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FROM THE DIRECTOR

Historians Must Continue to Lead

BARBRA MANN WALL, PhD, RN, FAAN

I have just finished reading the editorial from the American Historical Association’s executive director, James Grossman, entitled “Past Tense: History and its Abuses in Washington.” In the age of “fake news,” political hostilities, and major cuts to funding for historical projects, Grossman reminds us that historians must continue to lead in the area of providing evidence. He says, "Our standards, and our ideas about proof and disproof, differ from our colleagues in the sciences, law, and many other disciplines." Historians, in particular, provide the context that is “so bereft” in discourse today. As Grossman says, what people desire to be the explanations “outweigh historical understanding.”

I would like to focus more on these topics to highlight how a history of nursing can enhance larger discussions that are going on in the country today. I will start with the topic of immigration restriction and migration patterns. One of

Ibid, 6.
The Eleanor Crowder Bjoring Center for Nursing Historical Inquiry (ECBCNHI), established at the University of Virginia in 1991 to support historical scholarship in nursing, is dedicated to the preservation and study of nursing history. The development of advanced clinical nursing practice, and the clinical specialization organizations that represent the various practices, is a major focus of the Center. The goals of the Center include the collection of materials, the promotion of scholarship, and the dissemination of historical research findings.
Nursing the Navajo, 1920–1950: Nurses of the Bureau of Indian Affairs (later called the Indian Health Service)

In the 1920s, three trained Red Cross nurses were assigned to field work on the Navajo Reservation—an open desert, inhabited by the nomadic, sheep-herding Navajo. The nurses’ work in the Four Corners’ Region was an experimental public health program—part of a federal government initiative to provide health care to American Indians on reservations throughout the United States. By 1931, experienced public health nurse Elizabeth Forster was stationed at Red Rock, about 20 miles away from Ship Rock—on the border of New Mexico and Arizona. She opened a clinic there in an abandoned mission.

In December 1931, Public Health Nurse Elizabeth Forster lived in two tiny rooms, treating patients in her tiny kitchen. That month the Bureau of Indian Affairs delivered a supply of wood and coal, just in time for the cold winter ahead. During the month of December, Forster treated 138 Navajo patients, recruiting them to the clinic with the promise of hot soup and a warm fire.

The nurses held “nursing conferences” to instruct the Navajo women about infant and child care, sanitation, nutrition, and the importance of prenatal care. The nurses also conducted well-baby check-ups, examined sick infants and children, and made home visits. In May 1935, Nena Seymour made home visits to 76 different hogans, treating sore throats, ear infections, cuts, impetigo and other commonly occurring illnesses.

The window commemorates the public health nurses who served among the Navaho.

Associate Director Named

We are pleased to announce that Dr. Dorrie Fontaine has appointed Mary E. Gibson, PhD, RN as Associate Director of the Eleanor Crowder Bjoring Center for Nursing Historical Inquiry. Dr. Gibson has served as Assistant Director for the past several years. She has her PhD from the University of Pennsylvania and studies the history of health care for children. She is currently President of the American Association for the History of Nursing and in the past served as President of the Beta Kappa Chapter of Sigma Theta Tau, International. Please join us in welcoming her in this new role.
Presentations, Publications & Awards

FACULTY


Milbrath, G., and Sacco, T. “Pearl Harbor Burn Care, December 1941: Connecting the Past to Current Practice.” Poster presentation at the American Burn Association Annual Meeting: Chicago, IL, April 12, 2018.


Carhuapoma, L.R. “Matriarchs of the Operating Room: Nurses, Neurosurgery, and Johns Hopkins Hospital, 1920–1940.” Podium presentation at the Southern Association for the History of Medicine and Science Conference, February 17, 2018, Augusta, GA.


Hundt, B. “St. Elizabeth’s Hospital: The Kirkbride Plan to the Cottage Plan, 1852–1899.” Paper presented at the Southern Association for the History of Medicine and Science Conference, February 17, 2018, Augusta, GA.

