



★

**GREAT WAR, FLAWED PEACE,
AND THE LASTING LEGACY
OF WORLD WAR I**

★



THE UNITED STATES
WORLD WAR ONE
CENTENNIAL COMMISSION

PRITZKER
MILITARY
FOUNDATION

NHD
NATIONAL
HISTORY DAY

WOMEN ON THE FRONT LINES

AMERICAN NURSES IN WORLD WAR I



GUIDING QUESTION: How did American nurses experience the war in France?

AUTHOR

Katie Craven
Open World Learning Community
Saint Paul, Minnesota

WHY?

I want students to see that women were an essential part of the war in Europe. The nurses who served in France provided life-saving services for the soldiers, while enduring the same horrific war conditions as the men.

OVERVIEW

Using photos and firsthand accounts from the National Archives and Records Administration, students will determine the conditions in which American nurses operated while in France during World War I.

OBJECTIVES

At the conclusion of this activity, students will be able to

- > Describe the working and living conditions of American nurses in France during World War I;
- > Determine how, if at all, the women of World War I are memorialized at home; and
- > Design and draft proposals for memorials to the women of World War I.

STANDARDS CONNECTIONS

CONNECTIONS TO COMMON CORE

- > CCSS.ELA-LITERACY.RH.9-10.3 Determine the central ideas or information of a primary or secondary source; provide an accurate summary of how key events or ideas develop over the course of the text.
- > CCSS.ELA-LITERACY.RH.11-12.1 Cite specific textual evidence to support analysis of primary and secondary sources, connecting insights gained from specific details to an understanding of the text as a whole.
- > CCSS.ELA-LITERACY.RH.11-12.9 Integrate information from diverse sources, both primary and secondary, into a coherent understanding of an idea or event, noting discrepancies among sources.

DOCUMENTS USED

PRIMARY SOURCES

Nurse Alice S. Kelley, Appendix to Surgeon General Office: Personal Accounts of Conditions, 1918 (excerpt)
National Archives and Records Administration (Record Group 112, Box 42)

Nurse Julia C. Stimson, *History of Nursing Activities. A.E.F. on the Western Front During the War Period May 8, 1917 - May 31, 1919* (excerpt)
National Archives and Records Administration (Record Group 112, Box 42)

Photograph, *Head Army nurses receiving gas instruction, Camp Kearney, California*, March 30, 1918
National Archives and Records Administration (111-SC-7294)

Photograph, *Nurse of the 326th Field Hospital bathing the eyes of gassed patients...north of Royaumeix, France*, October 15, 1918
National Archives and Records Administration (111-SC-22015)

Photograph, *Nurses of Base Hospital 35, Mars sur Allier, Nieverre, France*, January 3, 1919
National Archives and Records Administration (111-SC-45915)

SECONDARY SOURCES

Colonel Elizabeth Vane and Sanders Marble, "Contributions of the U.S. Army Nurse Corps in World War I"

The Army Nurse Corps Association

<https://e-anca.org/History/Topics-in-ANC-History/Contributions-of-the-US-Army-Nurse-Corps-in-WWI>

MATERIALS

- > World War I Nurse Fact Sheet
- > Account of Nursing Activities Graphic Organizer
- > Nurses in World War I Assessment and Rubric

ACTIVITY PREPARATION

- > Make one copy of each of the following for each student:
 - » World War I Nurses Fact Sheet
 - » Primary Source Packet
 - » Account of Nursing Activities Graphic Organizers
 - » Nurses in World War I Assessment and Rubric
- > Make one copy of the Primary Source Packet for each pair of students.
- > Create digital copies for students if necessary and post to online forum.

PROCEDURE

ACTIVITY ONE: INTRODUCTION OF NURSES IN WORLD WAR I (15 MINUTES)

- > Project the photograph, *Nurses of Base Hospital 35* and ask, *What do you know about the role of women in World War I?*
 - » Tell students to write down their thoughts and be prepared to share out with the class.
 - » Possible answers: nurses, truck drivers, secretaries, factory workers.
- > Distribute the World War I Nurses Fact Sheet and tell students, *Today we are going to focus on women serving in the military overseas.*
 - » Project the fact sheet to use as you lead a class discussion about the basics of women nurses in World War I.

ACTIVITY TWO: COMPARING DIFFERENT ROLES FOR NURSES IN WORLD WAR I (45 MINUTES)

- > Divide students into pairs.
- > Distribute one copy of the Primary Source Packet to each pair and one copy of the Account of Nursing Activities Graphic Organizer to each student.
 - » Explain that one student will examine Document One and Photograph One and one student will examine Document Two and Photograph Two. Each student will fill out the Graphic Organizer for his/her document and image.
 - » Students will share with their partners what they learned from their own document and then work together to answer the discussion questions.
- > Lead a class discussion covering the questions on the second page of the Graphic Organizer.
 - » Focus on differences between the two documents and why they are different.
 - » Direct the discussion to allow students to hypothesize about how experiences of the women were similar to or different from servicemen.

ASSESSMENT

- > Pass out a copy of the Nurses in World War I Assessment to each student. This assessment can be completed during class time or assigned as homework.
- > Assessments can be evaluated using the rubric provided.

