

# EDITORIALS

## Nursing—on V-E Day and Beyond

*The victory won in the West must now be won in the East. The whole world must be cleansed of the evil from which half the world has been freed. United, the peace-loving nations have demonstrated in the West that their arms are stronger by far than the might of dictators or the tyranny of military cliques that once called us soft and weak. The power of our peoples to defend themselves against all enemies will be proved in the Pacific war as it has been proved in Europe.*—HARRY S. TRUMAN, May 8, 1945.

THE OFFICIAL ANNOUNCEMENT of victory in Europe on May 8 climaxed a week of events so stupendous they still stagger the imagination. As the President reminded us when he designated May 13 a day of prayer, there is still a major war to be won and it must be won as speedily as possible. Like Pearl Harbor, V-E Day is now one of the focal points in history from which we can measure achievement. An analysis of the status of American nursing on that fateful day would seem to be in order.

It is significant that the President of the American Nurses' Association was then in attendance at the United Nations Conference on International Organization in San Francisco. The Canadian and American Committees on the Florence Nightingale International Foundation had just met in New York as had the new Planning Committee of the International Council of Nurses. The Civilian Mobilization Program, spearheaded for the participating organizations by the National Nursing Council for War Service, was getting under way.

Colonel Blanchfield, Superintendent of the Army Nurse Corps, had recently returned from the European and Mediterranean Theaters and had promptly reported that "patients were receiving excellent or at least adequate care every place I visited. All medical personnel were enthusiastic about their work and this was reflected in the attitude of the patients toward them." The Navy Nurse Corps had had no difficulty in securing its quota of nurses.

Procurement and Assignment Service Committees were laboring effectively at their difficult task of classification. Red Cross Recruitment committees were working at high speed. *Nurses had not been drafted!* Nor had there been any evidence of serious effort to get the draft bill, HR2277 to the floor of the Senate for a vote. Some nurses favored a draft; the majority were opposed.

It may be recalled that, at the hearing before the Senate Military Affairs Committee on March 17, the Under Secretary of War was asked:

You have recruitment organizations for WAC's from one end of the country to the other; why can they not be given the nursing task, too?

To this Secretary Patterson had replied:

The regular channels have always been for the stimulation of volunteering, through the American Red Cross. . . . They reach many more communities than any direct recruiting effort of ours could do. . . . We have not had great success in the recruiting of WAC's. . . . We have come far closer to the quota on nurses than on WAC's.

By V-E Day nursing had made a marvelous record. Between Pearl Harbor and April 30, 1945, the American Red Cross certified the magnificent total of *approximately 100,000 nurses to the armed forces*. As 5 per cent of the applicants fail to meet the professional and personal requirements for military service, approximately 105,000 nurses, plus a few thousand who applied directly to the Navy Nurse Corps, had volunteered for service with the armed forces. In other words well over one-third of the active registered nurses of this country had volunteered to serve their country before V-E Day. On the basis of figures provided by the ANA some weeks earlier, the *Saturday Evening Post* had declared, editorially, that "this glorious record of voluntary service should be recognized by the War Department and the American public."<sup>1</sup>

"Certification," it will be recalled, means that the Red Cross has relieved the Army of the enormous mass of detail involved in securing necessary data on the professional qualifications of nurses, their status in relation to citizenship and their freedom from responsibility for minor dependents.

We still have a war to win and there are many complications in deployment (transfer from the European continent to the Pacific) and demobilization. When distances are so tremendous and transportation so extremely difficult the days of nursing time lost while nurses are traveling in process of rotation, or in travel to distant stations, is enormous. Then, too, it should be noted that the Navy, unlike the Army, has not yet announced any plan for demobilization.

<sup>1</sup>The Nurses Have Not Lagged Behind, *Saturday Evening Post*, Vol. 217, p. 108 (April 28) 1945.

