Intimate partner violence (IPV)—historically known as “domestic violence”—is a serious public health problem in the United States. According to statistics reported by the Center for Disease Control (CDC), intimate partner violence is a problem that affects millions of Americans, and is characterized by “physical, sexual, or psychological harm caused by a current or former partner or spouse.” IPV can vary in frequency and severity. It occurs on a continuum, ranging from one episode to chronic, severe battering. Moreover, IPV can have lasting harmful effects on individuals, families, and communities.1

While increasing attention is being given to the problem of IPV today, domestic violence is not new. Nor are attempts at finding solutions. At the turn of the 20th century, women involved in the Progressive movement opened Settlement Houses in major cities across the United States, attempting to address the social, economic, and health needs of the thousands of European immigrants who crowded into these industrial hubs. Two settlement houses are particularly well known. In 1889, Jane Addams and Ellen Gates Starr established Hull House on the near West Side of Chicago; in 1893 the young graduate nurse Lillian Wald organized Henry Street Settlement on the Lower East Side of Manhattan. While intended to be centers of political and social reform as well as places where the newly arrived Polish, Italian, Jewish, Irish and Russian immigrants could learn

Domestic violence is not new.
Nor are attempts at finding solutions.

English, attain job skills, and participate in educational and artistic programs, both settlement houses also served as shelters for women and children when necessary.2

In this issue UVA doctoral student Amanda St. Ivany highlights the role that Hull House played in this regard, noting how poverty stricken European immigrants from the slums of Chicago’s West Side sometimes sought refuge in Hull House from abusive, alcoholic husbands or how they turned to the Settlement for a safe haven for their children. In some cases that might have meant living in the Settlement House for a period of days to weeks; at other times, it was simply a matter of the women taking advantage of the day nursery, kindergarten, playground, or boys’ and girls’ clubs that Hull House offered. There, their children could find nutritious food, a warm place to sleep, and a safe place to play.

While much has changed over the course of a century, the problem of domestic violence has not. However, intimate partner violence is no longer a hidden social ill. Reports of violence are taking center stage in the news; people from all strata of society are addressing the issue. Today, settlement houses have disappeared, replaced by a multitude of specialty social, health, and legal services, counselors, educational, art and music programs, private clubs and summer camps. Services for IPV are now addressed in women’s shelters, like the House of Ruth in Maryland, whose history was documented recently by Friedman and Parker.3 There a nurse-run clinic is maintained on site, much like the one operated by the Henry Street Visiting Nurses at the turn of the 20th century. The clinic is emblematic of nursing history as relevant: it is a “recycled solution” to an on-going social problem.

2 For more reading on Henry Street Settlement, see: Karen Buhler-Wilkerson, No Place Like Home. (Baltimore: Johns Hopkins University Press, 2001) and Arlene Keeling, Chapter 1 in Nursing and the Privilege of Prescription, 1893–2000. (Columbus: Ohio State University Press, 2007)
3 Kathleen O. Friedman and Barbara J. Parker, That it May Be Well With You: The Founding of the House of Ruth, Maryland. (Baltimore, MD: Apprentice House, 2014)
Jaime Lapeyre, PhD, RN is 2015 Recipient of the Barbara Brodie Nursing History Fellowship

Dr. Lapeyre is a lecturer at the University of Toronto. Her research is entitled ‘Generalised Nursing: the Solution to the Difficulty of Public Health Work? The growing demand for nurses during the early 20th century led to varying admission requirements and education standards within hospital training schools. The rise of the public health field in America during the same era led nurse leaders to campaign for nursing education reform. Following World War I and the influenza pandemic in 1918, discussions with regard to training public health workers provided an opportunity to promote the preparation in public health nursing both nationally and internationally. Dr. Lapeyre’s research will analyze the influence of American public health education on the training of public health nurses in England and internationally during the 1920s and 1930s. She will also examine the barriers to the development of the public health nursing role, in particular those presented by the existence of the role of health visitors in the United Kingdom.

This work will add to the knowledge of how public health nurses in the United States and internationally were trained. It will also bring to light some of the resistance that existed with regard to the public health nursing role and the political struggles from within the nursing profession regarding the training and practice of public health nurses in Europe.

Bringing Nursing History to Life in the Undergraduate Curriculum

As part of the new University of Virginia School of Nursing undergraduate curriculum, the REAL Series (Research, Ethics, Advocacy, and Leadership) faculty introduce students to historical research and historical figures in nursing advocacy and leadership. Mary Gibson and Barb Maling received internal funding through the Lancaster funds to take REAL 1 students to the Gordonsville Exchange Hotel. The hotel was used as a hospital during the American Civil War. On February 28 the first group toured the site, viewed the collection of period medical artifacts, and gathered data for a course essay. Viewing the hospital layout, bone saws, urethral dilators, cupping implements, and battlefield medical kits provided these young students with new perspectives on the challenges of early nursing care.
Salute to Veteran Nurses

On November 11, 2014, the history center devoted its fall history forum to highlighting the contributions of the country’s military nurses. Since 1901 our Army, Navy and Air Force nurses have served with honor and courage with our troops stationed around the world during wars and in peace times.