METHODS FOR EXTENSION

- > Students interested in learning more about nurses in World War I can visit their local historical societies to find first hand accounts and other resources.
- > Students interested in seeing how nurses have been memorialized for their service in World War I can visit their local memorials, or search online for memorials farther away. If they find women are not being represented they can think about petitioning their local governments, veterans groups, or military branches to have women included in the memorials.

WORLD WAR I NURSES FACT SHEET

History

- > Army Nurse Corps (ANC) was established in 1901.
- > When the war started there were 403 nurses on active duty and another 170 on reserve. In comparison, there were 8,000 nurses in the American Red Cross.
- > 1914-1916: American civilian nurses volunteered with the American Ambulance Service in Paris.
- > 1915: American Red Cross sailed on the “Mercy Ship” expedition to France and staffed base hospitals in France and in Belgium.
- > April 1917: The U.S. entered the war.
- > May 1917: the U.S. War Department organized six Red Cross Base Hospitals to be shipped to France ahead of American soldiers.
- > October 1917: 1,100 American nurses were serving in France at nine Base Hospitals.
- > October 1918: 2,000 Regular Army and 10,186 Reserve nurses were on active duty at 198 stations around the world.
- > By the war’s end in November 1918, 10,000 of the 21,480 Army Nurse Corps members served overseas.

Nursing Qualifications (1917)

- > Female
- > Unmarried
- > Between 25 and 35 years old
- > Caucasian
- > Graduates of nurse training school

Working Conditions

- > Nursing shortages led to a high patient to nurse ratio, sometimes as high as 70 nurses for 5,000 patients.
- > Nurses worked 14 to 18 hour shifts for weeks at a time.
- > Nursing in surgical, psychiatric, and orthopedic units was particularly needed.
- > Blackouts made night shifts dangerous.
- > Cold, damp weather led to health issues, including pneumonia, influenza, and tuberculosis.

American Nurses recognized for their war contributions

- > 28 nurses received the French Croix de Guerre.
- > 69 nurses received the British Royal Red Cross.
- > 2 nurses received the British Military Medal.
- > 3 nurses received the U.S. Distinguished Service Cross.
- > 23 nurses received the U.S. Distinguished Service Medal.

Adapted from:

Colonel Elizabeth Vane and Sanders Marble, “Contributions of the U.S. Army Nurse Corps in World War I”
The Army Nurse Corps Association
<https://e-anca.org/History/Topics-in-ANC-History/Contributions-of-the-US-Army-Nurse-Corps-in-WWI>

ACCOUNT OF NURSING ACTIVITIES GRAPHIC ORGANIZER (PART 1)

Guiding Question: How did American nurses experience the war in France?

- > One student will examine Document One and Photograph One and one student will examine Document Two and Photograph Two. Each student will complete the appropriate section below.
- > Partners will then share with each other what they learned from their document and image.
- > Finally, partners will work together to answer the discussion questions on the next page

Document One: History of Nursing Activities. A.E.F. on the Western Front During the War Period. May 8, 1917 - May 31, 1919 (excerpt)

What is the purpose of this document? Who wrote it?

What are the important pieces of information included in this document?

What can you learn about life for women on the front from this document?

Photograph One: *Nurse of the 326th Field Hospital bathing the eyes of gassed patients...north of Royauveix, France, October 15, 1918*

How does the image of the nurses confirm or contradict what you read in the document?

ACCOUNT OF NURSING ACTIVITIES GRAPHIC ORGANIZER (PART 2)

Guiding Question: How did American nurses experience the war in France?

- > One student will examine Document One and Photograph One and one student will examine Document Two and Photograph Two. Each student will complete the appropriate section below.
- > Partners will then share with each other what they learned from their document and image.
- > Finally, partners will work together to answer the discussion questions on the next page

Document Two: Appendix to Surgeon General Office: Personal Accounts of Conditions, 1918 (excerpt)

What is the purpose of this document? Who wrote it?

What are the important pieces of information included in this document?

What can you learn about life for women on the front from this document?

Photograph Two: *Head Army nurses receiving gas instruction, Camp Kearney, California, March 30, 1918*

How does the image of the nurses confirm or contradict what you read in the document?

ACCOUNT OF NURSING ACTIVITIES GRAPHIC ORGANIZER (DISCUSSION)

Discussion Questions:

How does the tone of the two documents differ? Why might they be different?

Why is it important to see these two perspectives?

What did you learn in Document One and Photograph One that was missing from Document Two and Photograph Two?

What did you learn in Document Two and Photograph Two that was missing from Document One and Photograph One?

Which document is more effective in telling about nursing in World War I? Why?

How do you think the experiences of the women nurses differ from the servicemen?

WOMEN NURSES IN WORLD WAR I ASSESSMENT AND RUBRIC

Guiding Question: How did American women nurses experience the war in France?

Imagine it is 1918 and you are a female nurse serving in France during World War I. Using the discussion questions and your answers on your Graphic Organizer, the World War I Nurses Fact Sheet, or other online resources, write a personal account of your experience serving as a nurse during WWI. This can take the form of a letter home to a loved one or a diary entry. Write about your day-to-day life, including the highs and lows, your nursing duties, and recreation activities. Be descriptive and use language appropriate for the time period.