Kumodzi, T. “The Death Lab of Charm City: A Historical Perspective of the Significance of Place to Trauma Nursing Innovation.” Paper presented at the Southern Association for the History of Medicine and Science Conference, February 17, 2018, Augusta, GA.


Bridget Houlahan, PhD, RN accepted a tenure-track pediatric position at James Madison University.

It is with great sadness that we announce the passing of Sadie Marian Smalls of New York, New York. Dr. Smalls received her Bachelor of Science in Nursing degree from A and T College (now University). She completed further study at Teacher’s College–Columbia University, in New York City, where she earned a Master of Arts Degree, Master of Education Degree, and PhD in Education. Her work as a nurse spanned nearly fifty years, and she published numerous articles and pamphlets nursing and health. She was a great supporter of nursing history, and always provided compelling and interesting comments at our annual American Association for the History of Nursing meetings. We will miss her greatly, and her legacy to nursing and to nursing history will be lasting.
Congratulations to Our New PhDs!

On December 12, 2017, Elizabeth Hundt successfully defended her dissertation, A Noble Monument of Wisdom and Mercy: St. Elizabeths Hospital, 1852–1899. Dr. Hundt’s research studied St. Elizabeths Hospital in Washington D.C., an asylum to treat the soldiers, sailors, and indigent citizens of the District, and designed to be a model institution. When it opened in 1855, the hospital represented hope for a cure for insanity by promising treatment that was built on the idea that a precisely controlled, therapeutic environment could calm the mind. The hospital was built using the Kirkbride Plan for asylum design and management. Architecture and nature were essential elements to the ordered environment of the asylum and the treatment provided to patients.

The purpose of this research was to identify, describe, and analyze the history and design of nineteenth century St. Elizabeths Hospital, particularly related to the use of nature and the built environment in the treatment of mental illness. The hospital was indeed a crossroads of ideas and actions of the leaders of the time, including reformers, politicians, physicians, architects, landscape gardeners, and nurses; the focus being the interaction between the patient and the environment for health and well-being.

However, the overcrowding at St. Elizabeths following the American Civil War proved that a cure was elusive. As the nineteenth century came to a close, the overcrowding impacted the landscape of the hospital and the care provided to those suffering from mental illness. Despite the move away from treatment that was based on nature, the hospital’s history provides a foundation for critical examination of the therapeutic environment of hospitals today.

On March 29, 2018, Franklin Hickey successfully defended his dissertation, “Doing Something”: Oral and Written Narratives of Nurses’ Experiences of the September 11, 2001 Disaster. Dr. Hickey’s dissertation identified, described, and analyzed the responses of local nurses from New York and New Jersey and the challenges faced by the healthcare team the first few days following the September 11, 2011, disaster at the World Trade Center in New York City.

He illustrated how nurses in select hospitals and clinics in New York and New Jersey acted after the disaster and what those experiences meant to them. Nurses faced situations they had not imagined and for which they had not prepared. In order to make sense of these terrible events, nurses constructed cohesive stories in which they, at first, felt vulnerability, fear, and anger. Narratives eventually were replaced with broader ones of nurses with a sense of purpose, who used their education and technical skills to “do something” in order to help others.

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, 2018, and the recipient will be announced in December, 2018. 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. Barbra Mann Wall, bmw8y@virginia.edu. Applications are available on the Center’s website: www.nursing.virginia.edu/Research/CNHI/Fellowship.
Two Narratives, One History
Mary Seacole and Florence Nightingale

DARNISHA PITTS
Nursing Student, University of Virginia School of Nursing

ONE RARELY FINDS A nursing student today who has not heard about Florence Nightingale, or “The Lady with the Lamp.” Nightingale has long been the iconic face of nursing. Her shining example, however, has unintentionally overshadowed other famous nurses from her time, in particular, the “hidden figure” Mary Seacole. An examination of both women’s background and contributions during the Crimean War provides a window on how nineteenth-century views of class and race contributed to Nightingale’s iconic status and the devaluing of many others who, like Seacole, provided skilled nursing care. While there is continued debate on who should truly be recognized as nurses, it is important to examine how this one-sided history might be detrimental to the image of nursing particularly for people of color.