Center Associate Director Dr. Barbara Brodie organized the program, which featured four speakers who served as military nurses. The first speakers were Dr. Leanna Crosby who as a young navy nurse was stationed on the USS Repose off the coast of Vietnam from 1965–66, and Colonel Dianne Gagliano, a retired Air Force Nurse, who served as a young flight nurse in Vietnam in the 1970s. Besides transporting wounded military personnel to distant hospitals Colonel Gagliano participated in the Prisoners of War and the famous Saigon Baby airlifts.

The second half of the program was led by current UVA graduate students Major Maria Pescatore and Major Jessica Schwinck of the US Army. They served in Afghanistan in 2010 caring for wounded troops and civilian casualties brought directly from battle sites to field hospitals.

The presenters’ accounts of the wounded and how they were cared for by the military physicians and nurses were richly illustrated by their war photos. The speakers’ poignant and dramatic stories captured not only how the wounded, suffering, and sometimes dying soldiers were cared for by the trauma teams and hospital ward nurses but they also depicted the emotional toll it took on the medical staff. One of the stories told by one presenter was about a seriously wounded army soldier she was caring for. The story was so compelling that she faltered in telling it and many in the audience were visibly moved to tears. It was a vivid reminder of the post-traumatic stress syndrome that many of our war veterans bring home with them.

Presentations, Publications & Awards


**Kirchgessner, J.** “Lincoln Across the Disciplines” (faculty panel discussion, St. John Fisher College, Rochester, N.Y. February 5, 2015).

**Maling, B.** “Nurses Responses and Care During the 1947 Bar Harbor, Maine Wildfire” (paper presented at the American Association for the History of Nursing Conference, Storrs & Hartford, Connecticut, September 19, 2014).

**Grant**


**2014 Undergraduate Nursing History Award**

The recipients of the 2014 Undergraduate Nursing History Award are Natalie Miner, Claire O’Friel, Daniel Poehailos, and Emily Ossoph for their research paper entitled Red Cross Nursing from 1910-1925: Primary Responders in American Healthcare. The award, presented in October during UVA’s Family Weekend recognizes excellence in historical research by undergraduate students.
Fall 2015 Nursing History Forums

Eleanor Crowder Bjoring Center for Nursing Historical Inquiry Events
University of Virginia
School of Nursing
McLeod Hall #5060
Noon–1:00 pm

September 29, 2015
Children of the Sun: Heliotherapy and Tuberculin Children
Barbara Brodie, PhD, RN, FAAN

October 20, 2015
‘Generalised nursing’: the solution to the difficulty of Public Health work?
Jaime Lapeyre, PhD, RN
Lecturer, University of Toronto
2015 Brodie Fellow

November 11, 2015
The Evolution of School Nursing
Panel Presentation

Barbara Brodie Nursing History Fellowship

The Eleanor Crowder Bjoring Center for Nursing Historical Inquiry Barbara Brodie Nursing History Fellowship, a postdoctoral award, is open to nurses engaged in historical scholarship that advances the field of nursing history. Applications for the $3000 award are due October 15, 2015, and the recipient will be announced in December, 2015. The selected Barbara Brodie Nursing History Fellow will present a paper from their research in the Center’s Nursing History Forum series.

Selection of the fellow will be based on the scholarly quality of the investigator’s project including the clarity of the project’s purpose, its rationale and significance, the rigor of its methodology and questions posed, and its potential contributions to the field of nursing.

The application and a curriculum vitae should be sent by email to the Center’s Director, Dr. Arlene Keeling, awk2z@virginia.edu. Applications are available on the Center’s Web site: www.nursing.virginia.edu/Research/CNHI/Fellowship.

Tour of Nightingale’s Kaiserswerth, Germany

September 12–16, 2015
Organized By: Eleanor Crowder Bjoring Center for Nursing Historical Inquiry

Plan now to join the 2015 Eleanor Crowder Bjoring Center for Nursing Historical Inquiry tour to Kaiserswerth and other historic areas in Germany including Cologne and Düsseldorf. Kaiserswerth is considered Düsseldorf’s oldest and richly traditional neighborhood.