	Advanced	Proficient	Basic	Emerging
Appropriate Letter or Diary Entry Format	Student has completed proficient work and gone above and beyond by writing a series of diary entries or letters, creating a scrapbook including photos, or writing letters in response, etc.	Student has drafted the writing piece in an approved format and used era appropriate language and style.	Student has drafted the writing piece in an approved format but has not attempted to use era appropriate language or style.	Student has drafted a writing piece, but it is not in an approved format.
Content	Student has completed proficient work and has gone above and beyond by having the character reflecting on her role in the war and war in general.	Student has accurately described the day-to-day life of female nurses in France during WWI. Details of daily life, duties, and recreation are all included.	Student has described the day-to-day life of female nurses in France during WWI, but is lacking specific details, giving a generic overview rather than a detailed account.	Student has described some elements of life for female nurses during WWI, but no details are given or information is inaccurate.
Craftsmanship	Student has completed proficient work and has gone above and beyond by making an effort to style the physical product to the time period (antique font, paper style, address blocks, etc.).	Writing is drafted in letter or diary format complete with details such as salutation or closing. Writing is mostly free of spelling and grammatical errors. Language and tone are appropriate to time period.	Writing is drafted in letter or diary format, but is missing details such as salutation or closing. There are many spelling and grammatical errors. Language and/or tone are not appropriate to the time period.	Student has not drafted writing in appropriate format. There are many spelling and grammatical errors. Language and/or tone are not appropriate for the time period.

PRIMARY SOURCE PACKET (DOCUMENT ONE)

NURSE ALICE S. KELLEY, APPENDIX TO SURGEON GENERAL OFFICE: PERSONAL ACCOUNTS OF CONDITIONS, 1918 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

11.

2. "We left Paris for Chateau Thierry about noon. Chateau Thierry is a name that the American boys will never forget, and a name that will bring a shudder to the nurses who were there in the awful days of July. We reached Chateau Thierry about five o'clock and waited at the station an hour until the R.T.O. found the Evacuation Hospital to which we were assigned, and then we waited until the ambulances came for us. Finally we reached our destination and found a camp of yellow tents, pitched on a recent battle field in 'No Man's Land,' near what was left of a railroad station. Behind the station lay a town, in ruins. This was our first glimpse of war. Here we became acquainted with 'bully beef,' 'goldfish,' moldy black bread and black coffee. The discomforts of ordinary camp life most people are familiar with, but try and imagine tents pitched on ground that an army has left, the dead not all buried, shell holes and trenches; then add rain and more rain. Imagine always the sound of artillery, air machines and no sounds or signs of normal life. Our initiation into the advanced zone was made in fly-time. A good proportion of the nurses were Public Health Nurses. Hadn't we fought flies in the alleys of our cities, begged window screens, netting for covering the babies? We had seen too, with satisfaction, less food sitting on kitchen tables, fewer flies in the homes; but here we were, in an army proud of its sanitary record, and the flies eating the food out of our hands, dropping into our coffee. Butter, there was none for them to struggle with. It really seemed as if we could stand anything if the flies could be lessened. Night in these places is the time for thrill. Oh, the moon that shone in Chateau Thierry those August and September nights! The search-lights that swept across the skies outvied any Northern Lights that ever shot across the sky. 'Jerry' came over every night. Before we heard the burr of his machine, we heard, 'All lights out.' We sat in darkness until the bombing ceased. Night in these tents is unlike any other experience. The cots were low, so low that the blankets always drabbled in the mud. Down the center of the tent were loose boards. They never seemed so narrow as when a stretcher-bearer carried in his burden by the light of a smoky lantern. Poor as the accommodation was, the boys were always glad to get under shelter and in a bed. The nurses had no time off, but stayed on duty working early and late. The devotion of the doughboys to each other is one of the most beautiful things in this world of war. The first thing they would ask coming out of ether was were their 'buddies' safe. If they had seen them fall, they would weep for them; if they were uncertain as to their fate, they worried and fretted.

"How cold it was those September nights! There were no fires in the damp tents, but there were plenty of blankets for the patients and the alcohol stoves kept water hot, so there were always hot water bottles. When the railroad track was put into commission and the first hospital train came in, we had more thrills, for 'Jerry' kept watch for that train and we were always anxious until it got away. Evacuation usually took place at night, quietly, with very little light, the patients sometimes lying on the ground on stretchers, waiting to be put on board. While

PRIMARY SOURCE PACKET (DOCUMENT ONE) (CON'T)

NURSE ALICE S. KELLEY, APPENDIX TO SURGEON GENERAL OFFICE: PERSONAL ACCOUNTS OF CONDITIONS, 1918 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

12.

they waited, they would have cocoa and sandwiches from the Red Cross tent, chocolate and cigarettes. The nurses who were able to do so would leave their posts and come down to say goodby and good luck. Very often the train would leave about three in the morning. It was always a thrill to watch the three red 'eyes' at the end of the train slowly and silently disappear in the darkness. It always seemed strange that the boys never wanted to go. They were always satisfied to stay where they were, as they were in their first bed for some time, and were with the first American women they had seen for as long.