In the early 19th century nurses had the reputation of being poor, coarse, and ignorant. Nightingale’s work in the Crimea as well as the media of the time helped change this image of nurses. Nightingale will forever be known as the “Lady with the Lamp,” an image popularized in illustrations of her with injured soldiers in Scutari during the Crimean War. In 1857 Henry Wadsworth Longfellow also immortalized Nightingale in his poem, Santa Filomena.

Following the Crimean War, Nightingale used her experiences in Scutari to propose hospital reform in Britain, established a school for formal nursing education, and established fundamental sanitary principles for environmental hygiene. These accomplishments and her angelic media image further contributed to a new image for the nursing profession.
profession and nurses—primarily white women from families of respected classes.

Cleaning and providing nourishment were the fundamental tasks in the care of soldiers in the Crimea, and Nightingale and her nurses clearly contributed to the overall improvement of patient care. Other women, however, including black women, also worked as nurses and used the very same skills to care for those who were injured, ill, and dying. One of these women was Mary Seacole, a Jamaican born Creole.²

Seacole was born and raised in Kingston, Jamaica. Her father was a soldier from a Scottish family, and her mother was a Creole woman who practiced “doctoring” at a boarding house. In her autobiography, Seacole described a particular trip to London at the age of eighteen: "strangely enough, some of the most vivid of my recollections are the efforts of the London street-boys to poke fun at me and my companion’s complexion. I am only a little brown—a few shades duskier than the brunettes whom you all admire so much."¹ She took pride in her Scottish roots, but she was also aware of how others viewed her as a “lazy Creole” and protested such claims stating, “I am sure I do not know what it is to be indolent.”⁴

Driven to achieve her life goal to be a healer, Seacole apprenticed with her mother in the art of home remedies based on African herbs. Like her mother, she became a skilled healer and enhanced her reputation while caring for the sick during a yellow fever epidemic in 1853.³ When the Crimean War broke out, Seacole was in London on a business trip and she heard that Nightingale had left England for the Crimea with a group of nurses.⁵ She, too, wanted to do her share in aiding the wounded, applied to the Secretary-at-War to be a nurse, was interviewed by one of Nightingale’s companions, and was turned down by both. Devastated at her rejection, she questioned, “Did these ladies shrink from accepting my aid because my blood flowed beneath a somewhat duskier skin than theirs?” Despite these rebuffs, Seacole traveled to the British base at Balaclava with medical supplies, where she created the “British Hotel.” Among her nursing duties was providing nutrition, including delicacies such as lemonade and sponge-cake, for the wounded and ill soldiers.

In her autobiography, Seacole described her positions as doctress, nurse, and “mother.”⁶ Over time, she started having more patients of her own at the British Hotel where needed nourishment, comfort food, and remedies were provided. Some of these remedies only Seacole could provide and doctors could not.⁷ Her role as comforter and caretaker became well known by those in need as she worked to provide a “home.” Her care and dedication are reflected in the kind words found in a testimony from the Adjutant-General’s office of the British Army:

“Mrs. Seacole was with the British army in the Crimea from February, 1855, to this time. This excellent woman has frequently exerted herself in the most praiseworthy manner in attending wounded men, even in positions of great danger, and in assisting sick soldiers by all means in her power. In addition, she kept a very good store, and supplied us with many comforts at a time we much required them.”¹⁰

A newspaper correspondent, also noting her brave efforts, wrote, “I have seen her go down, under fire, with her little store of creature comforts for our wounded men; and a more tender or skillful hand about a wound or broken limb could not be found among our best surgeons.”¹¹ Despite these accolades, Seacole also recalled being “under fire” as she became the center of attention as a woman of color. Still, she found a way to contribute and make a difference through hard work and

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³ Ibid., 2.
⁵ Seacole, Wonderful Adventures of Mrs. Seacole in Many Lands, 78.
⁶ Ibid., 125.
⁷ Ibid., 132.
⁸ Ibid., 124.
⁹ Ibid., 79.
¹⁰ Ibid., 171.
determination. She was not funded by the government like Nightingale but instead paid her own fare to be where she could assist in the way that she knew how.\textsuperscript{12} When the war ended, Seacole was financially bankrupt. Although she did not continue as a nurse or write books on nursing, hospitals, and health reform, her work in Crimea was meaningful to her and to those whose lives were improved by her determination, skill, and selfless care.