Join nurse historian colleagues and others as we walk the cobbledstone streets of this German village beside the Rhine River and sleep comfortably in “das MutterHaus” (the Motherhouse) where we will feel the presence of nurses from years past. Kaiserswerth was the locale carefully selected by Lutheran clergyman Theodor Fliedner to train countless women from around the world as deaconess nurses beginning in 1836. Many of the original buildings remain today, including the Mutterhauskirche (Motherhouse Church), and the grounds continue to be an active hub of education. This is also where Florence Nightingale received her training. Kaiserswerth has amazing Old World design and historical artifacts. An easy five-minute walk from the Motherhouse are other historic churches such as Stadtkirche Kaiserswerth, St. Suitbertus, and the Collegiate Church of the 13th Century complete with a magnificent shrine (12th/13th century) and relics of Saint Suitbertus.

Also of interest are the ruins of the 12th-century Imperial Palace—reminiscent of a glorious and powerful past.

Through June 30, 2015, register online at www.regonline.com/09121SKEEL.
Milio Collection Website

The Nancy Milio Collection website is now live! This project represents more than three years of work by Linda Hanson, the Center’s Project Coordinator and Center Assistant Director Dr. Mary Gibson. Drs. Nancy Milio, Arlene Keeling, Pamela DeGuzman, and Pamela Kulbok made significant contributions to the website, as did the Center’s archivist, Hal Sharp.

The materials showcased on this site relate to the organization and operation of the Mom and Tots Neighborhood Center, established by Dr. Milio in southeast Detroit, Michigan in 1966. The Mom and Tots Neighborhood Center provided access to women’s health services and day care. Most important are a series of nine “field notebooks,” or diaries kept by Dr. Milio between 1965 and 1968. These notebooks comprise a near daily record of her activities while she was a public health nurse in the Kercheval and McClellan district, a low income, African-American neighborhood. The notebooks also contain her assessments of the area’s condition, as well as her meetings with key individuals in the community. Of particular significance are the insights Milio gained with regard to race relations and identity formation, both necessary to establish and administer a sustainable neighborhood-based clinic. Her experiences throughout this period led her to later write 9226 Kercheval: The Storefront That Did Not Burn, in which she addresses grass roots community collaboration.

The materials contained in the collection relative to the Mom and Tots Neighborhood Center represent Milio’s earliest professional steps in her long and distinguished career in public health policy. 9226 Kercheval was only the first of twelve books she authored. She has also contributed chapters to an abundance of scholarly monographs, published extensively in a wide range of academic journals, and has served as a research fellow and visiting professor in numerous university public health programs around the world. The collections also includes manuscript versions of other professional papers and presentations, reprints of journal articles and book chapters, news stories concerning Milio herself, photographs, and an audio cassette interview with Milio recorded in 1994, as well as a short video, featuring Nancy Milio in 2015. Please visit the site at: http://cnhi-milio.nursing.virginia.edu.

Let us know what you think. We hope that Nancy Milio’s work will inspire you and your students.
Additions to the Bjoring Center

HENRY K. SHARP, PH.D.

Last year, the international commemoration of the World War I centenary began, and events will continue through the hundredth anniversary of the Armistice, in November 2018. Here at the Bjoring Center, we are pleased to offer our own commemoration with the complete reprocessing and digitization of the papers and photographs of World War I nurse Camilla Louise Wills. A Charlottesville native and 1917 University of Virginia Hospital Training School graduate, Wills joined the overseas medical unit organized in 1918 by UVA Hospital nurses and physicians. Base Hospital 41—the military designation given the UVA unit—was in service at Saint Denis, France, on the outskirts of Paris in 1918–1919. Hospital staff trained at Fort Dix, New Jersey, and in New York City before deployment, and treated white and black American soldiers on site in France. Here the privations and tragedies of wartime emerged for these young people alongside the still-glittering urbanity of Paris and the old-world charm of France. Wills recorded these experiences in a diary and letters home, and in a collection of postcards and Kodak Brownie photographs, items which clearly evidence the esprit-de-corps gained through shared experience. “Katie” Wills’ collection offers a fascinating glimpse into this not-so-distant world, by turns ordinary and alarming.

Military nurses’ papers occupy a large component of the Bjoring Center collections, and reflect the importance of military nursing to the professionalization of the discipline. One of the most recent donations is the collection of papers, photographs, and artifacts assembled by Col. Dianne M. Gagliano, US Air Force, Retired. Col. Gagliano pursued a 28-year career with the Air Force, eighteen of these as a flight nurse. Serving in the Philippines and Vietnam as well as state-side postings, Col. Gagliano accumulated more than 2000 in-flight patient hours from both military and humanitarian missions. We will be readying her collection for researchers in the coming months, so keep an eye out for more details!

Finally, a number of smaller but no less significant collections have just been opened to researchers this winter. In the 1960s. The ground-breaking study Pinneo undertook with cardiologist Lawrence Meltzer confirmed the value of cardiovascular nursing, a crucial step in the recognition and development of specialty nursing practice. Elizabeth Bear, M.S., Ed.D. has given a variety of materials spanning her academic career in nursing, among them correspondence and a rare taped interview with nursing theorist Esther Lucille Brown; photographs and other items relative to the Penn Center on Saint Helena Island, South Carolina, an African-American training program for nurse mid-wives; and mid-wifery programs with the Frontier Nursing Service.