"As the troops advanced, the Evacuation and Mobile Hospitals followed. Nurses and teams would be evacuated to one of the bases and from there sent forward when the outfit was set up. One dark and rainy night in October two surgical teams were sent out from Chaumont to the Argonne front. They had to change trains en route. They waited for the second train from eleven o'clock until five in the morning. The waiting room was locked. The only shelter was a shed between the tracks. There they sat in the darkness and rain, watching trains come and go, troops getting off, others getting on, in silence. One could distinguish neither color nor rank. It was a weird night. The mobile hospital was reached just after breakfast. The nurses had something to eat, got into uniform, and worked all day and all night. Those who have never seen an operating room at the front cannot imagine how unreal it is. The tables are placed as close together as possible, down the center, each team having two tables. The tables are never empty, one patient waiting until the surgeon has finished with the other. The wounded man lies on the table never saying a word. The nurses are too busy to do more than give him a smile or an encouraging pat as they pass by. The nurse who gives the anaesthetic has a better chance to say a word.

"I remember one night at midnight lunch, beyond St. Mihiel. The kitchen was situated in the woods, well out of sight. It had been part of a German camp. The night was cold; it was raining and the mud was the best of its kind. There were no lights to show us the way, and it was slightly up hill. When we had pulled our feet through the stickiness, and reached the cabin, it looked as if we had reached the lower regions. The oil lanterns were tied to the tent stakes, casting a lurid light on the scene, dark figures flitted about with cups and plates in their hands, helping themselves to the bully beef and the awful coffee. It was a strange cafeteria. Officers and nurses sat around laughing away the discomfort and the wretched food."

"Maude Crawford,
"U.S.A. Base Hospital No. 7."

PRIMARY SOURCE PACKET (DOCUMENT ONE) (CON'T)

NURSE ALICE S. KELLEY, APPENDIX TO SURGEON GENERAL OFFICE: PERSONAL ACCOUNTS OF CONDITIONS, 1918 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

22.

Account
of a
Shock
Team

2. "I left the Base on September 8, 1918, on a 'Shock Team' which consisted of a Captain, M.C., a nurse and an orderly. We had orders to report to General Headquarters, Chaumont, at which place we were joined by another Shock Team from a Georgia Unit. From Chaumont the two teams travelled together, reporting to the Chief Surgeon in Toul. The other nurse, Miss X, and I encountered many difficulties travelling in the congested trains and doing without our meals, but it was all part of the game, so we did not mind it much.

"In Toul we were given an ambulance and told to find the 'trriage' of the 89th Division. As you know, the St. Mihiel Drive started September 12th, and in the early morning of September 13th we were riding over territory which our forces had left the day before! I shall never forget that ride. Our driver lost his way, and at one time we were riding ahead of the artillery of one of the divisions on its way to the fast advancing front line. We saw everything, from dead horses up, camouflaged guns beside the road, guns which had been used in the offensive, etc., everything bearing the look of a hasty departure. Several times we were obliged to stop and inquire the location of this 'trriage,' and whenever the boys saw us two girls, they just stared. I heard one man say, 'My God, it's a woman!'

"We stopped in a very much ruined little village, Flirey, where parts of one division were having a hasty breakfast before they pushed on. Excitement was everywhere. Of course the boys cheered when they saw Miss X and me. We were told that we were the only two girls up around that section, and it did please them so to see some really and truly American women. While we were there, a captured German team was brought in and several prisoners. A watch was taken from one of these and given to me for a 'souvenire.'

"Finally, we located the 'trriage,' which was a short distance from Flirey. It consisted of about ten canvas tents, one extremely large one used as a receiving ward. The boys were often evacuated almost as soon as they came in, remaining only to be redressed. Our Shock Team was not called upon to do very much work there - there were many cases that needed transfusion, but we did not have the supplies. To apply heat, we improvised a hood to be placed over the stretcher and used lanterns. I can gladly say, however, that each boy got all the attention that could possibly be given him under the circumstances. Miss X and I were greatly amused at our mode of living. We ate in the officers' mess and had bully beef daily. We could have no light at night (in our little tent), unless securely hidden from view, because the enemy aeroplanes were often flying over us and only a week before a huge ammunition plant, five minutes' walk

PRIMARY SOURCE PACKET (DOCUMENT ONE) (CON'T)

NURSE ALICE S. KELLEY, APPENDIX TO SURGEON GENERAL OFFICE: PERSONAL ACCOUNTS OF CONDITIONS, 1918 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

23.

from the 'triage' was blown up. Really our one and only trouble was the mice. Often I woke up with them running over my cot. At first we could not sleep on account of the barrages put over at night, but finally got accustomed to it.

"I remember late one evening hearing this steady beat, beat, beat. Out of curiosity I got up and peeked out of the tent, and was rewarded with a most impressive sight - a steady line of soldiers marching to the front in a most gorgeous moonlight. As these boys marched on, not a sound was heard except the tread of their feet. I watched them pass for ten full minutes.

"On September 14th, there was an air barrage. This was some distance away, but we could easily see the smoke, etc. Each day there was something interesting.

"At the end of two weeks, we received orders to report to an Evacuation Hospital in Souilly, which is in the Verdun sector. We arrived in time for the Argonne Drive, September 26th. We were immediately put in charge of a regular Shock Ward, the two teams relieving each other on the day and night work. And there the real work began. Our treatment was heat, transfusion and stimulation. Our chief duty was to get the patients in a condition to be operated upon. Very often the men came into the ward straight from the First Aid Stations, their conditions such that they could not be stopped in the receiving ward to have clothing removed. And at times they would be dead when they did reach us. We got everything, but had more shrapnel wounds than fractures. Those were busy times. I often forgot to eat, for some days stretcher after stretcher would file in, several requiring transfusion at the same time, etc. There are two cases I shall always remember particularly. One man came to us in a bad state of shock, having lost his right leg, his right arm, left leg injured, left arm broken and minus his left eye. It may be interesting to know that this man responded to treatment and was evacuated.