Over the years, there have been many debates on whether or not Seacole deserves recognition. Lynn McDonald’s influential work on Nightingale notes that Seacole was recognized as a pioneer nurse in some circles, but she questions this title because she found scant documentation of Seacole’s heroic contributions.\textsuperscript{13} Although McDonald does suggest that Seacole deserves much credit for her care of the wounded and ill, McDonald asserts that Seacole should not be recognized as a “pioneer nurse” or a hero of health care. McDonald also notes that Seacole never officially worked in a hospital. Yet the experience Seacole gained as a healer in Jamaica prepared her to be a bedside nurse in Crimea and contributed to the well-being of the ill and wounded just as Nightingale’s leadership role did.

Recent events have fueled the debate over Seacole’s significance, including when Michael Gove, the United Kingdom’s Education Minister, stripped Seacole from the national curriculum, claiming she was just a “mere tool of the multiculturalist agenda.”\textsuperscript{14} The \textit{Daily Mail} referred to Seacole as “the black Florence Nightingale,” a demeaning term that does not recognize her fully as an individual.\textsuperscript{15} Tensions arose in 2016 when a statue was raised in Seacole’s honor outside Nightingale’s London hospital. Nightingale devotees reacted in angry retaliation at this perceived threat to Nightingale’s honor. It is interesting to think that they would view Seacole as such, given that she provided much-needed bedside nursing skills and acts of comfort, the same care provided by Nightingale and her nurses.

Both Nightingale and Seacole broke new ground in their era, and both should receive recognition for their different contributions to nursing. In some ways, they are similar. Both were females in a patriarchal British society, and both were determined to implement their approaches to nursing and patient care. Nightingale worked from an administrative viewpoint to improve patient care, while Seacole focused her energies on being at the bedside of the wounded and ill and providing comfort measures to ease the suffering of her patients.

It is hard to dispute that Seacole was a leader in caring for those in need during the Crimean War just as Nightingale was. However, Seacole’s race and class have likely contributed to her contributions being overshadowed in past histories of the Crimean War. Each of these women came from different race and class backgrounds. Nightingale, a Victorian woman, came from a privileged background and defied conventional norms for a nineteenth-century woman. She came from the proper lineage and had access to educational opportunities, powerful people, and a press that would enhance her ability to make her voice heard.\textsuperscript{16} Nightingale became the nursing icon. Seacole, by contrast, was a Jamaican-Creole and Scottish woman who considered herself “a little brown,” not “white.” She learned her nursing skills from her mother. As D. P. Griffon notes, Seacole brought traditional healing skills to Crimea that went against the bleeding and purging of English medicine of the day. Furthermore, she was not English and was not from the middle and upper classes of society.\textsuperscript{17} In the face of rejection from officials, Seacole worked with great determination to practice her skills as a nurse and improve the lives of those who were in need during the Crimean War.

In the face of rejection from officials, Seacole worked with great determination to practice her skills as a nurse and improve the lives of those who were in need during the Crimean War.

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\textsuperscript{13} Lynn McDonald, “Florence Nightingale and Mary Seacole on Nursing and Health Care.” \textit{Journal of Advanced Nursing} 70, no.6, (2014): 1438.


\textsuperscript{15} Gander, “Mary Seacole Statue: Why Florence Nightingale Fans Are Angry the Crimean War Nurse is Being Commemorated.”

\textsuperscript{16} Griffon, “A Somewhat Duskier Skin’: Mary Seacole in the Crimea,” 120.