The tremendous value and scope of nursing, evident in these highlights, is on full view here at the Bjoring Center.
Throughout six weeks, as I went about Hull-House, I would hear a voice at the telephone repeating for the hundredth time that day, ‘No, there is no such baby’; ‘No, we never had it here’...¹

In 1916, Jane Addams, founder of Hull House, wrote these words in a letter in The Atlantic, describing the local immigrants’ belief in the Devil Baby. According to the beliefs the women held, a deformed baby lived at Hull House, the settlement house in the center of the immigrant neighborhoods in Chicago. Moreover, many other people believed this legend, and visitors would come from all across the city to catch a glimpse of this urban myth.²

While Addams denied the presence of the baby, this metaphor symbolized the loss of infants to infection, disease, trials of childbirth and the terrors of lives left behind. As Addams described in The Atlantic, the “Devil Baby” became a way for older women to talk about lost children and abusive husbands, and as a way to channel universal sorrow. Upon arriving at the Hull House often women were expecting to find a “Devil,” and instead they found safety and comfort.³

As a settlement house founded during the Progressive Era, Hull House served poor communities by offering access to a library, skills training and classes, day care, and employment resources.⁴ In addition, it also served as a safe haven for abused women and teenage girls, making it one of the first women’s shelters in the country. Ultimately, Hull House influenced nursing in Chicago through the Chicago Visiting Nurses Association and its resident physician, Dr. Emma C. Hackett.⁵

³ Jane Addams, "Devil Baby." (1916).
⁷ Ibid.
Addams argued if women did not take an active role in civic life, they were "missing the education" from participating in civic life as well as neglecting to care about the "responsibility for the cleanliness and comfort of other people."11

Settlement houses were a way for women to embrace this new role of civic engagement. Often opened in "poor and working-class neighborhoods in urban areas," these houses were an essential part of municipal housekeeping by offering services to the poor such as: meeting spaces which would eventually serve as union organizing space, childcare, English classes, healthcare services, and social spaces for women.12 As part of the settlement movement, women who lived in the Hull House were able to redefine their identities as middle class women and to create a life for themselves outside of marriage.13

Hull House would also become a place for older women to live in instead of being sent away to the poorhouse, the Cook County Infirmary. Addams was horrified at the thought of sending old women with nothing left in the world to die at the poorhouse and describes several instances of receiving these women into the Hull House. She would also pay for women residents of Cook County to take several weeks’ vacation from the poorhouse and stay at the Hull House.

I found myself perpetually distressed by the unnecessary idleness and forlornness of the old women in the Cook County Infirmary, many of whom I had known in the years when activity was still a necessity … To take away from an old woman whose life has been spent in household cares all … is to take away her last incentive to activity, almost to life itself.14

An article in Women's Journal described Hull House as a "retreat for … young women, who need rest and change, or who desire a safe refuge from the inordinate demands of society."15 Hull House had many features of a women’s shelter and of women’s space. Settlement houses provided space for relationships to form between women by acknowledging the unique qualities and strengths of female identity. In this way, Hull House provided a place for women who might not be fleeing from an abusive husband or an abusive relationship, but from what Addams viewed as abuse from society.

JANE ADDAMS

Jane Addams grew up in Cedarville, Illinois and attended the Rockford Female Seminary followed by the Women's Medical College of Pennsylvania after the death of her father.16 While at school she became friends with Ellen Gates Starr and the two traveled around Europe visiting settlement houses and dreamed of returning home and opening one of their own.

Addams’ upbringing and connections would profoundly influence her work at Hull House. Like many progressive women at the end of the 19th century, Jane Addams was not satisfied with domestic life and longed for space for women to gather and create social change.

FOUNDING OF HULL HOUSE AND NEIGHBORHOOD BACKGROUND

The Great Fire of Chicago in 1871 swept across the city and left many grand neighborhoods deserted.17 Halstead Street was a “mixed factory and tenement quarter” and became home to the increasing number of immigrants arriving from Europe or relocating to the area from other US cities to work in the booming industrial factories.18 Many of these immigrants were from central and Eastern Europe, with particularly large communities from Italy and Greece.19 In 1892 Clara Doty Bates described the Halstead Street neighborhood as one of a conglomeration of ethnicities:

East of the [Hull House] … is an Italian colony of about ten thousand persons; south are thick settlements of Germans, Poles and Russians, merging into a large Bohemian quarter; west are Canadian French, and north are Irish.20

In 1889 Addams and Starr founded the Hull House on Halstead Street, located in the middle of the immigrant slums, to allow the services to be available to those with the greatest need. Addams noted that the tenement slums were full of:

Unsanitary housing, poisonous sewage, contaminated water, infant mortality, the spread of contagion, adulterated food, impure milk, smoke laden air, ill ventilated factories, dangerous occupations, juvenile crime, unwholesome crowding, prostitution and drunkenness.21

11 Jane Addams. (1906). "Modern City."
16 Jane Addams. (1906). ‘Modern City.’
Housing in the neighborhood surrounding the Hull House quickly became over-crowded as increasing numbers of African American families arrived from the south and joined the immigrants. In the Chicago slums, small cottages, originally built for one family, would house three or more families. The edges of these residential neighborhoods were being leveled to make room for factories as the neighborhood slowly transitioned into an industrial district.

