
'The Hands That Might Save Them': Gender, Race and the Politics of Nursing in the United States during the Second World War

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In March 1945 Janet Geister, a well-known nursing leader, responded in the 'Plain Talk' column of the *Trained Nurse and Hospital Review* to ongoing discussions about nursing shortages in the United States military. Geister's final comment in the column exposed a persistent conflict that had long plagued civilian and military nursing and nursing care and which the necessities of war exacerbated. 'I've often wondered, as I read that "men are dying for want of nursing care"', she wrote, 'if these men would cavil over the colour or texture of the hands that might save them'.¹ With this question, Geister raised the most important issue shaping twentieth-century nursing: who was qualified to be a nurse and why? The exclusion of non-white women and men of all races from professional nursing had, since the end of the nineteenth century, shaped the question of professional qualifications. By the middle of the Second World War, nursing shortages forced the military, the professional nursing establishment and the public to recognise and debate this situation.

In 1945, after an almost fifteen-year-long campaign, African American female nurses, with the support of the National Association of Colored Graduate Nurses (NACGN), won their struggle to desegregate the United States Army Nurse Corps (ANC). That fight had gained momentum in the late 1930s, and by the beginning of the Second World War, it had become part of a larger movement to end all discrimination against African Americans in the United States. To label this victory as a civil rights success, however, is to acknowledge only one part of the story. The desegregation of the ANC, which had begun in mid-1944 was also, and perhaps more importantly, the story of how gendered ideologies about nursing in both the military and civilian society ultimately overrode reservations about race. While black female nurses were successful in breaking down racial barriers, white male nurses were thwarted in their bid to eliminate gender discrimination. This is an important but unrecognised aspect of the wartime struggle among white male and African American female nurses to challenge their exclusion from the ANC. It reveals a little discussed episode in the temporary shift of gender roles during the war and is even more intriguing because the recruitment of nurses was a priority for military officials during the Second World War.

In her path-breaking article, 'African American Women and the Metalanguage of Race', Evelyn Brooks Higginbotham persuasively argued that race has functioned historically as a 'metalanguage', shaping notions of gender and sexuality and even overriding social perceptions of biological sex.² Through an examination of nineteenth-century court cases involving racial discrimination, Higginbotham challenged the primacy of gender in shaping the destinies of African American women and showed how racial thinking altered perceptions of womanhood before and after the Civil War. The different circumstances of African American female and white male nurses during the Second World War demonstrates how under certain historical conditions, ideas about gender could be used to overcome racial discrimination in breaking down systems of occupational segregation in some cases, but also to maintain them in others.

More than any other moment in United States history, the Second World War revealed an underlying social division of labour that challenged the workforce needs of wartime mobilisation. Pre-war job segregation by race and sex produced a hierarchy within the labour market that defined the jobs available to the American worker. This 'typing' of jobs – based on sex and race – guided employers in their employment practices and was fundamental to institutionalising both social and economic inequality.³ Challenging these practices and countering traditional assumptions that defined work as 'men's' or 'women's', 'white' or 'non-white' was extremely difficult. Wartime labour shortages, however, created an opening.

That the dislocations of war, especially the Second World War, provided a mechanism to effect social change is hardly a new claim. Scholars have long viewed the period from 1941 to 1945 as a moment to examine changes in cultural values that defined sex role behaviours and race relations. Many historians have found that the Second World War provided both the catalyst for long-term changes in the status of American women and the opportunity to strengthen civil rights activism because of the war's promise of democracy and equality for all.⁴ William Chafe's *The American Women* and Mary Dudziak's *Cold War Civil Rights* are two classic examples of these arguments. These studies provide a very good foundation to explore the push for race and gender equity and equality; however, they also reveal one glaring disadvantage. These and other studies have often explored race and gender ideologies in isolation from each other.

Recently, scholarship has begun to examine how ideas about race and gender intersected to support and/or hinder opportunities for social and economic equality. Susan Hirsch's *After the Strike*, for example, argues that 'employers have always considered race and gender simultaneously when they define the criteria for hiring'.⁵ Even when the federal government banned the overt use of race discrimination in the defence industry during the Second World War, race and gender remained 'the basis for inequitable policies in the workplace'.⁶ For women, gender equity became the definitive arena in the struggle for economic equality as their entrance into male-defined workspaces was constructed as temporary. But some women – African American and white – had a narrow view of gender equity that accepted the exclusion of men from occupations typed as 'female', even as they argued against the exclusion of women from so-called 'male' occupations. African American female nurses' attempts to end race discrimination in the armed forces Nurse Corps for example, stressed nursing as a female occupation, rejecting the notion that race determined ability to nurse. As the war progressed, public discourse on the social division of labour expanded. The

debates over the employment of women workers in occupations that had been defined as 'male' grew to include the employment of male workers in 'female' occupations, most specifically in the field of nursing.

The puzzle that male nurses presented in the debates about alleviating nursing shortages and wartime work is intriguing for a number of reasons.⁷ The very idea of employing male nurses challenged the notion, dominant in this period, that one's sex determined one's status as 'combatant' or 'noncombatant,' 'caregiver' or 'soldier'. Furthermore, males requesting duty as nurses often placed their masculinity in question. Even arguments that suggested that male nurses could keep women from dangerous or combat situations or be used to care for soldiers with psychological problems did not change this concern. Finally, according to the 1940 census, fewer than 150 African American male nurses claimed nursing as a profession. Challenging gender discrimination, therefore, was mainly the story of white male nurses.⁸ Most of the scholarship thus far on nursing during the war has focused primarily on the efforts by female nurses to gain professionalisation or achieve permanent recognition within the military, and the struggle by black female nurses to overcome racial barriers.⁹ However, the fate of professionally trained male nurses who sought recognition in a job gender-typed as female remains largely unknown.¹⁰

Nursing as a female obligation?

Since the Civil War, ideas about gender have profoundly influenced the nursing profession and the practice and identity of care giving. Historically, it has been a profession largely connected to women and seen as an extension of women's allegedly inherent nurturing qualities and duties performed within the home. Well into the twentieth century, as Susan Reverby has observed, training and wage earning potential did not alter 'the assumption that [nursing work] was based on womanly duty requiring service to others'.¹¹ Men could and did train as nurses, but their educational and job opportunities were severely limited. There were few schools of nursing that trained men, and those that did often trained men for the few nursing jobs open to them, for example in psychiatric nursing where their physical strength was seen as an asset on the job.¹² However, even in these jobs, men competed with women. These beliefs influenced behaviours that shaped labour force patterns within the nursing profession.

As part of the Army Reorganization Act of 1901, the United States Congress authorised the founding of a permanent corps of female nurses within the US Army, under the command of the Army Medical Department (AMEDD).¹³ The ANC differed in a number of significant ways from the rest of the US Army establishment. First, only women could join the ANC according to the Act. Strong lobbying by women at the turn of the century, as well as a general acceptance by the public that nursing was a female occupation meant that there were few acceptable places for male nurses in the civilian profession and no acceptable place for men in the ANC. Women who wished to serve in the ANC had to pass a series of exams and meet a number of stringent requirements. These included a notarised statement of the applicant's health, a letter of recommendation from the superintendent of her training school that attested to her 'moral character and professional qualifications' and a mental examination.¹⁴ The evaluation of a nurse's professional training, as well as her mental and moral character, resulted in an almost uniformly white organisation that was both sex- and

race-restrictive. African American female nurses, with few exceptions, faced many of the same restrictions male nurses faced prior to the Second World War. By the end of the 1930s, both African American female nurses and white male nurses sought an end to the constraints that had governed the ANC for nearly forty years.¹⁵ Arguably, the restrictive policies against which black female and white male nurses struggled contributed to the nursing shortage that plagued the military throughout the latter half of the Second World War.¹⁶ Both male and African American female nurses saw the shortage as an opportunity to gain entry into military nursing positions.

