

# EDITORIALS

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## Nursing for Victory

*Give all thou canst; high Heaven rejects the lore  
Of nicely-calculated less or more.*

—WORDSWORTH

### They Follow the Flag

IT WAS A NASTY NIGHT in New York but our taxi driver was loquacious. He had just had a new experience. Noting the pin of the enrolled Red Cross nurse we now wear on all occasions, he told us about the ladies in blue uniforms he had just driven across town.

"What kind of uniforms were they? What did those little bars on their shoulders mean? Nurses? You mean real nurses? Were they nurses before they came here? And what about those little shoulder bars?" At last we convinced him that undoubtedly he had driven registered nurses who are second lieutenants in the Army Nurse Corps. We agreed that we would both watch the papers for any news of American nurses landing in Ireland or on some other distant shore. "You know," said he, "we may even see their pictures in the paper!" He was a much pleased person for he had driven nurses who were nursing for victory!

Hastening along on our own errand, we tried to put out of mind our envy of those who are qualified to serve and have "signed up" with the forces. Their period of indecision is over. They know what they want to do in this war. They and all those others who have followed the flag can concentrate on the job at hand, whatever it may be. How they do

it will depend upon their personal characters and professional preparation. The records of their work, whether for brilliant, dependable, or mediocre service, will have a permanent place in the files of the War Department, but their influence will be felt throughout the world.

### What About the Married Nurses?

SUPPOSE the government required all women to be registered in order that a complete record of all the many skills of women might be quickly available? Such a registration is often discussed. According to the *Independent Woman* Oregon is now actually in the process of checking woman power. Would such a registration reveal any considerable number of competent young nurses who had somewhat suddenly become dependent clinging vines in order to secure exemption of their husbands from the draft? Would it reveal a larger number, than has yet stepped forward, of qualified nurses who might make some adjustment of their home responsibilities if convinced that they should re-enter nursing on either a full-time or a part-time basis?

The pictogram on page 354 shows the Army's plan for expansion. It will be doubled within the year and increased again next year. It has not its full quota

of nurses now. Its nursing needs are well stated by Miss Banfield on p. 354. The Navy too will absorb nurses, for some time to come, as a sponge absorbs water. Married nurses are not eligible for these services.

Civilian hospitals, and more of them are being built, are in serious need of nurses. As of January 3, this year, President Roosevelt had approved sixty-one hospital projects in nineteen states and Hawaii, providing 3,500 additional beds for the boomtowns in defense areas. A Congressional appropriation which was voted late last year, if allocated in the same way, will provide another 3,500 beds. Rumor (to our knowledge no study has been made) inclines us to believe that married nurses whose husbands are in service have already found welcome opportunities and have been welcomed in hospitals in the extra-cantonment areas.

Many married nurses are now teaching home nursing, serving on committees, and doing much other useful work, but war pressure, as compared with that of World War I, is only just beginning to make itself felt. A recent statistical report<sup>1</sup> states that at the close of World War I, forty men out of each 1,000 in our population were in the Army or Navy, whereas the corresponding number now is only sixteen. At that time there were twenty-one women war workers in each 1,000 of our population as contrasted with only four now.

The findings of the League's study of refresher courses, published in the March *Journal* are disappointing. Apparently the excellent suggestions for such courses, prepared for the League by Ruth Sleeper<sup>2</sup> have not been widely used. The number of courses given has been small. The number of nurses who

have returned to full or part-time nursing of some type, is not known. There are, however, evidences of keener interest such as the note, in a midwestern alumnae bulletin, on the class of forty-seven busy housewives whose pluck and enthusiasm are an inspiration to the busy instructors and supervisors who have taken on the extra task of teaching and supervising them. The spirit of the "record performer of the last war," astounded to find that her first bed bath had taken one and a half hours, is shown by her determination to "whittle that down." The spirit of the group is said to be so infectious that it refreshes "all us regulars."

Our married nurses, we believe, will gladly *nurse for victory* when they realize that the importunities of those directly responsible for the care of patients in civilian hospitals should be heeded because the care of these patients is such an extremely important part of the gigantic task of winning the war.

## Who Will Teach Them?

THE CONVERSION of nursing to a war basis is gaining momentum. It will be further speeded up by the conference of state nursing council representatives in Chicago, March 23-24. This conference has been made possible by the Subcommittee<sup>3</sup> and the Nursing Council on National Defense. Discussions of ways and means of increasing the nurse power of the nation will focus on such matters as plans for centralized teaching and, "Shall school begin in June this year instead of in September?" "Can most of the preclinical courses be centralized on the campuses of colleges and universities which are already teaching nurses and

<sup>1</sup> *The Cleveland Trust Company Business Bulletin* Vol. 23 (Feb. 15), 1942.

<sup>2</sup> SLEEPER, RUTH: The Refresher Course, *Am. J. Nursing*, Vol. 41, pp. 443-447 (April) 1941.

<sup>3</sup> The Subcommittee on Nursing of the Health and Medical Committee of the Office of Defense Health and Welfare Services.