The immigrant neighborhood was full of crime, prostitution, filth, grime, and people looking for a new start in America. Jane Addams described the condition of Halstead Street when Hull House opened:

The streets are inexpressibly dirty, the number of schools inadequate, sanitary legislation unenforced, the street lighting bad, the paving miserable ... the stables foul beyond description. Hundreds of houses are unconnected with the street sewer ... many houses have no water supply save the faucet in the back yard, there are no fire escapes, the garbage and ashes are placed in wooden boxes...

Dr. Emma C. Hackett described further the unsanitary conditions surrounding the Hull House neighborhood and her attempts to bring attention from the health department.

I had a typhoid patient at 205 Aberdeen Street, just across the alley and the odor from the Vernon Park property was enough to kill a human being. Absolutely nothing was done by the health department, though frequent and written complaints were made.

Hull House was not an institution of isolation in this neighborhood. Part of the purpose and mission was to have its staff be out in the community and interacting with neighbors. In keeping with the idea of inclusion for all, male residents were allowed in the Hull House starting in 1893. Rather than being threatened by the men, the female residents used the opportunity to work in partnership to create change.

From its inception Hull House was a beacon for social justice. It was guided by three basic principles: (1) active and side-by-side participation with community residents in addressing local issues; (2) respect for the dignity of all individuals regardless of ethnic background, socioeconomic status, gender, or age; and (3) a belief that poverty and lack of opportunity breed ignorance, crime, and disease that are the result of financial desperation and not due to a flaw in moral character.

The resident visiting nurses played a significant role in this outreach. Their reputation spread far and wide, and a Minnesota newspaper reported on a day out with the visiting nurse:

So much for Hull House and its organizations; but to gain an idea of the field for these labors, one should make a tour of the immediate neighborhood with one of the visiting nurses. These nurses are from the Visiting Nurses’ Association of Chicago and have headquarters at Hull House, where they receive their telephone messages and applications for relief and attendance on the sick. They start out at 9 a.m. and at 1 p.m. each day. Miss Salter, the head nurse, kindly invited me to make the rounds with her and it was a revelation to one unaccustomed to slumming to see the conditions of abject poverty in which people can exist.

No food, no fuel, little bedding and less clothing seems to be their universal condition. An abundance of dirt and disease is found on every side, and in many cases the sufferers might die for want of care were it not for these nurses.

THE FOUNDING OF THE CHICAGO VISITING NURSES ASSOCIATION (VNA)

The year 1889 was an important one for public health in Chicago with the founding of both the Hull House and the Chicago VNA. There were twelve directors of the Chicago VNA at its inception, with Jane Addams as one of the directors. The VNA was the third of its kind in the country and services provided included “free, scientific nursing care in the homes of the sick poor.” This visiting service became increasingly essential as the population of Chicago was growing rapidly through the 1920s with a total population increase of 600,000. At the founding of the VNA the staff consisted of “one head nurse, nine nurses in charge of districts, and one who assists in the office work and helps in the districts when necessary.” The salary of a visiting nurse was “fifty dollars a month and car-fare for the first two years, and then sixty dollars.”

Each district nurse had a headquarters at a location in her district where she would receive calls from 9 a.m. to 5 p.m. and had a closet to store her things. The visiting nurse’s bag contained “beef extracts, cocoa, and tonics, surgical supplies, report-cards, towels, and anything she may need for her day’s work.” Each nurse worked independently and was able to prioritize her day according to the acuity of care needed.

[Refs: 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35]
During VNA visits, the care given called upon a wide range of nursing skills: maternity and well baby, chronic illness, surgical dressing changes, patient and family education, hygiene, basic baby care, and “baths and enemas.” Nurses were also called upon to assist in operations. Visiting nurses carried out orders from physicians and sometimes worked at their side. Quite often the care involved mother and baby and is described below:

In one case not a stitch of clothing was to be found on either mother or child, and the only bedding a mattress and an old quilt. The little one was rolled in a dirty rag, and, although only a few hours old, was already badly bitten by vermin … The nurse called first for warm water and soap. The water was procured from a neighboring house, but no soap was to be had; so she took her own from her satchel and began operations on the mother. It required but a few moments to bathe the patient and make up the bed with clean sheets and a soft quilt … [the infant] was soon washed and cuddled in the clean, soft clothing and fast asleep.  

