

ESSENTIAL CIVIL WAR CURRICULUM

Nursing in the Civil War

By Karen Egenes

At the onset of the Civil War, neither the Union nor the Confederacy had a provision for military nurses. At that time, there were no nursing schools, no trained nurses, and no nursing credentials. The title nurse was also rather vague and could refer to a person actually engaged in the care of the sick and wounded, as well as a laundress, a cook, or a housekeeper, or a camp follower or prostitute.¹

There were few opportunities for education in nursing. At the outbreak of the Civil War, Florence Nightingale had only recently founded her school of nursing in London which would become the model for nursing education in the United States. Care of sick family members at home was a role typically assigned to the wife and mother. Knowledge and skills in this care were passed from generation to generation. Therefore, the nursing care provided was more intuitive than formal. Any hospitals that existed were pest houses that provided shelter and minimal care to indigent persons and drifters without families. Care was provided by fellow patients or hospital watchmen. Members of Catholic religious communities were the only women in the Union or the Confederacy who had received any formal education in nursing. Their training consisted of apprenticeships with experienced nursing sisters and memorization of guidelines for care of the sick.

Nor was nursing considered as a vocation suitable for proper women. Although the work of Florence Nightingale and her lady volunteers during the Crimean War (1853-1856) had received general acclaim, American society generally clung to the belief that the home was the only proper domain for women.² Thus women who sought employment outside their homes risked scorn from others. The norm of domesticity dictated that a woman maintained social respectability by remaining at home, caring for her husband and children, and displaying socially proper feminine traits.³

1. Marilyn Mayer Culpepper and Pauline Gordon Adams, "Nursing in the Civil War," in *American Journal of Nursing* 88 (July 1988): 982; Margaret Humphreys, *Marrow of Tragedy: The Health Crisis of the American Civil War* (Baltimore: The Johns Hopkins University Press, 2013), 64-5.

2. Barbara Welter, "The Cult of True Womanhood, 1820-1860," in *American Quarterly* (Summer 1966): 151-74.

3. Nancy Cott, *The Bonds of Womanhood* (New Haven: Yale University Press, 1977), 32.

Dr. Samuel Gridley Howe, abolitionist and husband of Julia Ward Howe, reflected the opinion of men of the era. Although he had personally encouraged Florence Nightingale when she sought his advice about her plan to devote her life to nursing, he later told his wife that if he “had been engaged to Miss Nightingale, and had loved her ever so dearly,” he would have “given her up as soon as she commenced her career as a public woman.”⁴

This belief was even more prevalent in the South. Kate Cumming, a nurse from Alabama, wrote, “There is a good deal of trouble about the ladies in some of the hospitals...Our friends have advised us to go home, as they say it is not respectable to go into [a hospital].”⁵

However, at the outbreak of the war, hundreds of women responded to newspaper accounts of inadequate medical treatment of soldiers and insufficient medical supplies. Despite their lack of education and experience, they strove to volunteer to care for sick or wounded soldiers on the battlefields, in field hospitals, and in larger army hospitals far away from the battlefields. The volunteers came from a wide array of backgrounds, with a variety of motivations for their service. Some volunteers from the North were officially appointed by Dorothea Dix, superintendent of the army nurses, or by other government officials. These volunteers had official status as employees of the army and were paid 40 cents per day. A second group of volunteers were Roman Catholic nuns from various religious communities. The nuns cared for soldiers from both the North and the South. Another group consisted of women employed by various relief agencies, such as the Sanitary Commission in the North. A fourth group consisted of widows or destitute women seeking any form of employment. This group also included camp followers or prostitutes. A fifth group consisted of an unknown number of unpaid volunteers, such as an officer’s wife who accompanied her husband to the battlefield, or a woman who came to care for a wounded son and remained to care for others.⁶

Doctors in the armies of both the Union and the Confederacy showed profoundly negative attitudes toward the female volunteer nurses, citing their lack of experience and organizational skills. These concerns were often well grounded precisely because most volunteer nurses lacked experience or training in the care of traumatic injuries and serious infectious diseases. Further, the volunteer nurses often questioned the physicians’ care of their patients, sometimes even substituting their own home remedies for the medications and diets prescribed for patients. They also questioned the need for amputations of limbs. The volunteers’ challenge to male authority

4. Julia Ward Howe, *Reminiscences: 1819-1899* (Boston: Houghton, Mifflin and Co., 1899), 138-9; Agatha Young, *The Women and the Crisis: Women of the North in the Civil War* (New York: McDowell, Obolensky, Inc., 1959), 61.

5. Richard Barksdale Harwell, ed., *Kate: The Journal of a Confederate Nurse*, (Baton Rouge: Louisiana State University Press), 169.

6. Philip Kalisch and Beatrice Kalisch, *American Nursing: A History*. (Philadelphia: Lippincott Williams & Wilkins, 2003), 50.

aroused feelings of hostility. Although some of the volunteer nurses, with time, became proficient in nursing skills, they nevertheless had difficulty achieving acceptance from their medical colleagues. Instead, physicians preferred to work with nursing nuns from Catholic religious communities. From the time that the nuns first arrived at the hospitals, they displayed their skill in the care of sick and wounded soldiers. Further, the nuns valued obedience, and had been taught not to question orders of authority figures, such as the doctors.