"Another case was a lad of twenty-one. He was a true soldier in every sense of the word. He suffered everything, yet he never complained once. He came in with a badly infected right leg which he was obliged to lose nearly to the hip. It was only his fighting spirit to get well that enabled us to keep him as long as we did. When he died, I wrote his mother telling her what a brave lad he had been, etc. Several weeks after I heard from her, and she was ^{so} grateful, I felt sorry I hadn't written to more mothers. But we had so little time.

"On the whole our Shock Team work was successful, though it was often discouraging to bring back some of those frightful cases only

PRIMARY SOURCE PACKET (DOCUMENT ONE) (CON'T)

NURSE ALICE S. KELLEY, APPENDIX TO SURGEON GENERAL OFFICE: PERSONAL ACCOUNTS OF CONDITIONS, 1918 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

24.

to have them die later on with gas bacillus infections.

"I am happy to say that the Evacuation Hospital where we were received a citation for its excellent work.

"The surroundings were exciting and immensely interesting. I was often in Verdun, even when the enemy were shelling the place. Also there was the constant hum of aeroplanes, the sound of the guns, the rumbling of trucks on their way to the front, etc. Everything suggested war - and our intention to get it over quickly.

"We nurses lived quite comfortably, though we slept in damp tents, wallowed in mud, and ate things we never ate before or intended to eat again. As for cooties, we still have the scars! We were often in great danger, but very few, if any, had any thought of fear for herself. Up at the front, I found the atmosphere more congenial among the nurses than back at the Base. It was quite evident that each nurse was bound to do her bit in the efforts to get her American brother well and safely home.

"I returned to my Base November 23, 1918.

"Alice S. Kelley, ANC.,
"Evacuation Hospital 49."

PRIMARY SOURCE PACKET (PHOTOGRAPH ONE)

PHOTOGRAPH, *NURSE OF THE 326TH FIELD HOSPITAL BATHING THE EYES OF GASED PATIENTS...NORTH OF ROYAUMEIX, FRANCE, OCTOBER 15, 1918*
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (111-SC-22015)



PRIMARY SOURCE PACKET (DOCUMENT TWO)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)

NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

8.

On July 27th the report was that the "recent fighting has been so severe that the resources of the Medical Department have been practically exhausted in so far as personnel is concerned." On August 10, 1918 a cable was sent from GHQ. requesting absolute priority for medical organizations including 2,312 nurses. A thousand nurses arrived in August, but a little later the situation as regards medical personnel was described in the War Diary of September 7 as follows: "Base Hospitals have been stripped of every available officer and nurse for the purpose of forming surgical teams, and in the event of extreme activity of our troops at the front, there undoubtedly will be the greatest difficulty in taking care of patients sent back to the base hospitals in the S.O.S."

"The situation was saved only by the self-sacrificing spirit of officers, nurses and men. During the period from July 18 to November 11, the amount of work done was such that no praise would be great enough. It was not at all uncommon for nurses to work 14 to 18 hours a day for weeks at a time and some hospitals with only 70 or 80 nurses cared for patients up to the number of 2100." One hospital had 5,000 patients at one time with 70 nurses to take care of them. There were many other hospitals with equally disproportionate figures. "Officers, nurses and men worked themselves to the limit of physical endurance and that limit was beyond any which might be expected of human beings." The next two months brought very nearly three thousand more nurses, and when the Armistice was signed there was a total of 8,587 nurses. At this time there were approximately 6,925 nurses short of actual needs. (p.59, Rep. Med. Dept.) On that date there were 184,421 American soldiers occupying hospital beds in 153 Base Hospitals, 66 Camp Hospitals and 12 Convalescent Hospitals. *Campes*

"Peak"
Days

It is of interest also to note how many nurses were on duty
It may be of interest to show in the Centers where the largest numbers of patients were grouped at this time, how many nurses were on duty. At Mesves Center on November 16, the Center's "peak" day, there were 20,186 patients in the ten hospitals, cared for by 394 nurses. At Allerey, on the 17th, in their six hospitals there were 17,140 patients, cared for by 360 nurses. *at* Mars, on the 16th in six hospitals had 14,302 patients, cared for by 493 nurses. *and* at Toul on the 28th of November in seven hospitals there were 10,963 patients, cared for by 320 nurses. The maximum number of nurses at these Centers at one time was: Mesves 650 on January 4; Mars 642 on December 4; Toul 438 on February 1. *z*

Beginning of Return
With the exception of casual nurses who were returned to the U.S. for various reasons, the first group to leave France was Base Hospital No. 2 (Presbyterian, N.Y.) which sailed early in January, 1919. From that time the return has been gradual, averaging from January thru April about 250 nurses a week. During the last week of April over 800 nurses sailed. *of*

PRIMARY SOURCE PACKET (DOCUMENT TWO) (CON'T)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

9.

