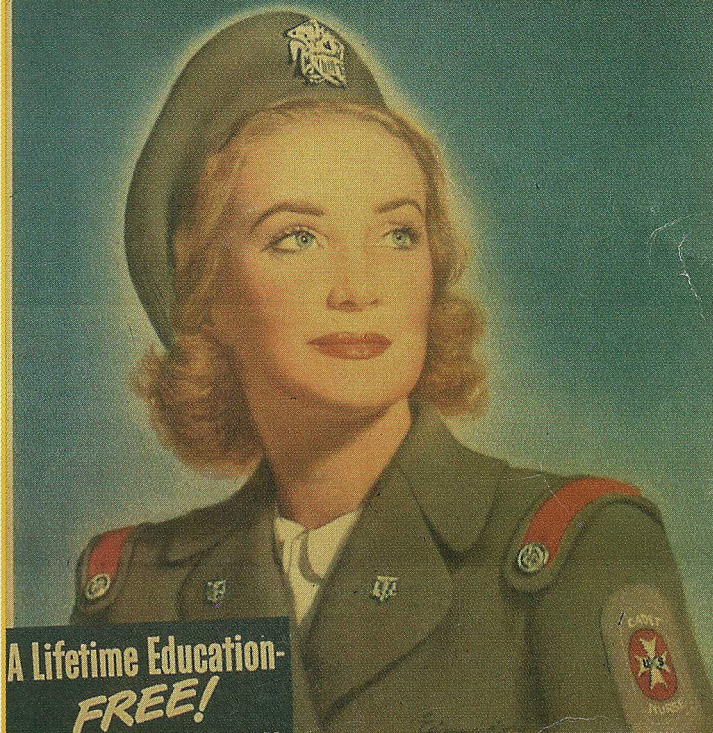


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*This booklet has been published in
conjunction with the commemoration of
the 50th anniversary of the Cadet Nurse Corps.*

Cover Photo: A Recruitment poster for the Cadet Nurse Corps.

The Cadet Nurse Corps in Historical Perspective

Heather Willever

In 1943, the Federal government established the Cadet Nurse Corps to remedy a shortage of nurses exacerbated by World War II. Between the years 1943–1948, 124,065 nurses graduated from the Cadet Nurse Corps, making the Corps one of the largest and most fruitful Federal nursing programs in history. The Corps not only supplied the nurses needed during the war, but also provided the nation with nurses in the postwar years. In addition, the Corps allocated subsidies to nursing schools that resulted in improved school facilities and curricula, enlarged nursing faculties, and enriched post-graduate nursing education.

The Development of American Nursing Education

Prior to the establishment of nursing schools in the late nineteenth century, nursing was considered to be domestic work. Inspired by Florence Nightingale's courage during the Crimean War and her crusade to professionalize nursing in England, social reformers in the United States pushed for the establishment of nursing training schools. Most of these training schools were affiliated with hospitals. After graduation from the program in two to three years, most students became private-duty nurses and a smaller number became hospital-ward nurses. Nursing leaders pushed for university affiliated nursing schools, and in 1909, the University of Minnesota opened the first American university nursing program.

The establishment of the Army School of Nursing during World War I played an influential role in the development of nursing education. While the Army School of Nursing was not opened until shortly before armistice, 512 nurses, the largest class to that time in American history, graduated in June and July of 1921. The Army School of Nursing provided excellent training for its instructors who brought the knowledge and professionalism they obtained during their tenure at the Army School to nursing schools across the country. While the Army School was a progressive force in nursing education, lack of political and financial support led to its closing in 1931.

Established before the Army School of Nursing, the Student Nurse Reserve recruited thousands of nurses for civilian and military duty during World War I. The Women's Committee of the Council of National Defense, the National Association of Collegiate Alumnae, and the American Red Cross promoted and managed the Reserve. The Reserve asked nursing schools to accelerate training;

the Reserve hoped that a shortened course would facilitate the early graduation of 25,000 student nurses for the war effort. While the Student Nurse Reserve had limited success, it proved to be an excellent model for the development of the Cadet Nurse Corps during World War II.

After the war, nursing education had improved but the nursing profession did not change dramatically until the 1930s. In the 1930s, a new emphasis on hospital nursing emerged. Prior to the proliferation of hospitals in the 1910s and 1920s and the establishment of Blue Cross insurance in the 1930s, private-duty nursing dominated the profession. The change from private-duty to hospital nursing influenced the type of nursing support needed during World War II and the goals of the Cadet Nurse Corps.

World War II and the Creation of the Cadet Nurse Corps

When World War II erupted in the 1940s, American nursing leaders began to debate what measures were needed to supply nurses for the war. Julia Stimson and other veterans of the Army Nursing School pushed for the reopening of the Army School. National nursing organizations, however, were leaning toward programs that would provide federal aid to existing nursing schools for increased enrollment. Two agencies, the Subcommittee on Nursing established by the Council of National Defense, and the Nursing Council on National Defense (renamed the National Nursing Council for War Service in 1942) founded by national nursing organizations*, favored this approach because it provided support directly to private and state nursing schools in the form of student scholarships and subsidies. The Subcommittee and the Council won the debate—the Army School of Nursing was not reopened.