The Army Reorganization Act of 1901 never referred to either the rank or status of nurses. This was an additional difference between the ANC and the rest of the US Army establishment. Congress and Army leadership were reluctant to assign official rank or status to women in the military even if they were nurses. The only stipulation defining the job and organisation of the ANC was that the Nurse Corps would consist of a 'superintendent, chief nurses, nurses, and reserve nurses'.¹⁷ The Surgeon General approved the appointment of nurses for a period of three years of service. From the very beginning, these distinctions caused numerous problems for the ANC, especially regarding the question of rank. Nurses held an ambiguous position within the US Army; they were members of the Army, yet without the rank or authority of a clearly defined place within the military hierarchy. This resulted in a difficult relationship between Army nurses and medical officers, especially those who 'had no wish to see women in the Army'.¹⁸ Nurses reported being ignored, assigned extra duties and, according to one nurse, 'harassed by the petty jealousies and vagaries, peculiar to the temperament of some officers and corporals'.¹⁹ They also dealt with less pay, inadequate food rations and no access to retirement pay. By the end of the First World War, it was obvious to nurses and their supporters that clearly defined status and rank with the US Army was the only way to avoid the abuse and unfair treatment experienced by the nurses since the founding of the ANC.²⁰ While still cautious about giving women full rank and official status in the US military, Congress compromised and President Wilson signed a bill that provided Army nurses with 'relative rank' or rank comparable to other Army officers in June 1920. The Secretary of War defined exactly what 'relative rank' meant for Army nurses. He decreed that Army nurses would be accorded the same respect and protection as other commissioned officers, including the right to wear the insignia of their grade and the privilege of salute, but denied Army nurses the right to command and the corresponding pay of men of the same commissioned rank.²¹ By the middle of the Second World War, nurses had achieved quite a lot in both status and treatment within the Army, but they still faced a number of challenges, including the fact that they remained unincorporated into the regular Army establishment. In reality, female nurses remained an auxiliary to the regular Army in a space that set them apart from just about every other individual serving in the US Army. This was just one of the many factors that made drafting female nurses or including male nurses in the ranks of the ANC difficult and controversial subjects.

In his annual address to Congress on 6 January 1945, President Franklin D. Roosevelt announced his support for legislation that would expand the Selective Service Act of 1940 to include, for the first time in American history, the addition of female nurses for service within the United States military.²² The 1940 Act was already sex specific in defining the defence of the nation as an obligation of men. It mandated the conscription of *all men* between the ages of twenty-one and thirty-five for military

service; once the United States entered the war, the draft expanded to include all men between the ages of eighteen and forty-five. Amending the Selective Service Act of 1940 required instituting a draft that would not only be occupationally specific, but also focus on drafting women into military service. It was the latter part of this proposal that was most controversial, as military service was not seen as an obligation of women before the Second World War. Yet, in 1942, Roosevelt had agreed to the creation of a corps of female service members known as the Women's Army Auxiliary Corps and subsequently the Women's Army Corps. In the same year, female commissioned officers began serving in the Navy as part of the Women Accepted for Volunteer Emergency Service. In 1945, Roosevelt's response to a reported deficiency of nearly 20,000 nurses was to support the Surgeon General of the Army, Norman T. Kirk's recommendation that the need for nurses come 'by a Congressional draft'.²³ Representative Andrew J. May introduced House Bill 1284, 'an act to insure adequate medical care for the armed forces', otherwise known as the Draft Nurse Bill, to Congress and later to the Committee on Military Affairs.

Roosevelt and the bill's proponents hoped that the implementation of a nurse draft would result in a quick resolution of the nurse shortage. This anticipated resolution, however, elicited more criticism of the idea of drafting women into the military than support for the nurse draft bill and highlighted a growing public debate about race and gender in the nursing profession. The call to draft female nurses also drew further public attention to discrimination against white male and non-white female nurses who wished to serve in the ANC and as nurses in civilian society. Escalating concern about care for soldiers reduced some objections to non-white women and white men providing care for wounded soldiers. However, it was non-white women, not white men, who ultimately succeeded in gaining entry to the ANC.

Conversations about drafting women, female nurses in particular, had been quietly brewing for months before Roosevelt's announcement in January 1945, especially among those who supported Selective Service for all American citizens.²⁴ In a scathing editorial in December 1944, journalist Walter Lippmann pointed out that among the real causes of the nursing shortage was the fact that 'women are not subject to the draft . . . [O]nly an aroused and informed public opinion, focused as it may be by a Congressional inquiry could break this logjam in the recruitment of women'.²⁵ Instead of blaming military policy, Lippmann laid the blame squarely on the shoulders of women. The draft was necessary, in his opinion, because American women interested in comfortable, higher-paying civilian jobs had failed in their obligation to the nation's fighting men. Lippmann's editorial, published in newspapers across the country, served as a call to arms. Caught in the frenzy of reports that suggested that soldiers were dying for want of care, some began to see drafting nurses as the most obvious means of addressing a desperate situation.²⁶ Nevertheless, drafting women into military service was a delicate subject that, with the exception of Lippmann, few had spoken of so publicly until December 1944. It was, after all, a radical idea that would necessitate refashioning military service as an obligation and responsibility of not only American men, but also American women. While the draft purportedly focused on a single group of women, some feared it would not be long before all women were subject to the draft.

Drafting female nurses was not only a sensitive subject but also a dangerous proposal, according to individuals who opposed compulsory military service for women.

Those who adamantly opposed the idea did so for a number of reasons. First, some nurses argued that drafting nurses for military service was the wrong approach as it singled out a small population of American women.²⁷ In this way, a draft would make only one occupational group of women subject to the draft. Catherine Dempsey, president of the American Association of Industrial Nurses, argued instead that it would be fairer and more sensible to institute a universal draft for all women.²⁸ Second, drafting female nurses did not address the problem of how a shortage had occurred in the first place. Instead, the proposal drew attention to the military's gender and racial bias in their refusal to employ several thousand professionally trained white male nurses available or serving in the military, most often outside of the medical department, as well as the thousands of available African American female nurses who remained barred from military service because of racial discrimination.²⁹ Indeed, proposals to draft nurses explicitly focused on drafting *white* female nurses. If the military was so desperate for nurses, why did it not allow any nurse to volunteer for service in the Nurse Corps?

Testifying before Congress as a concerned citizen, Agnes Waters took the objection to drafting female nurses a step further.³⁰ Waters, a far-right, staunch anti-communist activist, argued that drafting female nurses would not only penalise and enslave 'the most patriotic group of women in all of the world', 'it would set the precedent to draft all women and all civilians as labor slaves and destroy our Republic'.³¹ She saw in the drafting of female nurses a communistic defeat of a democracy based on human rights, a defeat that would lead the nation to a Russian-style society that failed to protect the sanctity of womanhood. While this example represents an extreme opposition to drafting female nurses, one from within the context of a far-right conservative viewpoint, it highlights the underlying tension of a concerned public. Should the military take such a drastic route, many feared the outcome would almost certainly alter gender roles and behaviours, perhaps permanently. This tension was never about whether women could or should do the job they were doing at home or in civilian life, but was concerned instead with instituting what was tantamount to mandatory military service for a group of American women when military obligation had always been defined as a masculine duty. The War Department, nursing leaders and Congress faced these conflicting dilemmas as the nursing shortage became critical in the remaining months of 1944. According to Surgeon General Kirk, the ANC needed an additional 18,000 nurses to meet the needs of wounded and returning soldiers.³² This assessment provided an additional opening for white male nurses and African American female nurses. Nevertheless, this was not the first time since the war started that either group navigated the possibilities of enlistment by challenging the gender and racial discrimination in Nurse Corps policies.