\textsuperscript{17} Ibid., 125.
Conferences

- **American Association for the History of Nursing**
  35th Annual Nursing & Health Care History Conference
  Co-Sponsored by Samuel Merritt University School of Nursing and San Diego State University School of Nursing
  San Diego, CA
  September 13–15, 2018
  Additional information: www.aahn.org

- **Postgraduate Medical Humanities Conference**
  Centre for Medical History
  University of Exeter
  Exeter, UK
  June 7–8, 2018
  Additional information: medicalhumanities.mla.hcommons.org

- **Tracing Nurses’ Footsteps: Nursing and the Tides of Change**
  Canadian Association for the History of Nursing 32nd Annual Conference
  Halifax, Nova Scotia, Canada
  May 15–17, 2018
  Additional information: www.cahn-achn.ca

- **American Association for the History of Medicine**
  91st Annual Meeting
  Los Angeles, CA
  May 10–13, 2018
  Additional information: www.histmed.org

- **Conformity, Resistance, Dialogue and Deviance in Health and Medicine**
  Society for the Social History of Medicine
  Liverpool, UK
  July 11–13, 2018

Call for Applications

The American Association for the History of Nursing (AAHN) offers four awards for completed research, each presented annually at the Fall Nursing History Conference. Only AAHN members are eligible to apply for these awards. Deadline for award submissions is May 15 of each year.

- **Teresa E. Christy Award**—to encourage new nursing history investigators, and to recognize excellence of historical research and writing done while the researcher was in a student status.

- **Lavinia L. Dock Award**—to recognize outstanding research and writing produced by an experienced scholar in nursing history who submits a book.

- **Mary Adelaide Nutting Award**—to recognize outstanding research and writing produced by an experienced scholar in nursing history who submits, most often, a post-doctoral research manuscript or article.

- **Mary M. Roberts Award**—to recognize outstanding original research and writing in an edited book of nursing history. Additional information: www.aahn.org/awards.html

**WANT TO LEARN MORE** about the history of nursing? Connect with other nurses, scholars, and archivists exploring the fascinating history of our healthcare system? Curious about the historical roots of current health policy and clinical practice? Join the American Association for the History of Nursing today!

Membership includes the annual journal, The Nursing History Review, AAHN Bulletin, a discounted rate for the AAHN annual meeting, and more!

For more information on the advantages of membership in the American Association for the History of Nursing and to join, visit: aahn.org.
Save the Date!

Save March 14–17, 2019 for the 4th Agnes Dillon Randolph International Nursing History & Southern Association for the History of Medicine & Science Joint Conference. This collaboration promises to offer a great variety of papers of interest to our usual Randolph attendees. The conference will be held at the University of Virginia School of Nursing. Information about abstract submissions to come this summer.

2018 Barbara Brodie Nursing History Fellow

Michelle Hehman, PhD, RN is the 2018 recipient of the Barbara Brodie Nursing History Fellowship.

Dr. Hehman’s research is entitled “The Nurses of Ellis Island: Professionalism, Policy, and Practice.” The purpose of her study is to examine nurses’ involvement in the care of immigrants who arrived at Ellis Island in the late nineteenth and early twentieth century. The research will follow the chronologic history of Ellis Island as immigration station and military depot from 1892–1954, analyzing nurses’ role and practice through the lens of changing federal immigration policy. Specifically, this study aims to (1) identify and describe the role of the nurse working in the hospital facilities on Ellis Island; (2) explore how the social, economic, and political realities of the time influenced the delivery of care to immigrants, particularly with respect to changes in federal immigration legislation; and (3) analyze how place, culture, race, and class affected the scope and provision of nurses’ work.

Very little has been written about the role of PHS nurses stationed on Ellis Island, as they cared for thousands of immigrants in the island’s hospital facilities and dealt with major changes both at home and abroad. Of particular interest is the inherent conflict Ellis Island nurses faced as they worked as professionals with the goal of guarding the health of their patients, in a setting in which they also were also agents of the state, enlisted to protect the overall health of the nation.