Jane Hoge, a leader in the Northwestern Sanitary Commission, blamed a lack of organization for the physicians' opposition to the volunteer nurses. She wrote, "The system [of nurses] was an untried experiment, and was suspiciously watched and severely criticized... The misguided zeal of some benevolent individuals thrust large numbers of women into hospitals, without organization or consultation with surgeons. As a consequence, they were summarily dismissed by the surgeons."⁷

At the start of the war, agencies and groups of private citizens began relief efforts. One group that came to play a major role in the provision of health care to the Union Army was the United States Sanitary Commission. Officially sanctioned by President Lincoln on June 13, 1861, the Commission, composed of private citizens collected and distributed food and medical supplies, planned and maintained sanitation in army camps, and tended to the wounded on battlefields and in hospitals. In addition, members of the Sanitary Commission set and maintained standards for the nurses. For example, nurses hired by the Sanitary Commission were given one month of hospital training at Bellevue or New York Hospital. In this course, each volunteer followed a physician, took copious notes about his work, and practiced bandaging and the treatment of minor fractures.⁸ On April 23, 1861, Lincoln's Secretary of War, Simon Cameron, appointed Dorothea Lynde Dix Superintendent of Female Nurses of the Army. It was decreed that Dix would "give at all times all necessary aid in organizing military hospitals for the care of all sick and wounded soldiers, aiding the chief surgeons by supplying nurses." Although Dix lacked prior education in nursing, she nevertheless had acquired organizational skills through previous humanitarian activities. In a circular issued by Dix on July 24, 1862, she stated that women applicants for military nursing positions must be older than 35, "plain-looking," dressed in "plain colors" (preferably brown, gray, or black) with no "ornaments" such as hoop skirts, bows or jewelry. Applicants were further required to have habits of "neatness, order, sobriety, and industry." Preference would be given to persons with "good conduct, superior education and serious disposition."⁹ Dix stipulated that all union army nurses employed by the government must keep

7. Jane Hoge, *The Boys in Blue* (New York: E.B. Treat's Company, 1868), 110-11.

8. Myrtle P. Matejski, "Ladies' Aid Societies and the Nurses of Lincoln's Army," in *Journal of Nursing History* 1, no. 2 (April, 1986): 43.

9. Philip A. Kalisch and Beatrice J. Kalisch, "Untrained But Undaunted: The Women Nurses of the Blue and the Gray," in *Nursing Forum* XV, no.1 (1976): 8.

themselves, as well as their patients and the wards, in presentable condition. Further, she ordered that the nurses must read to their patients and write letters for them, and be in their rooms by 9 o'clock in the evening.¹⁰ Dix's requirements were so rigid that many women who yearned to be nurses were unable to meet them. As a result, many women, such as Clara Barton, served as nurses throughout the war with neither official appointment, nor a government salary.

In the South, during the early days of the war, several Relief Societies were formed to provide assistance the army, such as the Association for the Relief of Maimed Soldiers and the Ladies' Soldiers Relief Society.¹¹ These groups were usually formed by the wives, sisters, and daughters of soldiers who wanted to help the war effort. However, unlike the Sanitary Commission of the North, no central organization was formed to coordinate these efforts.¹² At first, the Confederacy relied on these groups, as well as individuals, to found and maintain hospitals. For example, Sally Tompkins of Richmond operated the twenty-two bed Robertson Hospital in a rented house. The hospital became so renowned for its excellent nursing care and low mortality rate, that President Davis Commissioned Tompkins as a captain in the Confederate Army. She continued to operate the hospital until the end of the war.¹³

In the early days of the war, nursing care was provided by fellow soldiers, many of whom were temporarily incapacitated because of their own injuries or illnesses. Thus, there was a continual turnover of as the care providers recovered and were returned to active duty. On August 21, 1861, the Confederate Congress passed a law that allowed, when necessary, for the employment of, "nurses and cooks, other than enlisted men or volunteers, the persons so employed being subject to military control."¹⁴ On 29 January 1862, a committee that had been appointed to investigate the Medical Department, recommended that, a corps of nurses be established, stating that, "Good nursing care is of equal value to medical attention."¹⁵ This was followed by an act passed by the Congress in September 1862 that hospital and ward matrons be appointed to each

10. George Worthington Adams, *Doctors in Blue: The Medical History of the Union Army in the Civil War* (Baton Rouge: Louisiana State University Press, 1980), 178.

11. Marie Porkorny, "An Historical Perspective of Confederate Nursing During the Civil War, 1861-1865," in *Nursing Research* 41 no.1 (Jan/Feb/ 1992). 29.

12. Robert Denney, *Civil War Medicine: Care & Comfort of the Wounded* (New York: Sterling Publishing Co.1995), 11.

13. H.H. Cunningham, *Doctors in Gray: The Confederate Medical Service* (Baton Rouge: Louisiana State University Press, 1958), 141.