Nurse or soldier?

In late 1939 and early 1940, the American Red Cross, the staffing agency for the the armed forces nurse corps, introduced the Nursing Service Program as a way to enlist male nurses. The programme recruited male nurses into the Army medical department as 'medical technicians' or 'corpsmen' with the opportunity for advancement as non-commissioned officers after an initial four months of service. From the beginning, however, male nurses dismissed the programme. They argued that because men and women received similar training, men were 'accepted for membership in all national

nursing organizations' and men were 'eligible for registration in every state in the Union', they should receive commission in the ANC like their female colleagues.³³

The passage of the Selective Service Act of 1940 only reinforced the War Department's and Red Cross's commitment to recruiting men in the Nursing Service Program. It combined the military's need for soldiers with the medical department's need for support close to combat troops. The Red Cross informed male nurses that registering with the Nursing Service Program would ensure that their extensive experience and training placed them into positions within the medical department. This would provide them with a better chance of promotion to technical sergeant if there were vacancies and perhaps eventual qualification for Officers Candidate School. Overall, the War Department and Red Cross believed that this form of service was the best offer male nurses could hope to achieve inside the United States military.³⁴

This plan for the promotion of male nurses proved problematic for several reasons. First, while many nursing leaders believed that the Nursing Service Program was the first step to eventual acceptance of men into the ANC, not all men registered with the Red Cross. Registration with the Red Cross was voluntary, not mandatory for any person with a nursing degree, and many men were suspicious that the programme was nothing more than appeasement. In fact, in protest some men refused to register at all. In a letter to Senator Henry C. Lodge, Mitchell Blake angrily noted, 'I have been criticized . . . for not joining the Red Cross Service' but will not do so until 'those of us who wished to devote our services can do so without reservation – and without doing the work of a hospital orderly'.³⁵ Blake's terse reply reveals the general sense of disgust that many male nurses felt at the blatant disregard for their training. It was unacceptable that their sex determined that they would serve in a semi-skilled role in the medical department regardless of training. Second, while male nurses wanted guarantees of advancement and possibly officer's status, the War Department stated that promotion would occur *only if* vacancies existed in particular ranks.³⁶ This meant that registering with the Red Cross was no guarantee of better standing within the medical department of the Army or even assignments within it. Finally, because there was no guarantee of promotion for men with nursing degrees and training, in some cases men with limited training as medics received promotion before men with civilian nursing degrees. In this case, promotion was not contingent on having a nursing degree prior to joining or being drafted into the Army. In fact, the scepticism of male nurses was revealed to be well-placed: Deputy Surgeon General George Lull later disclosed in his testimony before Congress that only twenty-nine professional male nurses had received an officer's commission in the Medical Corps by early 1945.³⁷ If the War Department was so concerned with the best health care for its soldiers, why not allow men to join the ANC or, at the very least, some suggested, form a sub-branch of the Nurse Corps focused on the specialties of male nurses?³⁸ This was one of many questions male nurses posed to the Surgeon General during the war.

The War Department and Surgeon General's office often responded to these questions by centring on the impracticality of employing male nurses, an argument also used to limit African American female nurse participation. Responding to the American Nurses' Association push to revoke the law that designated the ANC as female and include males, Brigadier General Albert G. Love replied:

I regret that this office cannot concur in your opinion. It would be impracticable to employ male nurses in time of peace since such employment could complicate unnecessarily the administrative

problems. We feel that we have provided a satisfactory and dignified position for such male nurses as may be employed during the military emergency. In addition, we feel sure that the Secretary of War would not approve the legislation suggested by you.³⁹

Focusing on the 'administrative problems' involved in reversing the forty-year law mandating that only females work in the ANC, the Surgeon General's office circumvented the subject of gender discrimination in the forefront of the minds of many a male nurse.⁴⁰ Further, Love's assertion that the Secretary of War would not approve of any proposed changes to the current practices of recruiting nurses suggests a warning to those who tried to change them. To pursue such a course of action was unpatriotic, but also in opposition to the war effort. Men and women each had a role, clearly delineated by sex; front-line activities were the responsibilities of men, while support and care giving was the responsibility of women.

This perspective on gender difference in the nursing profession in the context of wartime recruitment raised uncomfortable questions about the responsibilities of male nurses in the war effort even before the bombing of Pearl Harbor in 1941. Were they nurses or soldiers? Where did male nurses serve their country best, as civilians or in the military? According to one male nurse, 'male nurses expect to assume their part of the country's defense with the rest of the men ... [but] their proper place in national defense is denied them'.⁴¹ Clearly, such a remark implied that male nurses served best by serving as military nurses. Nevertheless, this duty remained out of their grasp because nursing remained a female occupation according to military protocol. 'Male' and 'nurse' did not belong together. Overcoming this dichotomy was an ongoing struggle for male nurses, one that was not new during the Second World War. Male leaders such as LeRoy Craig and Kenneth Crummer had worked for male nurse inclusion in the ANC since the early twentieth century. In 1924, Crummer even advertised one male nurse training school as an institution that produced 'men who think straight and see straight, who are capable and ready to serve where a women, for various reasons, cannot'.⁴² The undertone in comments such as these highlights the advantages of allowing male nurses into ANC. It also underscores the fact that male nurses believed strongly that they faced unfair treatment and disregard for their experience and training because of their sex. Male nurses and others could agree that assigning eligible men to military duty outside the Nurse Corps was a poor use of the work force, but in the same vein, some argued that males should be recruited in civilian hospitals to supplement the shortage of female nurses entering military service. The National Nursing Council for War Service (NNCWS) for example, issued a statement on the distribution of nurses during the war that said, 'The number of men nurses, if assigned to military duty in the army, would be infinitesimal compared to the great need of these workers in civilian life, to help meet the shortage of women nurses'.⁴³

During the first two-and-a-half years of the war little changed for male nurses. Public discourse about nurses remained focused on the recruitment of white women, while the military all but ignored appeals from men. Male nurse advocates were baffled about what to do to change the War Department's opinion of trained male nurses. The War Department repeatedly argued that male nurses 'are not normally used by the Medical Department in times of peace' but might be used in accordance with provisions of the Selective Service Act during wartime as medical technicians and orderlies.⁴⁴ This response allowed the War Department the space to disregard much of the interest and curiosity in the use of male nurses. Even as men pointed out the unfairness of

women entering the Nurse Corps as officers when both received similar training, the Army continued to be confident that male nurses received fair treatment. Yet in spite of the American Nurses' Association's (ANA) positive position on integrating men, including a formal petition to the Surgeon General of the Army 'respectfully requesting that graduate, registered, professional male nurses . . . be given the opportunity to serve as nurses', military officials continued to oppose the integration of men.⁴⁵

Colonel Florence A. Blanchfield, chief of the ANC in 1943, argued that the Nurse Corps would not be a satisfactory place for men. 'Our standing is not as good and in some respects not as secure', she wrote to John Welch of the New York State Nurses' Association. Female nurse officers only carried a rank 'relative' to men in the regular Army, without many of the same benefits as male commissioned officers. Therefore, incorporating male nurses into the ANC would provide men with an empty title and only a temporary place in the military as compared to other male officers.⁴⁶ The underlying implication of this and other opinions on male military service was that male nurses would want the same benefits granted to men in other positions in the military. This would include the security of access to benefits to support their families, retirement and career advancement. These discussions threw into relief how men's service alongside women in an occupation gendered female, could potentially create unacceptable inequalities between men. According to Blanchfield 'No doubt men with relative rank would be more conscious of this difference in status than women are'⁴⁷ In order to avoid this uncomfortable situation, the medical department assured male nurses that by keeping them out of the Nurse Corps and assigning them to positions within the regular Army, they were only looking out for the 'best interest of registered male nurses'.⁴⁸

A long tradition of gender segregation in nursing complicated the integration of men. Interestingly, the medical department and Colonel Blanchfield's assertion that male nurses needed to be protected from unequal treatment in the ANC highlights the hypocrisy of the treatment of female military nurse officers who received only 'relative rank' or rank comparable to that of male officers, at least until June 1944. In effect, the Army denied women the full benefits and security of military service. Accepting male nurses into the ANC would require that the Army acknowledge this discrepancy, and perhaps force it to consider equal treatment for women. By focusing on the reasons that male nurses should be denied entry into the ANC, Army representatives shifted the spotlight away from gender inequality. However, this did not diminish male nurses' hopes that the need for nurses would supersede gender discrimination.