This project is particularly salient as immigration policy and healthcare reform have both emerged as top legislative priorities. The history of nursing care provided to immigrants on Ellis Island, especially during years when restrictive immigration policies were debated and enacted, may lead to insights about health policy development today.
Olympic Nursing

REBECCA COFFIN, PHD, RN

The 2018 Winter Olympics in Pyeongchang have come to an end. In an effort to prolong the Olympic spirit, enjoy some snippets that highlight the ways in which nurses have participated in the Olympics.

1928 SUMMER OLYMPICS, AMSTERDAM

"During the Olympic Games at least one doctor, one male nurse and one Red Cross assistant were to be present in the Stadium, in or near the dressing-station, close to which a motor-ambulance was also to be stationed. ... During the yachting contests on the Zuyder Zee and the Buiten-IJ, a motor-boat equipped as an ambulance would be present, on board of which a medical man and a male nurse would be found."¹

1932 SUMMER OLYMPICS, LOS ANGELES, CALIFORNIA

"The following Advisory Committees were appointed: Executive, Medical, Surgical, Eye, Ear, Nose and Throat, Dental, Women’s Section, Research, Lung, Hear, Dermatology, Psychiatry, X-ray, Nursing, Physiotherapy, Equipment, and Hospitalization."²

“The arrangements for caring for the health of the athletes included a Hospital Unit in the center of the Olympic Village, where X-ray, laboratory, physiotherapy and emergency service, with physicians and nurses on duty, was available every hour of the day or night. The hospital staff was comprised of a Superintendent who was also Day Surgeon, a Night Surgeon, and an Assistant Day Surgeon, and day and night male nurses who were also qualified physiotherapists."³

At the Olympic tryouts, Cincinnati, Ohio. Left to right: Duke F. Kahanamoku, Clarence “Buster” Crabbe, Harold “Shubby” Kruger, Johnny Weissmuller, Judge Elmer F. Hunsicker, Paul Goss, Mrs. Mabel Fitzmorris, Mrs. Eila Layne Brian, Mrs. Carolyn Wayman, and R.C. (Red Cross) Boy Scout messengers. Date of Photo: July 1932.
American Red Cross Nursing Supervisor M. Louise Floyd, managed a team of 120 Red Cross Nurses volunteering 3,490 hours of service. The Medical Staff included four physicians dedicated to Women’s Health, with an additional team of seven “women physician advisors to women athletes.” The leading complaints and injuries of female athletes included muscle strains, acute colds, and blisters on the feet.

1960 WINTER OLYMPICS, SQUAW VALLEY, CALIFORNIA

Representatives of California public health agencies began plans to meet sanitation and housing needs and preventive medical services more than a year before the games took place. Local health department staff on site at the games included two sanitarians, one public health nurse, and a medical officer. “A reserve force of state health department physicians, nurses, sanitarians, and statisticians stood ready to come in on short notice should a severe disease outbreak or other public health emergency occur.” Proper planning limited reports of illness to 42 cases of gastroenteritis, 38 cases of influenza, three cases of trench mouth, one case of mumps, and one case of German measles.

1964 SUMMER OLYMPICS IN TOKYO, JAPAN

To symbolize Japan’s recovery from World War II, Yoshinori Sakai, born in Hiroshima on August 6, 1945, the day the United States dropped an atomic bomb on that city, carried the Olympic torch to the Olympic cauldron during the opening ceremony.

“Sandra Knott, a visiting nurse from Cleveland, Ohio, took part in the 800-meter run. Willye White, a licensed practical nurse from Chicago, competed in the long jump and the 400-meter relay.” White entered the Chicago Board of Education’s practical nurse program after learning that diploma programs in the area would not accommodate her track training schedule. At the time of the 1964 Olympics, White worked in a doctor’s office for “an understanding man who likes sports.” Over the course of her career, White’s impressive athletic accomplishments included winning two Olympic silver medals, participating on 39 international teams, and being the first woman to represent the United States in five Olympics (1956–1972).