It is to be noted that the failure of nurses to arrive in France was not due to the fact that nurses were not available and ready but was due entirely to lack of transportation for them. The need of bringing over combat troops put all other needs in the background. The shortage of nurses during the Summer and early Fall was great. Those already in France were pushed to their limit but no complaints were made and each woman devoted her effort to finding out how she could do the work of two nurses or even three instead of one. The following paragraph from the report of Colonel Wadhams, Chief, Group B, G-4, General Staff, GHQ., may be of interest at this point.

"It is unfortunate, but certain, that the Army and people at large will never be able to realize the debt of gratitude which they owe to the splendid and self sacrificing personnel of these units. (Bases.) Owing to the chronic shortage of sanitary personnel for duty at advanced sanitary formations (Evacuation and Mobile Hospitals) it was necessary in times of active operations to draw upon the Base Hospital. It was at just these periods that the burden carried by the Base Hospitals was heaviest and personnel could least well be spared. Surgeons and nurses literally dropped at the operating tables from fatigue, but complaints were almost never heard. It was a splendid manifestation of magnificent devotion to duty." ^a _B

Between the signing of the Armistice and the time of our greatest number of nurses, on January 25, 1919, nearly 1,500 nurses arrived, more than came over in all of 1917.

20 88
7 00
13 88

PRIMARY SOURCE PACKET (DOCUMENT TWO) (CON'T)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

E. Living Conditions

Food

When one considers the unaccustomed climatic conditions, the constant rain and penetrating damp cold, the crowding together in dormitories, or the sleeping in tents with no floors or just wet canvas for floor covering to which many of the nurses had to accustom themselves, and considers also the matter of food, it is surprising how generally comfortable the nurses have been. It is true that on the whole the nurses' mess has been excellent, abundant, varied, and well prepared, but there have been many periods where groups of nurses have had nothing but ration food without fresh vegetables or fresh meat and when it has been prepared and served in the most primitive way and when only real hunger and the keen appetite produced by hard work made it eatable at all. Such periods have not been long but there were few nurses who did not experience them at least several times.

Service

It has been found by experience in most of the base hospitals and indeed in the evacuation and camp hospitals whose staffs were large enough to make such an arrangement practicable that to have a separate nurses' mess was the most satisfactory plan. When such a mess was in charge of a nurse whose duty it was to cooperate with the regular mess officer and in addition to give her personal attention to the cooking and serving of meals, there has been greater economy and consequently available funds could be used to much better advantage. There has also been greater order and comfort at meals and the food served has been better balanced and more satisfactory in every way. Some nurses' messes have employed local French women to serve as waitresses and cooks. Some have had soldiers for both cooks and waiters and some have had a combination of the two. The opinion of those who have seen all these methods is that to have maids as waitresses has been most desirable as far as serving was concerned, but soldiers as cooks or a combination of men and women has been most satisfactory.

There have been times when nurses have had to line up in the "chow line" with their mess kits just as the soldiers did and there have been places where it was found desirable to have officers' and nurses' mess at the same time in the same place, but these have been exceptions to the general rule necessitated by the exigencies of the time and place.

Quarters

Most people in civilian life under normal conditions would find it hard to believe that 10,000 women could be so comfortably housed in a foreign land in a state of war, as have been the nurses. The main difficulty was the heating, especially in the cases where old French buildings had been taken over for use as American hospitals.

PRIMARY SOURCE PACKET (DOCUMENT TWO) (CON'T)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

14.

The following paragraph from Colonel Wadhams' report tells a little of the difficulties of living and working conditions in these French buildings:

"French buildings acquired from the French before it was possible to construct hospitals, comprised French hospitals taken over intact, hotels, barracks, schools, and even stables. Available buildings in France at this time which could answer the purpose of providing hospital facilities were very limited. The French Government, British, Belgian and Italian Governments had all had their choice, and there were also a large number of hospitals maintained by voluntary aid societies from different parts of the work. Consequently the buildings obtained were generally of a most unsatisfactory character, very expensive to maintain, difficult to administer, and usually required an excessive number of personnel properly to operate them. Few school buildings had running water, sewer connections or toilet facilities. The hotels taken over were largely summer hotels without heating facilities, insufficient water and very limited plumbing.

"In spite of these and many other disadvantages inherent in leasing or requisitioning private buildings, no other course was open. Building was out of the question until an organization could be secured and personnel and equipment, including sawmills, transported to France."

In spite of the difficulties of the buildings, nurses adapted themselves very quickly and completely to the new conditions, whether in old buildings or later in newly constructed barracks. On the whole, the nurses who were housed in barracks that were constructed for this purpose fared the best, especially when such huts were divided into cubicles or rooms. How the plans for living quarters for nurses were finally worked out is described in the following paragraphs:

"Soon after starting their construction program, the—
General Staff faced the prospect of being unable to have transported to France or to obtain here sufficient building material to carry on the many construction projects confronting these forces. The first change in the plans prescribed by G.H.Q. was to reduce the space in the living quarters allowed to officers, nurses and enlisted men (G.O. 46, 1917, AEF.) The C.S.O. was willing to make sacrifices as regards officers and enlisted men, but strenuously opposed, without success, reducing the modest allowances that had been prescribed for the nurses in these units. a

PRIMARY SOURCE PACKET (DOCUMENT TWO) (CON'T)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

15.