As seen in this description and other similar stories, visiting nurses from Hull House and other districts played a vital role in public health but their influence went well beyond basic nursing care. Visiting nurses were at the front lines of municipal housekeeping and were providing the previously mentioned “cleanliness and comfort of all people.”

Several nurses worked at Hull House and in the Hull House District from 1897 to 1905. While no documentation can be found of a visiting nurse living at Hull House before 1905, in 1906 dues were increased at the Hull House to support a nurse living on site. Having a visiting nurse living on site would allow the Hull House visiting nurse to provide counseling, social work, and perhaps abuse assessment. A description of the work of the visiting nurse was described in a sociological journal:

*By nine o’clock the visiting nurse may be seen packing her bag from her supply chest with the little mercies of lint and salve and baby food. The workers whose province lies outside, who see sick children, study racial needs through manners, foods, and customs, visit the police stations in search of the astray girl or boy, or minister to some special necessity, are beginning their rounds.*

**HULL HOUSE PHYSICIAN AND NURSES: INTERDISCIPLINARY WORK**

In addition to a visiting nurse, Hull House had a resident physician. In 1905, that position was filled by Dr. Emma C. Hackett, a women’s and children’s health specialist. Dr. Hackett grew up in Dubuque, Iowa and was described as “highly educated” and having “pleasant and winsome ways,” both of which no doubt facilitated her work at Hull House.

Dr. Hackett’s involvement in both community organizations and community outreach programs provided her with an opportunity to be available as a resource for women and children who needed shelter or medical treatment. It can be assumed that in her work with these vulnerable citizens she referred women to the Hull House as a safe place for both themselves and their children.

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\(^{36}\) Ibid.  
\(^{38}\) Jane Addams. (1906). “Modern City.”  
\(^{39}\) VNA of Chicago Annual Reports. 1897. 7th Annual Report.  
\(^{40}\) Hull House Yearbook. 1906. https://archive.org/stream/hullhouseyearbook1906hull#page/16/mode/2up/search/nurse  
\(^{43}\) The Woman’s Medical Journal: Volume 11. January 1, 1901  
\(^{45}\) Chicago Daily Tribune, April 5, 1908. “Says Paregoric is a Crime.”
THE HULL HOUSE NURSERY

Some women did not use the Hull House for their own safety, but rather for the safety of their children. Some of the most vivid stories from Jane Addams’ autobiography involve single working mothers who would bring their children to the Hull House nursery and kindergarten during the day.

We early learned to know the children of hard-driven mothers who went out to work all day, sometimes leaving the little things in the casual care of a neighbor, but often locking them into tenement rooms. The first three crippled children we encountered in the neighborhood had all been injured while their mothers were at work: one had fallen out of a third-story window, another had been burned, and the third had a curved spine due to the fact that for three years he had been tied all day long to the leg of a kitchen table, only released at noon by his older brother who hastily ran in from a neighboring factory to share his lunch with him.45

Care of the children also extended to care of the mothers and families in times of crisis. One girl and her mother came to Hull House after the abusive father died. Jane Addams explained her situation:

A Bohemian whose little girl attended classes at Hull-House, in one of his periodic drunken spells had literally almost choked her to death, and later had committed suicide when in delirium tremens. His poor wife … stayed a week at Hull-House after the disaster until a new tenement could be arranged for her … 46

REFUGE AND SAFE HAVEN

During the years of social change in Chicago, young women were setting out on their own and looking for adventure. Sometimes, these girls were forced into prostitution or other forms of the sex trade, which was known at the time as “white-slave traffic.”47 Jane Addams describes these girls as “fallen girls” or girls who had “gone astray.”48

Poor, little forlorn objects, fifteen and sixteen years old, with their moral natures apparently untouched and unawakened; one of them whom the police had found in a professional house and asked us to shelter for a few days until she could be used as a witness, was clutching a battered doll which she had kept with her during her six months of an ‘evil life.’ 49

Two of these girls were described as arriving from Virginia where they were “decoyed into a disreputable house when innocently seeking lodging on the late evening of their arrival.” Even though the girls were rescued, their tarnished reputation remained and they had trouble reintegrating into society. For them, the Hull House became a stepping-stone back into society. Jane Addams described two young unwed mothers who arrived at Hull House straight from the Cook County Hospital maternity wards with babies in their arms because they were afraid of going home and “being licked.”50

The following description of Hull House from a sociological journal at the time illustrates how Hull House was perceived in the neighborhood. During a period of time when abuse was not mentioned or discussed in society, there are several pieces of evidence pointing to Hull House as a place for women to escape their abusive husbands and lovers, making it one of the first women’s shelters.