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3 Ibid., 187.
4 Ibid., 200.
5 Ibid., 192–206.
7 Ibid., 436.
offers a glimpse into the life of an army nurse through keepsakes and photograph albums, and highlights as well her later career in public health nursing. Among the items Smith saved is a spectacular collection of panoramic photographs, including a view of the 1921 Army School of Nursing graduation ceremony in a forest at the Presidio, San Francisco, California and of the nearby facilities at Letterman General Hospital. We are indebted to Beverly Williams for the donation of her mother’s documents.

A number of items recently made available to researchers concern the World War Two generation. Dorothy Sandridge Gloor joined the staff of the famous Eighth Evacuation Unit Hospital, organized in 1942 by University of Virginia Hospital physicians and nurses. As many of you know, the Eighth Evac saw service in the North African and Italian campaigns. Gloor documented these in extensive photograph albums and scrapbooks of newspaper clippings reporting the war’s progress. Also present is a taped interview of Gloor. Another marvelous collection of period photographs comes to us from Alice Huffman Bugel, a colleague of Gloor’s in the Eighth Evac. In addition to autobiographical notes, Bugel also retained photographs of the Unit’s reunion activities to 1997.

Among the far-reaching influences of America’s defense of political liberty overseas has been increasing attention to the treatment of minority communities here at home. During the segregation era, access to quality, professional healthcare—or healthcare at all—was often extremely limited. In effect, from the end of the 19th century through the civil rights revolution of the 1950s, a parallel system of hospitals, clinics, and visiting nurse programs developed to provide patient care and professional training for African-American and Native American populations, largely out of sight of the mainstream system serving whites. In recognition of the heroic efforts undertaken by African-American medical personnel to make these healthcare services available, the Bjoring Center has undertaken an initiative called “Hidden Nurses” to tell the story. Our first collection comprises research materials and notes assembled by Dr. Phoebe A. Pollitt, Appalachian State University. Dr. Pollitt’s work relates the history of African-American health care facilities in North Carolina, and digital transfers of taped interviews with contemporary public health nurses.

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Pat Messmer photographs pertaining to Imogene King
JoAnne Peach additions to the JoAnne Peach Collection
Phoebe Pollit research materials and interviews pertaining to African-American health care facilities in North Carolina, and digital transfers of taped interviews with contemporary public health nurses.
Patricia M. Quill additions to the Patricia M. Quill Collection
Jennifer Wilhoit student nursing notes of Beulah Beach, c. 1925, vintage pocket surgical toolkit, and nursing text
Jane Wright documents pertaining to Florence Besley, second superintendent of nursing at the UVA Hospital School of Nursing, 1901–1907

Pamela Brink 1953 Nursing Arts Procedure Manual
Barbara Brodie vintage nursing texts
Billye J. Brown documents related to her experiences as Dean of the University of Texas School of Nursing at Austin, including information on the Southern Regional Education Board
Mary Anne Cawley vintage nursing publications
Mary Fisher documents pertaining to her public health nursing experience and the UVA School of Nursing Alumni Association
Catherine Kane vintage nursing texts
Arlene W. Keeling books pertaining to nursing history, and additions to the Arlene W. Keeling Collection
Pamela Kulbok vintage nursing texts and ANA Scope and Standards publications
Pat Messmer photographs pertaining to Imogene King
JoAnne Peach additions to the JoAnne Peach Collection
Phoebe Pollit research materials and interviews pertaining to African-American health care facilities in North Carolina, and digital transfers of taped interviews with contemporary public health nurses.
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Jennifer Wilhoit student nursing notes of Beulah Beach, c. 1925, vintage pocket surgical toolkit, and nursing text
Jane Wright documents pertaining to Florence Besley, second superintendent of nursing at the UVA Hospital School of Nursing, 1901–1907

A CATHERISM OF FIRST AID
FIRST AID TO THE INJURED

THE ARCHIVIST
We would like to extend sincere thanks to each of our contributors.

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