If gender ideals obstructed white men's access to the ANC, similar gender ideals worked in the opposite way to allow African American female nurses to overcome discrimination at the same time. In their case, the typing of nursing as a female occupation overrode the practice of racial discrimination. From the outset, the challenge posed by African American female nurses differed in two distinct ways from that posed by male nurses. The first was the existence of their national organising body: the National Association of Colored Graduate Nurses (NACGN). Founded in 1908, this national advocacy body focused on improving the professional lives of African American nurses throughout the country. By the late 1930s, they turned their attention to the desegregation of the armed forces Nurse Corps, particularly, the ANC. The existence of a national body meant that their campaigns were well organised and extensive. By comparison, with the exception of a 'Men Nurses' Section' created

by the ANA as a sub-committee in 1940, there was no single, national, governing body dedicated to supporting and addressing the needs of male nurses, white or non-white.⁴⁹ Instead, combating discrimination remained in the hands of a small number of individual male nurses, the Men Nurses' Section of the ANA and various state nursing associations, and their female supporters. The second difference between the two groups was African American female nurses' successful ability, especially in the latter half of the war, to use gender difference and traditional understandings about gender roles to overcome race restrictions within the ANC. Instead of combining their efforts with male nurses to end all restrictive employment policies in the ANC, African American female nurses could, and ultimately did, argue that as women they had an obligation and responsibility to provide care for those in need, especially soldiers; race should not hinder that gendered responsibility.⁵⁰

Race discrimination in the military had played a distinct role in keeping African American female nurses from fully participating early in the war effort. During the first two years of the war, the War Department made the decision to accept only a small number of African American female nurses to serve with segregated troops at segregated bases in the south and southwest. This was one of many attempts by the Army to circumscribe African American participation in the war effort. In fact, according to a report co-authored by the National Nursing Council for War Service (NNCWS) and the NACGN, only 330 black female nurses served in the Army out of an estimated 8,000 by early 1945. Interestingly, while highlighting a deficiency of nearly twenty thousand nurses and the harm done to the health and well-being of American soldiers by discriminating against African American nurses, the report made no mention of the use of male nurses to help alleviate the nursing shortages. The report argued that increasing the number of African American female nurses would 'demonstrate that as American men, regardless of race, creed, or color are fighting for democracy, American women are being given the opportunity, equally without discrimination, to care for them when ill or wounded'. It seemed that for the NNCWS and the NACGN, the nursing shortage was a problem with a solution that concerned women exclusively.⁵¹

The only comparable attempt among male nurses to publicise the use of men within the ANC came in December 1943. The Men Nurses' Section of the ANA published an article in the *American Journal of Nursing* as the NNCWS focused on ending discrimination against African American nurses. Amid information on educational levels and other general statistics about male nurses, the data collected by the Men Nurses' Section revealed that at least 320 graduate male nurses were serving with the armed forces in 1943 and another 2,000 were available for service according to census information. While 'a large proportion of the men nurses . . . [were] assigned to services where their nursing experience [could] be used', most were not; therefore, the 'nursing and medical service has lost these men nurses who could have made a valuable contribution'. Placing these statistics alongside the NNCWS's report, the failure to mention male nurses in the NNCWS report is significant for two reasons. First, the number of male nurses serving in the armed forces was just ten fewer than the number of African American female nurses serving in the Nurse Corps, and yet the council seemingly ignored the fact that recruitment and use of male nurses could help reduce the nursing shortage which they argued hindered the health of American soldiers. Second, the NNCWS's report failed to recognise that nearly fifty

per cent of the nursing shortage – based on the census numbers of African American female and white male nurses available – could disappear with the use of both these groups. Although the goal of the Men Nurses' Section article was to 'secure as much information as possible . . . [which] will be extremely useful when and if legislation is introduced', the NNCWS's failure to use this information in its report a year later or to produce a separate report on male nurses and the nursing shortage is telling. The NNCWS reproduced cultural discourses that portrayed nursing as a quintessentially female profession, even in the face of a severe nursing shortage.⁵²

According to most ANC records, though the supply of white female nurses remained constant early in the war, by the middle of 1944 their numbers had not kept up with demand.⁵³ Rapid changes in the recruitment numbers during the summer and autumn of that year did not help matters. From month to month, the number of nurses needed fluctuated by as much as 10,000, yet it was obvious to the Army that the need was increasing, with a predicted 60,000 nurses needed by the end of the summer of 1944. The Army's recruitment campaigns were not doing the job they expected if the need for nurses was so great. This was not because the public lacked the information. According to an *American Journal of Nursing* article, '78 percent of the population . . . were aware of the shortage of nurses' and was growing 'increasingly impatient with the Army's refusal to use available nurses'.⁵⁴ Rumblings in the *New York Times* noted that the Army pushed for recruitment of 1,000 nurses a month in the summer of 1944, while the Army and War Department announced a decision to increase the number of black nurses serving in the Nurse Corps. However, even this bold change did not ease the nursing shortage, nor for that matter, discrimination against the acceptance of African American female nurses. Their numbers remained under 350 well into early 1945.⁵⁵ Drastic measures and a new strategy to recruit nurses was necessary. This fact became even more poignant in December 1944, when the Surgeon General found it necessary to 'send eleven general hospitals to overseas service without nurses'; the nursing shortage had finally hit its crisis.⁵⁶ It was this predicament, coupled with worries about the ability to care for both the civilian population and fighting men, which led the Surgeon General of the Army, Norman T. Kirk and others to admit that a draft of female nurses might be necessary, even as they rejected proposals to accept men into the ANC.

Legislating gender equality?

Legislative attempts in the spring of 1944 provided male nurses some optimism in their contest over military service and nursing. Congresswomen Francis Bolton of Ohio was among a number of legislators and citizens who, in light of nursing needs for American soldiers, pressed for legislative action that would allow male nurses into the ANC. In early spring, Bolton introduced a bill to commission female Nurse Corps officers into the regular Army. Nearly a year after members of the Women's Army Corps gained full Army status as commissioned officers, members of the ANC remained under the vague designation of 'relative rank'.⁵⁷ As part of her bill, Bolton also suggested the removal of 'female' from the current law governing the ANC as a way to ensure no further discrimination against female nurses and as a way to remove the barriers to the inclusion of male nurses. Had the bill passed as Bolton first suggested it, male nurses would have gained their first real victory in their struggle for equality. It would have

been difficult after the removal of the word 'female' for either the War Department or Surgeon General to keep men out of the Nurse Corps without appearing prejudicial. The original bill was defeated, but a modified version drafted by the War Department did pass. The President signed House Resolution (HR) 4445 into law on 22 June 1944, without the removal of the word 'female' from the current Nurse Corps law. Bolton relayed her disappointment over the matter writing to a male nurse, 'I am well aware of the problems you are faced with and think the Army and Navy very unwise in their refusal to use your trained services to full capacity . . . I am particularly troubled that we have not been able to make a dent in the situation'.⁵⁸ Even in the context of severe nursing shortages, the War Department continued to reinforce the notion that nursing was a female domain.