Hull House itself is not unlike a rock of permanence, about which the tide of population flows and shifts and changes, bringing to it and taking away, altering it and wearing it into certain forms, but feeling it always firmly based, or as one of its neighbors expressed it “well grounded in the mud.”51

It wasn’t only immediate neighbors who knew about the Hull House as a safe place to gather, the reputation spread and soon began attracting women across the country. In her autobiography, Addams mentions a resident who came to Hull House for safety:

[A] little Italian bride of fifteen sought shelter with us one November evening to escape her husband who had beaten her every night for a week when he returned home from work, because she had lost her wedding ring … 52

Because Addams mentions this instance in the early pages of her autobiography, it can be assumed that other immigrant
women would also find shelter and safety at the Hull House. One German woman was described as coming to the Hull House “to avoid a scandal involving the head of the house” where she was a music teacher.55

While no specific mention was made of the type of scandal, the birth and death of a baby is described so it can be assumed that some sort of affair had happened and the German woman came to the Hull House for safety and shelter.

FLORENCE KELLEY

Perhaps one of the most well-known residents was a woman named Florence Kelley, who came to the Hull House to escape from an abusive husband in New York City. Little documentation can be found of the specifics of abuse, but when Florence Kelley arrived in Chicago she left her children at the Women’s Building of the Women’s Christian Temperance Union and went to Hull House.56

Kelley was born outside of Philadelphia and was educated at Cornell University and continued her education at the University of Zurich, taking classes in “Politics and Economics and Law.”57 It was in Zurich that she met her husband, Lazare Wischnewetzky, who was a medical student from Russia. The courtship between Lazare and Florence began on New Year’s Day, 1884, and they were married in June of that year.56 They moved to New York City and had three children, all of whom remained under custody of Florence and never to their father even though he tried multiple times to win them in court battles.57

When Florence arrived at Hull House, she was already a well-known scholar and would go on to graduate from the Northwestern University School of Law in 1895. Here she describes her arrival at Hull House.

On a snowy morning between Christmas 1891 and New Year’s 1892, I arrived at Hull House, Chicago, a little before breakfast time, and found there Henry Standing Bear, a [Lakota] Indian, waiting for the front door to be opened. It was Miss Addams who opened it, holding on her left arm a singularly unattractive, fat, pudgy baby belonging to the cook, who was behind hand with the breakfast. Miss Addams was a little hindered in her movement by a super-energetic kindergarten child, left by its mother while she went to a sweatshop for a bundle of cloaks to be finished.58

Kelley went on to be influential in the child labor movement as a factory inspector and eventually partnered with Lillian Wald to form the United States Children’s Bureau.59

Other disturbing evidence of women using the Hull House as a safe haven can be found in the records of homicide in Chicago. Harrowing descriptions demonstrate that even if the women were living in Hull House the abuser could still find them. In one instance, Miss Irene Donner, a 21-year-old woman, was shot and killed by a neglected suitor. The incident happened on the sidewalk in front of Hull House.60

Another woman sought refuge at Hull House after her husband chased her and her children around the room, trying to kill them before he committed suicide. Her compelling story was recounted by Addams in The Atlantic.

I had eleven children, some born in Bohemia and some born here; nine of them boys; all of the children died when they were little, but my dear Liboucha, you know all about her. She died last winter in the insane asylum. She was only twelve years old when her father, in a fit of delirium tremens, killed himself after he had chased us around the room trying to kill us first. She saw it all; the blood splashed on the wall stayed in her mind the worst; she shivered and shook all that night through, and the next morning she had lost her voice, couldn’t speak out loud for terror.

Another story recounted by Addams tells of abusive children and how a mother came to Hull House to find shelter from her son:

You might say it’s a disgrace to have your son beat you up for the sake of a bit of money you’ve earned by scrubbing … but I haven’t the heart to blame the boy for doing what he’s seen all his life; his father forever went wild when the drink was in him and struck me to the very day of his death. The ugliness was born in the boy as the marks of the devil was born in the poor child upstairs.61

HOMELESS SHELTER

In the early days of Hull House, Jane Addams went to the Cook County Infirmary to investigate the working conditions that influenced her passion for giving women a place to stay, and Hull House would become known as a place for “homeless women,” with varying reasons for homelessness. In her autobiography she describes the various reasons for women being homeless: widowed, staying husbands who only return occasionally, women who left abusive

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53 Ibid. p. 69
56 Northwestern University of Law, Cook County Court House.
57 Northwestern University of Law, Cook County Court House.
58 Northwestern University of Law, Arrival.
60 Homicide in Chicago, Interactive Data base. http://homicide.northwestern.edu/database/
61 Jane Addams, (1910). Twenty years at Hull House.
husbands to raise children alone. Addams describes her passion and love for elderly women. 