"Despite our protestations, and as adopted, the order prescribed that our nurses sleep in double-tier bunks, with scarcely sufficient floor space per capita to get around. This subjected these worthy women to considerable hardship that seemed unwarranted. This inconsistent attitude on the part of the authorities who reviewed our plans was later changed, largely due to the individual effort and critical reports rendered by the Inspector General of these Forces. As amended, the nurses were eventually given living quarters and the same allowances as was prescribed for junior officers." (G.O. 58, 1918, A.E.F.) (Colonel Wadhams' report, p. 927.)

There were instances where the cement floors of the barracks were constantly wet and trunks, ^{articles} bags, shoes or anything left on the floor mildewed immediately and there were ^{other} barracks that leaked, whose walls and roofs let in wind and rain. But the regulation brick or wood barrack, with separate entrance for each four rooms with an indoor wash-room and toilet with running water, with a stove in each hallway, sufficiently large to heat all four rooms made an ^{by careful arrangement} ideal plan for nurses' quarters.

^{accommodations of this kind} In such quarters it was the general rule not to have more than two nurses in each room. The comfort of these quarters, compared to the large bare cold dormitories in French buildings which had to be used for from twenty to fifty women and which had no conveniences and most inadequate toilet and washing facilities, was really all that could be desired. C

Lack of Laundry Facilities
It is believed that the greatest long continued discomfort that nurses had to endure in addition to dampness and cold, was the need of doing a large part of their own laundry work. Some hospitals had their own laundries; some were able to put out the nurses' laundry to the regular laundry establishments of nearby towns; some were able to secure French women to undertake it, but there were many instances in which nurses were obliged to wash and iron (if possible) all their own linen, including uniforms because there seemed no possible other way to get it done. This was a great hardship particularly during the times when the actual physical strength of the nurses was taxed to the very utmost in their care of the patients.

Night Nurses' Dormitories
In some nurses' quarters, it has ^{been} possible to have a separate hut for night nurses in addition to the regular space allotted to the total number of nurses. This is ^{an} arrangement that should always be made if ^{it is possible} the greatest efficiency and comfort of the whole group is to be considered. There should be ^{permanent} room space for each nurse and in addition isolated sleeping quarters for the nurses who are on night duty, ^{when provided.}

PRIMARY SOURCE PACKET (DOCUMENT TWO) (CON'T)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

Unless this can be arranged, ^{if it was found that} the constant moving and shifting of belongings, necessitated by the frequent changes of night nurses causes ^{caused} continual discomfort. And to be obliged to leave night nurses in their regular rooms (even for the usual short period of four weeks night duty) means ^{been} disturbed rest ^{was disturbed} for the night nurses and restricted freedom and relaxation for the whole group of nurses. Large tents placed in ^{and the} as quiet and isolated a spot as possible make ^{made} ideal sleeping dormitories for night nurses.

^{The character of location of the toilets provided also was very poor.} Another great hardship has been the kind of toilets that have frequently been all that were available and which for various reasons have been found necessary. It is very definitely believed that the conspicuousness of their location in many instances and the lack of privacy in them will be found ^{caused} accountable for much discomfort if not ill health and the loss of previously well established habits. In a number of places, partitions and doors ensuring privacy have been secured but it was seldom possible to have the location changed or improved. *J.*

Recreation

The matter of suitable recreation facilities for the nurses has in some places been a very serious question. In some of the centres there were times when the mud outside the quarters made walking impossible and there were places where no other form of amusement was possible. In the huts where the nurses slept, the electricity, if there was any, was too dim, to make possible writing, reading or sewing and often there was no place where it was warm enough to play cards or other games. In many instances the end of the mess hall had been converted into a sitting room but they at best were dreary places and had the same disadvantages of insufficient heat and light. The nurses whose hospitals were in or near cities were better off but gradually conditions in the centres and other mud-bound places improved. The Red Cross constructed centre recreation huts where the libraries, movies and shows were open to the nurses, but better still were the special recreation huts for nurses which the Red Cross or the Army authorities put up in many places. They were to serve the purposes of a club and were especially heated and lighted and prettily and comfortably furnished. An open fire-place was always the chief attraction and the possibility of serving tea, entertaining friends and having dances in these huts made them meet a long felt want.

The American Red Cross was almost entirely responsible for the initial equipment and furnishing of these places. At their invitation too, upon the request of Chief Nurses, the Y.W.C.A. was asked to send Secretaries to act as Hostesses of these huts and to help in every way in furthering the general welfare of the nurses. These Secretaries had funds at their disposal which they used most generously. Such Y.W.C.A. Secretaries were sent to about 30 different hospitals and what at first was looked upon as a rather doubtful experiment proved to be an unqualified success. The Secretaries were women experienced in this sort of work

PRIMARY SOURCE PACKET (DOCUMENT TWO) (CON'T)

NURSE JULIA C. STIMSON, HISTORY OF NURSING ACTIVITIES. A.E.F. ON THE WESTERN FRONT DURING THE WAR PERIOD
MAY 8, 1917 - MAY 31, 1919 (EXCERPT)
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (RECORD GROUP 112, BOX 42)

17.

in the States and they therefore were able to start classes and courses of all sorts and were instrumental in opening community entertainments and were in general the right hand aides of the Chief Nurses and the special friends of all the nurses.