While Congress had debated the value of providing women nurses full rank within the regular Army, Congressman Thomas Lane of Massachusetts went further than Bolton's suggestion of removing 'female' from the law governing the ANC by introducing a bill to grant commissions to male nurses. In May 1944, the bill, HR 4760 went to the Committee on Military Affairs for discussion but eventually failed. A month later, at the ANA's annual conference in Buffalo, New York, the organisation announced public encouragement for male nurses when they passed a resolution supporting commissions for male nurses in the ANC. Given the legislative discussions, the backing of the American Nurses' Association, and most especially, the growing concern about the nursing shortage, male nurses' hope for a significant change in their situation did not appear at all unrealistic.⁵⁹ A large portion of the American population was aware that the nursing shortage was growing progressively worse as the war continued.⁶⁰ Increasingly vocal about fears that American soldiers were not receiving proper care and aware from news reports that African American female nurses and male nurses were available but excluded from service, some observers demanded that the War Department look to these groups to fill the void.⁶¹

By the beginning of 1945, the arguments for allowing males into the ANC increasingly entered into public discourse as nursing shortages forced some to question the advisability of a female-only corps. Writing to Congresswoman Bolton, male nurse Robert Cincotta stated: 'While the Army is crying for more nurses, it is overlooking thousands of male RNs at its own doorstep. Can something be done about that?'⁶² The Surgeon General's office, however, remained firm in its belief that women were best suited to serve in the Nurse Corps. In response to the suggestion of accepting male nurses, Surgeon General Norman Kirk again demonstrated that gender ideologies were the key factor in the War Department's support of drafting female nurses. According to Kirk, female nurses were

appointed for a single, specific duty for which they are particularly qualified by reason of their sex . . . Army nurses of either sex must accord patients all the usual care required by duties of their profession, including a variety of intimate offices and quasi-menial services. Women of officer rank can render those duties without incongruity, while men of such rank could not.⁶³

Women officers were better qualified on the grounds of gender identity and their assumed ability to provide the menial services, such as housekeeping, emptying bedpans and general care that doctors and hospitals had expected from them for decades. In short, the nature of the work – cooking, cleaning and care giving – was gendered female and therefore only women should do nursing work. Male officer nurses would be able to

provide basic care for soldiers but would still be restricted from providing care to women and/or children. Furthermore, according to Rear Admiral W. J. C. Agnew, enlisted men in the Hospital Corps – the Navy equivalent of the Army Medical Corps – were called upon to carry out many more duties beyond those involving nursing, whereas female nurses were not. Obtaining officer's rank in the Hospital Corps meant performing duties 'almost entirely . . . of an administrative nature', therefore seldom if any nursing duties, according to Agnew.⁶⁴ In light of such knowledge, the War Department remained committed to an all-female nursing corps. Moreover, it was within this atmosphere that Kirk admitted the necessity of drafting female nurses in order to meet nursing shortfalls in late 1944 and President Roosevelt decided to support this idea in January 1945.

Roosevelt's declaration before Congress produced unpredictable results for both the president and supporters of the nurse draft. Public outcry over the possibility of drafting female nurses quickly materialised.⁶⁵ Driven by publicity about the availability of African American women and white male nurses, concerned citizens and supporters of both nurse groups went on the offensive. Talk of a draft sparked a confrontation between black nurses' leader Mabel Staupers and Surgeon General Kirk. Staupers lamented the under-utilisation of qualified African American women and asked Kirk, 'if nurses are needed so desperately, why isn't the Army using colored nurses?'⁶⁶ Staupers's well-organised supporters used the call for a nurse draft to rally and unite both black and white support for their cause by pointing out the hypocrisy of 'calling for a draft of nurses while excluding large numbers of black nurses willing to serve'.⁶⁷ Telegrams inundated the White House from groups as varied as the NAACP, the American Federation of Labor, United Church Women and the National Negro Council of Women. 'Mothers and Fathers of America: It is your sons that may never return because of inadequate nursing . . . telegraph or write to your Senators and Representatives today', urged one supporter of the campaign.⁶⁸ The Acting Secretary of the National Negro Congress wrote to the President that 'the nation-wide support which [black nurses have] received on this specific issue, we believe, indicates that our nation and the armed forces generally are ready to accept Negro nurses on a basis of full integration'.⁶⁹ The NACGN even released a statement concluding that any bill extending the Selective Service Act to women nurses 'be amended in order that the service to American soldiers be placed on the basis of need for nursing care and not on the basis of limitations because of race, creed, or national origin'.⁷⁰ Black nurses and their supporters made a strong case for the use of black nurses; however, neither the NACGN's statement nor many of the letters and telegrams supporting black nurses mention male nurses in their protest against a female draft. What could have been a shared campaign against all discrimination within the Nurse Corps remained deeply divided along gender lines.

Male nurses' efforts to gain acceptance into the Nurse Corps proved more difficult. While nursing leaders such as Katherine Densford and Congresswoman Bolton supported the idea of commissioning and using male nurses in the military, most male nurses felt generally ignored. As one male nurse pointed out, 'the male nurse is left out in the cold . . . Can one honestly say that there is a shortage of nurses in an Army which drafts male R.N.'s to work in kitchens, or fix a plane, or march in the infantry?'⁷¹ These feelings did not stop male nurses from flooding the offices of Congresswoman Bolton and others in the wake of Roosevelt's announcement with telegrams that read: 'Ten

Thousand Men Nurses Available. Nurs[e] Draft Unnecessary'.⁷² While a letter from a female superintendent of nursing read, 'In view of the serious shortage of nurses, cannot some way be found to use the *men* nurses who are now in the service . . . [T]here must be 1000–2000 of them'.⁷³ Certainly, the public was aware by early 1945 that the possibility of using male nurses would lessen the nursing shortage. Nevertheless, neither Congress nor the military did much to facilitate the acceptance of male nurses and in most cases actively worked against such a suggestion. Bolton herself recognised the durability of gender ideologies in the division of labour in nursing.

The Army Nurse Corps was created as a 'female' Corps, and there is [sic] very strong feelings that it would be exceedingly unfortunate to change that fundamental ruling, not because men can't nurse well and are not really desperately needed in some of the specialties, but rather because men as a whole do better with women nurses than men . . .

she wrote to male nurse Dan Wacks in 1945.⁷⁴ Regardless of their training, education or experience, the acceptance of male nurses, even with nursing shortages, clashed with traditional understandings of nursing as a female duty.

Testimony before the Military Affairs Committee reveals that the possibility of using male nurses was not far from the minds of those in attendance. Throughout January and February 1945, military officials and nursing leaders faced questions about the current and future employment of male nurses as an alternative, or in addition, to drafting female nurses. Nursing leaders, including Katherine Densford, strongly supported the use and commissioning of male nurses in the ANC. Surgeon General Kirk and Deputy Surgeon General George Lull, however, maintained that the Army's preference was to continue the ANC as a 'woman's corps' and use male nurses as medical technicians or in other administrative positions within the medical department. Their rationale was that male nurses were useful in administrative and supervisory positions, especially in cases where doctors were not available to run medical wards and hospitals and where no female nurses were available.⁷⁵ In response to these discussions, the War Department decided to end to all restrictions keeping African American female nurses from joining the ANC. In March, the War Department announced that the Army Nurse Corps would accept, without regard to race, all qualified female nurses.⁷⁶ This was a major success for African American female nurses but proved just the opposite for male nurses. A month earlier, in February, the National Opinion Research Center surveyed a 'cross-section' of white adults about receiving care from a black nurse. It revealed that fifty-seven per cent of participants believed that receiving care from an African American nurse would be acceptable.⁷⁷ While the poll stressed the public's acceptance of female nurses regardless of their race, it made no mention of male nurses. In doing so, it perpetuated an important point that the nursing shortage and nurse draft highlighted. Nursing was, at least in the eyes of many, a female occupation and obligation.