The reminiscences of these old women, their shrewd comments upon life, their sense of having reached a point where they may at last speak freely with nothing to lose because of their frankness, makes them often the most delightful companions.62

In her work to alleviate the challenges of homelessness, Addams describes how immigrant women who came to the Hull House would be connected with social services. Hull House members worked tirelessly to support civic duties and impact social welfare policy and positions. “We early found ourselves spending many hours in efforts to secure supports for deserted women, insurance for bewildered widows … the Settlement is valuable as an information and interpretation bureau.”63 Women without another place to turn could come to Hull House and find shelter and safety.

CONCLUSION

Settlement houses and municipal housekeeping addressed the poor living conditions of the slums as well as providing social services, food, clothing, childcare, classes in culture, and a space for women to grow and flourish. While it was not founded with the sole intention of becoming a women’s shelter, Hull House was a place women could go to keep themselves and their children safe.

By 1907, Hull House had expanded to include 13 buildings and covered a city block.64 It would remain open for 122 years, finally closing its doors in January of 2012. Jane Addams remained a resident of Hull House until her death in 1935. She was active in the women’s suffrage movement and the world peace movement. In 1931 she became the first woman to win the Nobel Peace Prize. The closing lines of her obituary in the New York Times read:

Do not base her greatness on Hull House, important as that contribution is. Far more remarkable is the human trait of sticking to that project all her life. She made it a success. She stuck through when it was a success. That is a rare thing to do—to stick to a success.65

Like Jane Addams, Hull House created a lasting legacy of powerful women who would go on to improve the lives of many to come.

62 Jane Addams, (1910). Twenty years at Hull House. p. 75
63 Ibid. p. 79
Each of our contributors.

Kathryn W. Kelsey  
Lois L. Kercher  
Jeanne J. Kielher  
Joanne K. and David Allen Koepnick  
Kathleen A. Koon  
Gayle M. Lorenzi  
Bunden S. Lundgren  
Brigid Lusk  
James L. Maddex, Jr.  
Ruth G. Manchester  
Diane J. Mancino  
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Lisa Ann Plowfield and John A. Harrelson, Jr.  
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Frances M. and H. Harwood Purrell, Jr.  
Catherine R. Ratliff  
Gay A. Redday  
Karen M. Rose  
Paula T. Ruffin  
Cynthia L. Rust  
Karen Saunders  
Diane J. Skiba  
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David V. Strider, Jr.  
The Duke Energy Foundation  
Elizabeth Ann and William S. Trought  
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Lynn Irene Wasserbauer  
Douglas W. Webbink  
JoAnn Van Valkenburgh Whitacre  
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Lisa M. Zerull

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Janice E. Howard  
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Mary T. Sarnecky  
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Doris J. Schell  
Carla Schissel  
Vicki Lynn Schwab  
Vickie and Alger R. Southall III  
Florence Weierbach

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Mary K. Goldschmidt  
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Carol W. Jamerson  
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Arlene W. Keeling  
Shawn M. Floyd  
Paul N. Veltman  
Rosalia Ross  
Whitney Jones Robertson

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Peggy Bidwell photos of School of Nursing Instructor Anne Hemmings.

Eleanor Crowder Bjoring  
1856 edition of Florence Nightingale’s Notes on Nursing: What It Is, And What It Is Not, as well as nursing history books.

Karen D. Doherty  
Tuberculin syringes and reusable needles, test tube, and specimen bottle, c. 1960s.

Dianne E. Gagliano  
material pertaining to her career as an Air Force nurse.

Mary E. Gibson  
vintage photos of nurses, glass syringes

Rebecca Harmon  
replica 1881 American Red Cross nurse uniform.

Lois Kercher  
candy stripe uniform, nurse uniform, and documents pertaining to the American Organization of Nurse Executives.

Mary O’Laughlen  
“The Rose of No Man’s Land”, World War I sheet music.

JoAnne Hutchinson Peach  
West Virginia University graduate nursing cap, 1968.

Cecilia Vernon Powell  
vintage nursing texts, UVA SON nurse cap, band, and pin.

Priscilla Ramsey  
vintage nursing texts.

Catherine Ratliff  
nursing photographs, memorabilia, and books.

Sylvia Rinker  
collection of Mary Louise Habel, RN, with many nursing texts including rare texts pre-dating 1900.

Linda Sabin  
additions to the Caroline Benoist Collection.

Judith K. Sands  
UVA School of Nursing student photographs.

Susan Sheffield  
documents pertaining to the school and Army Nurse Corps experience of her mother, Maxine Pearl Edie Benedict.

Margaret Hutsko Shupnik  
Wilkes Barre General Hospital student nurse cape, cap, and photos.

Donna Vinal  
patient education and midwifery texts.

Doug Webbink  
Shirley Gordon Webbink’s 1950s student nurse uniform, cap, and pin, and a doll dressed as student nurse.

Margaret Hutsko Shupnik Collection
Camilla Wills and colleagues at Camp Dix, New Jersey in 1918.