The "Cease Firing" call of the bugles on V-E Day brought quiet, but not peace, to a ravished continent which will need American troops and American nurses for some time to come. It turned the high tide of our military effort toward the Pacific. Now, in the name of humanity, we must do our part to get hostilities quickly over.

Demobilization of soldiers long in service has begun, but new recruits are also being inducted. The Nurse Corps being composed entirely of commissioned officers does not come under the point system established for the release of enlisted men of the armed forces, but will be considered under the policy established for officers. We do know that there are approximately 5,000 married nurses in the Army Nurse Corps and that those whose husbands are entitled to early release may request release at the same time.

Wartime nursing is all of a piece and our fine military record would have been impossible without incessant effort on the home front. The Procurement and Assignment Service Committees were hard at work, as we have pointed out, on V-E Day and that persistent, unglamorous service must be continued until there is no further need for fair distribution of all nursing service.

We have been reminded that the Cadet Nurse Corps recruitment job is "only half done, despite Germany's unconditional surrender. Under the terms of the Bolton Act the cadet program is to continue until the 'termination of hostilities.' Cadets and recruitment personnel have been urged to consider all the implications of the message President Truman sent, on May first, to the personnel of the nation's wartime agencies. They were urged 'to stick to their posts until the battle is won and the ship of state is safe in the harbor again. . . .'" The Cadet Nurse Corps, we are informed, is now providing 80 per cent of the nursing service in the participating hospitals.

Back of all the war effort, from the beginning, there has been a dauntless corps of nurses in essential civilian positions who provide the foundation for our wartime effort. The civilian mobilization program which was launched as V-E Day was approaching is a wholesome effort to rouse the interest of more professionally inactive nurses in returning to some type of nursing. Military nursing is now very much in the public eye. The civilian mobilization program is a belated effort to give form and recognition to a movement which has been gaining momentum ever since Pearl Harbor and which is still extremely important. The return of previously inactive nurses to full- or part-time professional work calls for maximum co-operation on the part of these nurses and the employing agencies. Emphasis on the development of sound public relations is an extremely important factor in the civilian mobilization program. Every community should know how, and by whom, its

nursing services are being maintained. Co-operation is based on understanding. The campaign to tell the world about military nursing is effectively promoting understanding of that aspect of nursing. Who, for example, can forget Helen Hayes' "I Am the Nurse"? The home front is less spectacular, but it is not one whit less important than the military front. Effective effort now to promote understanding of civilian needs, while we are still at war, will lessen the problems of reconversion when our armies have been victorious in the Pacific.

Throughout the war good news has been followed by premature and disastrous slackening of effort. We may well be proud of our record up to V-E Day. Nurses are realists. We must not make the fatal error of relaxing our efforts too soon, for a war has still to be won!

## Our Executive Secretaries

A CORRESPONDENT writes, apropos of "The Nurse Behind the Service Nurse" in the May *Journal*,

There are many unsung heroes in nursing these days . . . a group that should receive commendation is that of the executive secretaries. I am amazed at the amount of work which is literally thrown in the laps of the executive secretaries of the state nurses associations.

And no wonder! Thirty-five of them serve also as executive secretaries of the state nursing councils for war service. Besides the regular peacetime work of a state office, the work of the executive secretary is further accelerated by a veritable flood of "directives" and other informative material from the central offices of the American Red Cross, the Procurement and Assignment Service, the Cadet Nurse Corps, and other agencies in Washington. All this is in addition to the materials from the national nursing organizations and the National Nursing Council for War Service. As one recipient of this spate of material puts it:

I find four distinct piles of correspondence on my desk each morning, each demanding attention to some one part of the total wartime program.

These nurses are not superhuman, but we, the members, seem to expect them to perform miracles with their limited staffs and resources. As a matter of fact the level of achievement is high and many of them accomplish an extraordinary amount of constructive work. No two states are alike. Timing, co-ordination of the various elements in the total program for nursing, and interpretation of them in relation to the policies of the state association and to local conditions are extremely important factors in successful administration of a state office. These are functions which call for courage, poise,

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