Nurse draft legislation did not vanish with the Surgeon General's declaration accepting all female nurses into the Army Nurse Corps; congressional debates over the issue ensued for months. Representative Andrew J. May even managed to bring HR 2277, a revision of the original Nurse Draft Bill, before the House on 5 March 1945.⁷⁸ The revised bill defined which nurses could and could not be drafted. The draft would include only unmarried women between the ages of twenty and forty-five and registered nurses and graduates of nursing schools eligible for certification; it

exempted any nurse who was deemed essential in their current job.⁷⁹ Proponents, including some of the staunchest supporters of African American female and white male nurses, believed that in theory, the draft of female nurses was the first step to a more complete Selective Service Act that would ensure adequate military support for years to come and include all citizens. Opponents of the proposed legislation believed it to be too one-sided in its approach, because it singled out one specific occupational cross-section, populated mainly by women, for selective service.⁸⁰ Before the House of Representatives sent HR 2277 to the Senate for final approval, they amended it to include a discrimination clause that added 'sex' to the qualifications that could not obstruct a nurse from the draft. The Senate asked for clarification on a number of provisions, including the discrimination clause as it pertained to male nurses. After months of debates, the Surgeon General quietly announced to nurse leaders on 24 May 1945 that 'no further action was to be undertaken' regarding draft legislation, the Senate had 'passed over' the bill. Nearly 25,000 women volunteered in answer to President Roosevelt's announcement and appeal for nurses. The War Department avoided not only the question of the constitutionality of a female draft but also closed off the debate about the inclusion of male nurses in the Army Nurse Corps.⁸¹

Shifting understandings of race and gender relations marked the Second World War even while many Americans continued to embrace traditional values. While the exigencies of war successfully refashioned women's duties in the workforce, albeit temporarily in some cases, they could not completely alter all responsibilities and obligations gendered as male or female. The result was that while the possibility of drafting female nurses succeeded in helping to end race restrictions within the Army Nurse Corps, it also perpetuated gender discrimination against white male nurses in both the military and civilian society. For white male nurses, gender identity became the most important factor in determining who was best suited to provide care to America's fighting men. Repeatedly, when faced with questions about male nurses, the War Department chose to reiterate traditional beliefs about gender roles, even while faced with desperate nursing shortages, a fact that was underscored by Frances Bolton's recognition that the admission of male nurses to the ANC would overturn the gender norms of the profession. Nevertheless, the debates about male nurses within the ANC did not fade away. The nursing shortage persisted well into the post-war period and continued to be as problematic for the Nurse Corps as it was for civilian society. While Janet Geister's statement about whether soldiers in need of medical assistance cared about the race or sex of the nurse providing assistance was provocative, it did not change the fact that in the end, the sex of the nurse did matter. Both the military and civilian society ultimately supported the idea that nursing was the responsibility of women, not men. Gender, rather than race, proved to be the overriding determinant of who could serve, even at a time of serious need.

Notes

My deepest and heartfelt thanks to Laura Frader, Kimberly Jensen, Leslie Schwalm and Kara Dixon Vuic for all of their insightful suggestions and generous comments on various drafts of this manuscript.

1. Janet Geister, 'Plain Talk', *The Trained Nurse and Hospital Review*, March 1945, pp. 206–8, here p. 206.
2. Evelyn Brooks Higginbotham, 'African-American Women's History and the Metalanguage of Race', *Signs* 17 (1992), pp. 251–74.

3. See Ruth Milkman, *Gender at Work: The Dynamics of Job Segregation by Sex During World War II* (Champaign: University of Illinois Press, 1987); Alice Kessler-Harris, *Out to Work: A History of Wage-Earning Women in the United States* (New York: Oxford University Press, 1982).
4. There is some disagreement over the long-term impact of the Second World War on the lives of American women. Leila Rupp and Ruth Milkman argue that permanent changes did not occur and that the Second World War acted as a continuous bridge between pre-war conservative values that maintained a strict division of labour and post-war stress on traditional gender roles. William Chafe argues that the Second World War was a watershed moment for American women, although his focus remained on white, middle-class women. See William Chafe, *The American Woman: Her Changing Social, Economic, and Political Roles, 1920–1970* (New York: Oxford University Press, 1972); Leila Rupp, *Mobilizing Women for War: German and American Propaganda, 1939–1945* (Princeton: Princeton University Press, 1978); Maureen Honey, *Creating Rosie the Riveter: Class, Gender and Propaganda in World War II* (Amherst: University of Massachusetts Press, 1984); Mary Dudziak, *Cold War Civil Rights: Race and the Image of American Democracy* (Princeton and Oxford: Princeton University Press, 2000); Milkman, *Gender at Work*.
5. Hirsch's examination of the labour struggles at the Pullman Company over the course of a century reveals how work opportunities at the company and workers' struggles against discriminatory practices were stymied. Susan Hirsch, *After the Strike: A Century of Labor Struggle at Pullman* (Champaign: University of Illinois Press, 2003), p. 210.
6. Hirsch, *After the Strike*, p. 163.
7. Although Berube and Meyer's discussions about homosexuality suggest important lines of analysis for the study of men who challenged the gender-typing of jobs and offer gripping narratives about contests over sexuality in the US military, their work fails to include male nurses. Allen Berube, *Coming Out Under Fire: The History of Gay Men and Women during World War II* (Chapel Hill: University of North Carolina Press, 2010); Leisa D. Meyer, *Creating GI Jane: Sexuality and Power in the Women's Army Corps during World War II* (New York: Columbia University Press, 1998).
8. According to 1930 census records, there were only 147 African American male professional or student nurses; by 1940, this number went down to 127. American Nurses' Association, *Facts about Nursing* (Kansas City: American Nurses' Association, 1941), p. 18.
9. Darlene Clark Hine, *Black Women in White: Racial Conflict and Cooperation in the Nursing Profession 1890–1950* (Bloomington: Indiana University Press, 1989); Barbara Melosh, *The Physician's Hand: Nurses and Nursing in the Twentieth Century* (Philadelphia: Temple University Press, 1982); Susan Reverby, *Ordered to Care: The Dilemma of American Nursing* (Cambridge: Cambridge University Press, 1987).
10. According to historian Timothy Stewart-Winter, a large number of conscientious objectors were classified as I-A-O. This meant that they only objected to combat service and 'typically served as medics ... in the military'. My focus here is on graduate trained nurses, however, and for this reason I will not discuss the I-A-O. Timothy Stewart-Winter, 'Not a Soldier, Not a Slacker: Conscientious Objectors and Male Citizenship in the United States during the Second World War', *Gender and History* 19 (2007), pp. 519–42.
11. Reverby, *Ordered to Care*, p. 4.
12. Psychiatric nursing in the first half of the twentieth century was a job of neither higher status nor pay. Before 1940, many of the schools that trained men were connected to mental hospitals, and therefore the education that men received was much more limited than the broad general training women received in nursing school. Although the number of psychiatric patients increased during the Second World War and many Army officials were uncomfortable with the dangers to female nurses in these wards, the Army refused the idea of accepting male nurses. Instead, they assigned extra medical attendants to help the nurses. Mary Sarnecky, *A History of the US Army Nurse Corps* (Philadelphia: University of Pennsylvania Press, 1999), pp. 196–7, 276–7; Christine L. Williams, *Gender Differences at Work: Women and Men in Nontraditional Occupations* (Berkeley and Los Angeles: University of California Press, 1991), pp. 91–5.
13. There was also a Navy Nurse Corps (founded in 1908), not discussed in this article.
14. As an auxiliary to the Army, not part of the regular permanent Army, nurses who wished to join the Nurse Corps were ultimately appointed by the Surgeon General. Sarnecky, *A History of the US Army Nurse Corps*, pp. 29–31, 50–53.
15. 'No Male Red Cross Nurses', *American Journal of Nursing* 35 (1935), p. 388.
16. Major Edna B. Groppe, 'Statement made at the public hearing before the House Military Affairs Committee on February 14, 1945', *American Journal of Nursing* 45 (1945), pp. 175–6, here p. 175.
17. Sarnecky, *A History of the US Army Nurse Corps*, pp. 50–51, 56–7.
18. Sarnecky, *A History of the US Army Nurse Corps*, pp. 64–5.
19. Daisy D. Urch, 'Letters to the Editor #VII', *American Journal of Nursing* 20 (1919), pp. 246–8.