With pressure from these nursing organizations and other interest groups, Congress passed the Labor-Security Agency Appropriation Act of 1942 which appropriated \$1,200,000 to nursing schools across the country. Congress assigned the responsibility for allocating these funds to the Public Health Service. Nursing had long played a significant role in the Public Health Service. The beginnings of

*The national nursing organizations represented on the Council eventually included the American Nurses Association, the National League of Nursing Education, the National Organization for Public Health Nursing, the National Association of Colored Graduate Nurses, the Association of Collegiate Schools of Nursing, the American Red Cross Nursing Service, the American Association of Industrial Nurses, and the National Association of Practical Nurse Education. Certain other health-related organizations and various Federal nursing services were also represented on the Council.



Representative Frances Payne Bolton of Ohio, champion of nursing education, who introduced the legislation in the House that was to establish the Cadet Nurse Corps.

an organized nursing service in the Public Health Service dates back to 1919, when the first superintendent of nurses was appointed.

Congressional funding provided scholarships for nursing students, refresher courses for nurses, and postgraduate courses in special clinical fields such as midwifery, anesthesia, and psychiatric nursing. However, the funds were insufficient to the needs, and there were no centralized recruiting efforts. As the war progressed, the demand for nurses increased, but other more attractive, higher-paying jobs for women were usurping the pool of prospective nursing candidates.

The Subcommittee on Nursing and the Nursing Council on National Defense supported a new tactic for mobilizing more women for the war effort. The Subcommittee and the Council posited that the Victory Nurse Corps, later renamed the Cadet Nurse Corps, would be a viable alternative to previous Federal efforts to increase nursing school enrollment. Building on earlier initiatives, the Victory Nurse Corps would, they contended, persuade 65,000 young women to join the ranks of the nursing profession in 1943. As one supporter of the Victory Nurse Corps asserted:

Uniforms and insignia would appeal to young women who might otherwise be attracted to other uniformed services. Payment of a stipend, while small, would cover some personal expenses in connection with a nursing education. Acceleration of the traditional 36-months' course to 30 would attract additional students and make them available for full-time services earlier. Provision for full maintenance, plus stipend, would offset, to a degree, high salaries paid by industry. Reimbursement of hospitals for partial costs of maintaining all students for nine months would provide an incentive to schools to increase enrollment.

The Victory Nurse Corps proposed to grant scholarships and stipends to qualified applicants in exchange for providing "military or other Federal governmental or essential civilian (nursing) services for the duration of the present war." It would pay scholarships and additional subsidies to state-accredited nursing schools participating in the program.

President Franklin D. Roosevelt signs the Nurse Training Act (Bolton Act), which established the Cadet Nurse Corps, on June 15, 1943 as Surgeon General Thomas Parran looks on.



The Victory Nurse Corps bill incorporated all of these initiatives. The bill called for providing scholarship recipients with tuition, fees, uniforms, and fifteen dollars monthly for first nine months of training, twenty dollars monthly for the next fifteen to twenty-one months. Women qualified for the Corps if they were between the ages of 17 and 35 and had a high-school degree from an accredited school. Participating schools would also receive maintenance for student nurses for the first nine months of the course. Postgraduate scholarships for special training in obstetrical, pediatric, and psychiatric nursing would also be available.

All state-accredited schools of basic nursing were eligible if they accelerated their three-year program to a thirty-month course and arranged for a residency period for senior cadets in a Federal, state, or private hospital. Both parochial nurse training schools and nursing schools affiliated with universities were eligible. However, university nursing school students could only receive Corps scholarships after they had completed two years of nurse training. The Corps scholarship covered only a thirty month period.

Representative Frances Payne Bolton of Ohio, a champion of improved nursing education, and Senator Josiah W. Bailey of North Carolina introduced the bill, known as the Nurse Training Act. During World War I, Bolton had saved



*Lucile Petry, Director of
the Division of Nurse
Education and head of the
Cadet Nurse Corps.*

Annie Goodrich's plan for the Army School of Nursing in the face of opposition from the War Department. During World War II, she also proved to be a enthusiastic supporter of Federal funds for basic nursing education. Bolton had played an important role in convincing fellow legislators to increase funding for nursing schools after the Labor-Federal Act was passed. She also contributed to nursing education by endowing in 1923 the then Lakeside School of Nursing, establishing what became the Frances Payne Bolton School of Nursing of Western Reserve (now Case Western Reserve) University.

The Nurse Training Act (also known as the Bolton Act) passed both the House and the Senate and was ready for the President's signature on June 15. The Act became Public Law 74 on July 1, 1943, with an appropriation for the first year of \$65,000,000.

