Cadet Corps program began to be phased out, the VA's Nursing Service studied the possibility of maintaining the teaching program begun in the agency's hospitals to accommodate the Senior Cadets and affiliating with individual schools.67

The Bureau of Indian Affairs requested that members of the Nebraska Bureau of Education and Registration for Nurses visit the hospital at the Winnebago reservation to approve it for Senior Cadet experience. The inspectors reported that the Winnebago facility would offer a very fine introduction to Public Health Nursing and its problems. It will also give a knowledge of the cultural and social patterns of a racial group that should be of great value to the Senior Cadet Nurse in her future contacts with peoples of different races.68

In October 1944, Sally Jeffries of the BIA pointed out that only a few Nebraska students seemed interested in Senior Cadet work at the agency. Because the Winnebago hospital had limited facilities, she wanted Graves to approve other reservation hospitals in Arizona, Oklahoma, and South Dakota for Nebraska cadets. Graves responded that the Senior Cadets had "so many things to choose from that it seems to be somewhat difficult for them to make a decision."69

Understandably, the Senior Cadets had an impact on Omaha and Lincoln as well. In 1944 an Omaha newspaper reporter tracked the first batch of Senior Cadets "going out to their assignments all over the city this week." The reporter spotlighted Dorothy Johnson of Nebraska Methodist who was assigned to the North Side Baby Clinic, a Visiting Nurses Association facility.70

Although the wartime emergency pushed most Nebraska schools into growth and overcrowding, the federal funding available through the Landman Act eventually allowed them to build. St. Catherine's received $87,000 to begin construction in 1944 on an addition to its nurses' home that the Omaha World-Herald called the second of its kind and the largest to date. Immanuel Hospital in Omaha had also applied for construction money. By May 1945 the St. Catherine's addition and one at Bishop Clarkson Hospital were nearly ready.71

Clarkson's Eugene McAuliffe had realized in 1943 that the school needed more space, but he was "personally opposed to the further entrance of government control." So in September 1943, the hospital began its own fund-raising campaign. When this did not garner the necessary money, McAuliffe was obliged to apply for a federal grant. The only way to grow was to accept Washington's presence in local affairs. Looking back, a historian of Saint Elizabeth's thought that the Cadet Corps program signaled the beginning of the hospital's aggressive maintenance and renovation program. Many other schools probably had similar experiences.72

The need to attract and hold students forced nursing schools to give the young women who enrolled more independence than had previously been allowed. Most nursing schools of the era took their protective role very seriously and sought to shelter the students. A 1936 graduate of the University of Nebraska School of Nursing remembered that students then had to get special permission before joining off-campus organizations. Although the wartime pressures did not totally reverse administrators' positions, there were some changes. Clarkson and other schools tolerated smoking in the residences and allowed married students to enter their programs. Lincoln General listed a smoking room as well as other recreational features like ping pong and billiards. Lulu Wolf, the consultant from Vanderbilt University, responded to questions about discipline by suggesting that "if the students were given more freedom in carrying on their own student government there would be a more wholesome attitude about in the hospital and in the nurses' home." Later the Cadet Corps program re-emphasized student independence for Senior Cadets who received their six months in the army general hospitals of FitzSimmons, O'Reilly and Schick, in the Seventh Service Command. They would "live in army nurses quarters at the hospital and will organize their own student cooperative government."73

Leaders of Nebraska nursing not only loosened some restrictions for students, the nurses revised some of their own ideas. The very successful recruitment tactics of the Cadet Corps program showed Nebraska women that advertising did attract students. Lucile Petry, who headed the Cadet Corps program, recalled that working with public relations people was "a novel experience for a nurse at that time." Other nursing administrators initially considered publicity undignified and demeaning. Margaret Strawser prefaced her remarks to the Nebraska State Historical Society on the need for more nurses in 1943 with an apology that "now I am going to do something which I rather dislike doing." Soon after the war, however, Blanche Graves pointed out the postwar need for nurses since many women were not reentering the civilian profession when they returned from military service. Nebraska again wanted more nursing students. Graves and the bureau joined
wholeheartedly in the nationwide program that relied on many of the same techniques successfully used by the Cadet Corps, such as cards placed in buses, films, newspaper publicity, and speakers.74

The federal programs retarded but did not change one trend. Philosophical differences that nursing educators had with the provisions of the Labor-Federal Security Appropriation Act and the Nurse Training Act about accelerated curriculum and student labor had been set aside during the wartime emergency. After the war, however, leaders in the profession reversed the emphasis of the federal programs designed to provide hospital staffing by moving the students out of the hospital wards and into the classrooms more than ever before.75

The increasing federal participation in nursing education during the war had major consequences for the profession in Nebraska. The experiences Nebraska nursing schools had with federal funding programs including the Cadet Nurse Corps undoubtedly paralleled those of institutions throughout the United States.

The Cadet Nurse Corps program may have strengthened Nebraska's board. Lucile Petry described it as a clearinghouse, and once the Cadet Nurse program was in place the Public Health Service encouraged the board to coordinate the schools in the state. The program also allowed Graves to communicate with other schools' boards throughout the country.

The nursing profession became very visible, and its significant contribution to health care, both military and civilian, was implicit in public discussions of shortages of RNs. The wartime need for more nurses prompted Elbert Thomas, senator from Utah, to propose a five-year program to assist nursing education in 1949. But the newly established National Organization of Hospital Schools members, fearing regulation by the U.S. Public Health Service, fought the measure until the bill bogged down and disappeared in a congressional committee. Nothing more was heard of federal aid to the nursing profession until 1956 when the Federal Nurse Traineeship Program offered financial assistance to RNs studying full time for administrative or teaching positions. The next significant piece of legislation grew out of the recommendations by the Special Consultive Group on Nursing to the Surgeon General of the U.S. Public Health Service. The resultant 1964 Nurse Training Act provided scholarships and low cost loans for nursing students.76

Finally the federal financial aid gave many young women an otherwise impossible chance to further their education. What they thought about being part of a nation-wide drive to recruit women for an essential part of the work force during wartime remains locked in their individual memories.

NOTES
2 Federal Security Agency, U.S. Public Health Service, The United States Cadet Nurse Corps and Other Federal Nurse Training Programs (Washington, D.C.: Government Printing Office, 1930), 2, 4, 214; Florence A. Blanchfield, Army Nurse Corps in World War II, technical preparation by Mary W. Standlee, typescript, University of Texas Libraries, Austin, Texas, 104. "By 1940 the national nursing organizations were making efforts to meet the requirements of an expanding defense nursing program to encourage an increasing number of entering students in nursing schools."
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Nursing Education

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