20. The ambiguous position of nurses often resulted in abuse and unfair treatment. This included lack of respect for their position from other medical personnel and soldiers as the more minor offences to being overworked as the more serious offences. Sarnecky, *A History of the US Army Nurse Corps*, chapters 1–3.
21. Sarnecky, *A History of the US Army Nurse Corps*, pp. 146–7.
22. The Selective Service Act of 1940 instituted the first peacetime draft in the history of the United States and called every able-bodied man to give one year of service to the nation's military.
23. Congress, House, *Message from the President of the United States 79th Congress, 1st Session, 6 January 1945, Document 1, p. 7*; Major General Norman Kirk as quoted in 'Nurses Face Draft as Casualties Rise', *The Stars and Stripes*, 7 January 1945, Army Nurse Corps Archives, Office of the Surgeon General, Falls Church, VA [hereafter ANCA], Box 79.
24. Congress, House, Committee on Military Affairs, *Procurement of Nurses hearings before the United States House Committee on Military Affairs, 79th Congress, 1st Session, 19 January 1945 and 6–9, 13–14 February 1945*.
25. Walter Lippmann, 'American Women and our Wounded Men', *Washington Post*, 19 December 1944.
26. Various newspaper articles and a vigorous print and radio campaign by the American Nurses' Association, Red Cross and National Nursing Council for War Service, fed the public's belief that the nursing shortage and the need for nurses was getting greater by the end of 1944. See American Nurses' Association Collection, Howard Gotlieb Archival Research Center at Boston University.
27. Commenting on the 'Draft Nurse Bill', a number of nurses focused on the discriminatory nature of the bill in singling out women nurses. 'Notes on the Draft Nurses Bill', *The Trained Nurse and Hospital Review*, April 1945, pp. 258–9, here p. 258.
28. 'Nurses' Draft', *The Trained Nurse and Hospital Review*, February 1945, pp. 114–15, here p. 114.
29. According to the 1940 US Census and the American Nurses' Association, there were just over 8,000 male nurses, and just over 7,000 African American nurses in the United States. This number included those practicing and students. By January 1943, about 300 men nurses self-reported serving in a branch of the armed forces. American Nurses' Association, *Facts about Nursing* (1943), p. 12; American Nurses' Association, *Facts about Nurses* (1946), p. 18.
30. Agnes Waters was a far-right activist, anti-communist and anti-liberal agitator who made a name for herself during the 1930s and 1940s as an outspoken, antagonistic member of the 'Mother's Movement'. She often testified before Congress as a staunch maternalist who believed it was her moral duty to help protect the nation from any and all who would be its downfall. For more information on Agnes Waters and other right-wing women see Glen Jeansonne, *Women of the Far-Right: The Mother's Movement and World War II* (Chicago: University of Chicago Press, 1996); June Melby Benowitz, *Days of Discontent: American Women and Right Wing Politics, 1933–1945* (DeKalb: Northern Illinois Press, 2002).
31. Congress, House, Committee on Military Affairs, *Procurement of Nurses hearings before the United States House Committee on Military Affairs, 79th Congress, 1st Session, 14 February 1945, pp. 257–62*.
32. Congress, *Procurement of Nurses hearings*, 19 January 1945, pp. 3–4 and 20.
33. About forty-seven schools of nursing admitted men by 1940. The 1940 census indicated that there were about 8,000 male nurses in the United States and according to Congressional Hearings about 2,000–3,000 were available for military service. Sandy F. Mannino to Franklin D. Roosevelt, 13 June 1940 and Nathaniel H. Wooding to Colonel G. Love, 5 July 1940, ANCA, Box 110.
34. LeRoy Craig, 'Opportunities for Male Nurses', *American Journal of Nursing* 40 (1940), pp. 666–70.
35. Mitchell Blake to Senator Henry C. Lodge, 7 December 1940, ANCA, Box 110.
36. Italics added for emphasis by the author.
37. Congress, *Procurement of Nurses hearings*, 19 January 1945 and 6–9, 13–14 February 1945.
38. According to the Surgeon General, more than 13,000 men were commissioned as 'Medical Administrative Corpsmen' after attending Officer's Training School. There is no sense however, how many of these men held civilian nursing degrees. Further, as medical administrators, these men were not practicing nursing. Congress, *Procurement of Nurses hearings*, 19 January 1945, p. 10; LeRoy Craig to Albert G. Love, 6 July 1940, ANCA, Box 110.
39. American Nurses' Association, [memorandum] 13 January 1942, 'Re status of male nurses in the Army and Navy', from 'Resumé of Action Taken by American Nurses' Association with Regard to Securing Recognition of Male Nurses Serving in the Armed Forces', 9 January 1943, ANCA, Box 110.
40. Love rarely defined what he meant by 'administrative problems' but did allude to it in a memo he typed on behalf of the Surgeon General. Here, he suggested that managing the Nurse Corps, including basic efforts like housing, would be impossible with the inclusion of male nurses. Furthermore, unlike female nurses who were appointed to one job, male service members were expected to be flexible and able to perform