The Organization and Administration of the Cadet Nurse Corps

The Victory Nurse Corps was renamed the Cadet Nurse Corps shortly after the legislation was passed. The Office of War Information (OWI), local hospital and nursing organizations, and the Public Health Service shared the task of recruitment. The Public Health Service, under Surgeon General Thomas Parran,

The official flag of the Cadet Nurse Corps, featuring a Maltese Cross emblazoned on a field of white, is proudly displayed by two Cadets.



was responsible for administration of the Corps and accompanying postgraduate programs. Parran played an important role in planning the program and supporting its development.

In June 1943, the Public Health Service established the Division of Nurse Education (DNE) to allocate aid to participating nursing schools. Surgeon General Parran appointed Lucile Petry Director of the DNE. She thus became the first woman to head a major PHS division.



Representative Frances P. Bolton and Cadet Nurses from the Frances Payne Bolton School of Nursing, Western Reserve University (now Case Western Reserve University). (Photograph courtesy of Betty Hamill Koelliker and the Frances Payne Bolton School of Nursing.)

Lucile Petry had earned an undergraduate degree from the University of Delaware and a masters degree in nursing from Johns Hopkins University. She served as an assistant clinical supervisor at Yale University for three months and then, as the supervisor of clinical instruction at the University of Minnesota for ten years. Later, she climbed the ranks of the academic hierarchy at Minnesota and became an associate professor of clinical nursing. She also served as an education consultant for the Public Health Service. She had proven herself to be an energetic, competent, and ambitious nursing leader, and Parran chose her with confidence.

Lucile Petry and an Advisory Committee established the overall organization for the Division of Nurse Education. The Advisory Committee was composed of national nursing and medical leaders: Isabel M. Stewart, Anna D. Wolf, Marion G. Howell, Estelle Massey Riddle, Margaret Tracy, Sister Helen Jarrell, James A. Hamilton, Dr. Oliver C. Carmichael, Dr. Hyrum Leo Marshall, and Rev. Alphonse M. Schwitalla, S.J. Along with the Advisory Committee, the Division consisted of a Nurse Consultant Section, a Management Section, and a Recruitment and Public Relations Section. To assist the Division with administering the program throughout the country, an Eastern Area Director and a Western Area Director were appointed. In addition, six district offices that corresponded with the six districts of the Public Health Service were established. A staff of about twenty-five nurse education consultants in the central and district offices played an especially important part in implementing the policies of the Division and working with the nursing schools to insure the success of the Cadet Nurse Corps program.

Cadet Nurse Corps Student Scholarships

Women regardless of color qualified for the Cadet Nurse Corps if they were between the ages 17–35, had a degree from an accredited high school, earned good grades, and were in good health. After acceptance by a participating nursing school, qualified applicants were given scholarships that covered tuition and fees. The costs of fees and tuition ranged from \$50 to \$800 a year depending upon the school. In addition to tuition scholarships, the Corps provided a monthly stipend of \$15 for pre-Cadets and of \$20 for Junior Cadets. In the Senior Cadet period, the nursing school was expected to provide a monthly stipend of \$30 or more to the Cadets. The Corps also paid \$35–45 for room and board during the first nine months of training.

Cadets were expected to graduate in thirty-months and to provide essential nursing services for the duration of the war, either in the military or in civilian life. Most Senior Cadets rendered nursing services on the home front, where many positions were vacated during the war by nurses who went overseas to care for the wounded. Cadets went on to serve in a wide variety of settings: veterans hospitals, Indian reservations, understaffed civilian hospitals, the Public Health Service, the military, etc. Some 17,000 Cadets entered Federal service, mostly in the period 1943-1945. Many more would undoubtedly have done so if the end of the war had not curtailed those training opportunities.

Post-graduate scholarships and refresher courses for nurse graduates were offered by the Cadet Nurse Corps to remedy the shortage of nursing school instructors, public health nurses, industrial nurses, and psychiatric nurses. Nurses applied directly to universities and colleges which were granted money for post-graduate programs. Qualified applicants received tuition, fees and maintenance. A total of \$3,464,850 was allocated to post-graduate courses at fifty-seven universities and colleges. Public health nursing, nursing education and supervision, psychiatric nursing, and tuberculosis nursing were all post-graduate program offerings. The Corps also provided scholarships for training in midwifery, surgery, pediatrics, anesthesiology, and orthopedics.

Nursing School Requirements

For a school of nursing to qualify for the Cadet Nurse program several requirements had to be fulfilled. The school was required to be accredited and to be affiliated with a hospital approved by the American College of Surgeons. An adequate educational staff who taught all the basic units of nursing education was also required. In addition, the school had to offer courses in medicine, surgery, pediatrics, and obstetrics to all Cadets. Weekly well-balanced schedules of formal instruction, experience and study were expected as well. Lastly, the school needed to provide adequate classrooms, laboratories, libraries, and living facilities for nursing students.

Congress had mandated that all schools, regardless of size, would have to be eligible for aid through the Cadet Nurse program, even though some schools had lower educational standards. As a result, substandard conditions in the weaker schools were improved by funding from the Corps and advice given by field consultants. The Cadet Nurse Corps also helped to ameliorate substandard