After the armistice was signed, there was little further difficulty about recreation for the nurses. On the contrary, the reaction felt by men and women alike resulted in a great surplus of different forms of entertainment which in some places required rather stringent measures to control. It must be noted here that such conditons arose only where there was not sufficient work to employ the full energies and time of the nurses. At no time when there were patients needing their care, has the devotion and enthusiastic interest of the nurses been questioned.

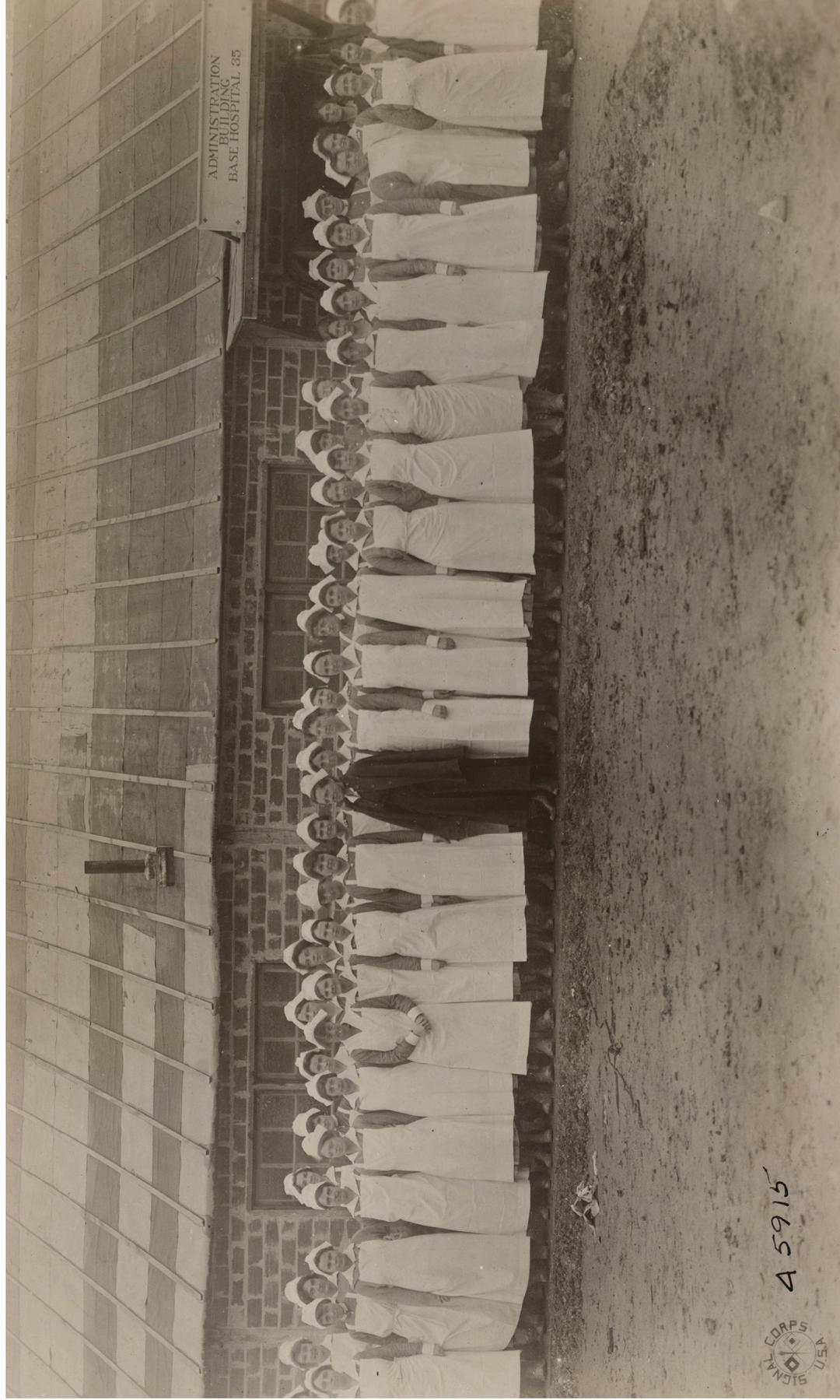
PRIMARY SOURCE PACKET (PHOTOGRAPH TWO)

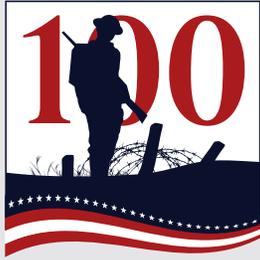
PHOTOGRAPH, *HEAD ARMY NURSES RECEIVING GAS INSTRUCTION, CAMP KEARNEY, CALIFORNIA, MARCH 30, 1918*
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (111-SC-7294)



PRIMARY SOURCE PACKET (PHOTOGRAPH THREE)

PHOTOGRAPH, NURSES OF BASE HOSPITAL 35, MARS SUR ALLIER, NIEVERE, FRANCE, JANUARY 3, 1919
NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (111-SC-45915)





THE UNITED STATES WORLD WAR ONE CENTENNIAL COMMISSION



ww1cc.org

FOUNDING SPONSOR
PRITZKER
MILITARY
MUSEUM & LIBRARY

THE STARR FOUNDATION