- whatever duties were needed of them to support the mission of the Army. Memo located with Joseph P. D. O'Connell to President Roosevelt, [typed report] 18 December 1940, ANCA, Box 110.
41. 'Nurse or Soldier', *American Journal of Nursing* 4 (1941), p. 1449.
 42. Kenneth T. Crummer, 'A School of Nursing for Men', *American Journal of Nursing* 24 (1924), p. 458.
 43. American Nurses' Association, 'Service of Male Nurses during War', 1942, ANCA, Box 110, pp. 1–12, here pp. 1–3.
 44. 'Male Nurses', [1943], ANCA, Box 110.
 45. 'Men Nurses and the Armed Forces', *American Journal of Nursing* 43 (1943), p. 1066; American Nurses' Association, [memorandum] 13 January 1942, 'Re Status of male nurses in the Army and Navy', 9 January 1943, ANCA, Box 110.
 46. 'Male Nurses', [1943]; Col. Florence A. Blanchfield to John K. Welch, 6 August 1943, ANCA, Box 110.
 47. 'Male Nurses', [1943]; Col. Florence A. Blanchfield to John K. Welch, 6 August 1943, ANCA, Box 110.
 48. Female nurses' 'relative rank' ended only in June 1944, when the president signed a law that provided nurses with commissions in the regular Army for the duration of the war plus six months. Captain C. J. Leslie to John Livingstone, 1 April 1943, 'ref. to men joining the ANC', ANCA, Box 110.
 49. 'Nursing in Democracy', *American Journal of Nursing* 40 (1940), pp. 671–2.
 50. National Association of Colored Graduate Nurses, 'A Statement from the National Association of Colored Graduate Nurses in Relation to the Extension of the Selective Service Act to Include the Drafting of Nurses', Mabel K. Staupers Papers, Moorland-Spingarn Center, Howard University, Washington, DC, Box 96–2; Ethel Clyde, [telegram] 30 January 1945, *National Association for the Advancement of Colored People Records* (Frederick, MD: University Publications of America, 1989), Part 15, Series B, Reel #9, Frame 380.
 51. National Association for Colored Graduate Nurses and the National Nursing Council for War Service, *Facts About Negro Nurses and the War* (New York: NACGN and NNCWS Headquarters, 1945), 21 February 1945, ANCA, Box 108.
 52. Nursing census estimates suggested that there were about 8,000 male nurses practicing during the war; however, only about 2,000 of them were qualified for military service. Further, the 320 male nurses serving with the Armed Forces in 1943 worked in a variety of areas, not all of which were medical departments. 'Men nurses and the Armed Services', p. 1067.
 53. Sarnecky, *A History of the US Army Nurse Corps*, p. 271.
 54. Every few months between 1943 and 1945, procurement numbers change from 40,000 to 50,000, back to 40,000 and by late 1944, 60,000. Major Edna B. Groppe, 'Statement made at the public hearing before the House Military Affairs Committee on February 14, 1945', *American Journal of Nursing* 45 (1945), p. 175.
 55. 'Seek 8,500 More Nurses', *New York Times*, 18 July 1944; Mabel K. Staupers, 'Negro Nurses would serve', *New York Times*, 15 December 1944; 'Suggests Negro Nurses', *New York Times*, 12 January 1945; 'Would Use Negro Nurses', *New York Times*, 21 January 1945; and 'Army Lifts Ban on Negro Nurses', *PM*, 12 July 1944.
 56. Groppe, 'Statement made at the public hearing before the House Military Affairs Committee', p. 175.
 57. Sarnecky, *A History of the US Army Nurse Corps*, pp. 268–9.
 58. Frances P. Bolton to Joseph R. Guerra, 17 May 1944, and Victor Neu to Congressman Hadwen C. Fuller, 15 January 1945, Francis P. Bolton Papers, Western Reserve Historical Society [WRHS], Cleveland, OH, Folder #140.
 59. HR 4760 was superseded by HR 68 and HR 483. Victor Neu to Congressman Hadwen C. Fuller, 15 January 1945, Francis P. Bolton Papers, WRHS, Folder #140.
 60. It is almost impossible to gain a true understanding of the nature of the nursing shortage during the Second World War. Recruitment campaigns since before the beginning of the war desperately called for female nurses to join the Nurse Corps. Yet, the military continued to adjust the quantity of nurses (reducing and increasing the number) from month to month. The requests became more numerous after 1943 and most citizens understood that as the fighting increased, the need for nurses escalated exponentially. See for example, Julia Flikke, 'The Army Calls All Eligible Nurses', *American Journal of Nursing* 43 (1943), p. 25.
 61. Dozens of letters flooded into Congresswoman Frances P. Bolton's office asking that she do something to get the law banning male nurses from the Nurse Corps changed. See Frances P. Bolton Papers, WRHS, Folders #140 and 141. According to the memoir of a female nurse officer, women did not have to undergo weapons training in the Army until 1964. Clara Adams-Ender, *My Rise to the Stars: How a Sharecropper's Daughter Became an Army General* (Lake Ridge: CAPE Associates, Inc., 2001), p. 94.
 62. Robert Cincotta to Frances P. Bolton, 24 January 1945, Frances P. Bolton Papers, WRHS, Folder #140.

63. John W. Martyn (Office of the Surgeon General) to Hon. J. Hardin Peterson, 17 January 1945, ANCA, Box 110.
64. W. J. C. Agnew to Frances P. Bolton, 13 February 1945, Frances P. Bolton Papers, WRHS, Folder #140.
65. 'Army Still is Balking on Using Negro Nurses: Surgeon General Admits Drafting May Be Necessary', *PM*, 5 January 1945.
66. Hine, *Black Women in White*, pp. 178–81.
67. Even the first lady, while supportive of an 'overall draft of nurses, blasted the Jim-Crow-quota of black nurses'. 'First Lady Urges End of Ban on Negro Nurses', *Chicago Defender*, 20 January 1945; Hine, *Black Women in White*, pp. 178–81.
68. In an advertisement, Ethel Clyde asks mothers and fathers of American soldiers to telegraph their senators to demand Negro nurses be allowed into the Army before it was too late to help their sons. Ethel Clyde, [telegram] 30 January 1945, *National Association for the Advancement of Colored People Records*, Part 15, Series B, Reel 9, Frame 380.
69. Hine, *Black Women in White*, pp. 180–81.
70. National Association of Colored Graduate Nurses, 'A Statement from the National Association of Colored Graduate Nurses'.
71. Alfred Reetz to Frances Bolton, 28 January 1945, Francis P. Bolton Papers, WRHS, Cleveland, OH, Folder #140; Katherine J. Densford, 'Statement made by Katherine J. Densford before the Senate Military Affairs Committee, March 23, 1945', *American Journal of Nursing* 45 (1945), pp. 383–5, here p. 384.
72. Private James L. Ortasic to Frances P. Bolton, 19 January 1945, Francis P. Bolton Papers, WRHS, Folder #140.
73. Minnie Goodnow to Frances P. Bolton, 6 December 1944, Francis P. Bolton Papers, WRHS, Folder #140.
74. Frances P. Bolton to Dan Wacks, 17 February 1945, France P. Bolton Papers, WRHS, Folder #140.
75. Congress, *Procurement of Nurses hearings*, 19 January 1945 and 6–9, 13–14 February 1945.
76. The 20 January 1945 declaration by the Surgeon General is a little misleading as it pertained to African American nurses. Officially, the Army lifted the quotas or 'Jim Crow' ban of black nurses in early July 1944, but getting African American nurses appointed was still difficult; disheartened by continued racist treatment, many black nurses stopped trying to join the ANC. The 20 January declaration took the July 1944 end to quotas a step further, ensuring that all qualified female nurses would be accepted. Ramona Lowe, 'Army Lifts Quota Ban on Nurses', *The Chicago Defender* (15 July 1944), pp. 1, 4; Hine, *Black Women in White*, p. 181.
77. The poll focused on the nursing care provided by women, no mention was made of the use or commissioning of male nurses in the Army Nurse Corps. 'Army Opposes Anti-Bias Clause in Nurse Draft', *Chicago Defender*, 24 February 1945.
78. *Congressional Record*, 5 March 1945, p. 1729; Beatrice and Philip Kalisch, 'The Women's Draft', *Nursing Research* 22 (September–October 1973), pp. 402–13, here p. 408.
79. Edith M. Beattie, 'Nurse Draft Legislation and the ANA – A Summary', *American Journal of Nursing* 45 (1945), pp. 546–8, here p. 547.
80. 'Nurse Draft: Pro/Con', *The Trained Nurse and Hospital Review*, February 1945, p. 114–15.
81. Hine, *Black Women in White*, pp. 182–3; Sarnecky, *A History of the US Army Nurse Corps*, p. 271; Densford, 'Statement made by Katherine J. Densford before the Senate Military Affairs Committee, 23 March 1945', p. 384; and Beattie, 'Nurse Draft Legislation', pp. 547–8.