14. *Ibid.*, 72.

15. *Ibid.*, 73.

hospital, with preference given to females. This legislation was significant because it specifically designated roles for women in Confederate hospitals.¹⁶

Phoebe Pember, a thirty-nine year old widow from a prominent South Carolina family accepted one of the recently created matron positions. She served as matron of Hospital #2 in the Chimborazo hospital complex in Richmond, Virginia, the largest medical facility in the Confederacy. The compound included five hospitals, . On her arrival the hospital's surgeons were far from cordial, voicing their objections to the new "petticoat" administration. Pember was responsible for the oversight of medication administration, meal preparation, and housekeeping for 700 men. She often dealt with shortages of food and medical supplies. In what Pember termed the "wars of the whisky barrel", she had repeated disputes with physicians about who should control the hospital's supply of medicinal liquor.¹⁷ However, with time, physicians remarked that they noticed a "remarkable change in the atmosphere," because of the clean wards and better meals.

Perhaps the most vivid description of the daily duties of women volunteers working in hospitals is given in the journal of author Louisa May Alcott, for 4 January 1863.

"Up at six, dress by gaslight, run through my ward and throw up the windows...Poke the fire, add blankets, joke, coax, and command...Til noon I trot, trot, giving out rations, cutting up food for, helpless 'boys', washing faces, teaching my attendants how beds are made or floors are swept, dressing wounds, taking Dr. F.P.'s orders...dusting tables, sewing bandages, keeping my tray tidy, rushing up and down after pillows, bed-linens, sponges, books and directions...dinner for the patients...letter writing for them lor reading aloud...evening amusements, the doctor's last round, and...the final doses [of medication] for the night."¹⁸ Although Alcott had no previous education in nursing, she was placed in charge of a ward that contained forty beds. The Union Hospital in the Georgetown area of Washington, D.C. where she worked was a former tavern that had been converted into a makeshift hospital. Alcott seemed aware of the dangers hospital work imposed. She later described her situation as, "pneumonia on one side, diphtheria on the other, and two typhoids opposite."¹⁹ Later in 1863, Alcott contracted typhoid pneumonia, the disease that brought an end to her work in nursing. Many nurses, weakened by the hard work hospital nursing demanded succumbed to their patients' disease, became seriously ill, and sometimes died.

Hospital work also exposed nurses to experiences they had never anticipated.

16. Drew Gilpin Faust, *Mothers of Invention: Women of the Slaveholding South in the American Civil War* (Chapel Hill: University of North Carolina Press, 1997), 98.

17. *Ibid.*, 100.

18. Edna D.Cheney, ed., *Louisa May Alcott: Her Life, Letters and Journals*, (Boston: Little, Brown, 1889), 143-4

19. Louisa May Alcott: *Hospital Sketches* (Chester, CT: Applewood Books c/o The Globe Pequot Press, 1996), 26.

In an army hospital in St. Louis, Mary Livermore, a nurse affiliated with the Sanitary Commission, cared for men injured in battle. When Livermore assisted a surgeon dressing the wounds of a soldier whose lower jaw and tongue had been "shot away," she nearly fainted, and ran from the room seeking fresh air.²⁰ She later recalled: "The horrors of that long ward, containing over eighty of the most fearfully wounded men, were worse than anything I had imagined." The surgeon advised her to avoid further attempts to help on the wards. This "advice" only made Livermore more determined in her efforts. She wrote: "I forced myself to remain in the wards without nausea or faintness. Never again were my nerves disturbed by any sight or sound of horror."²¹

As the volunteer nurses learned from their experiences, they became more assertive and took on more taxing assignments. One of the most resourceful nurses of the war was Mary Ann "Mother" Bickerdyke, a widow from Galesburg, Illinois, who left her two young sons in the care of friends and followed General Ulysses S. Grant down the Mississippi River. By 1863, she had become matron of the Gayoso Hospital, reputedly known the length of the Mississippi River as "Mother Bickerdyke's Hospital." In addition to administrative duties for the nine hundred patients in the hospital, Bickerdyke was also charged with the laundry for the hospitals in Memphis, and administration of the "Small-pox Hospital" at Fort Pickering, on the outskirts of Memphis. Bickerdyke became known as the "Cyclone in Calico" because of her willingness to confront doctors. When the head surgeon threatened to send Bickerdyke home, she replied, "I shall stay, doctor, and you'll have to make up your mind to get along with me the best way you can... There's too much to be done down here... And, doctor, I guess you hadn't better get into a row with me, for whenever anybody does, one of us two always goes to the wall, and 'tain't never me!"²²

Volunteer nurses increasingly took independent action on behalf of their patients. For example, scurvy, a disease caused by deficiencies of vitamin C, was a leading cause of suffering and death among the soldiers of the Union Army. Although nothing was known about vitamins during the mid-nineteenth century, nurses realized that without vegetables, soldiers developed scurvy. Onions and potatoes that could be eaten raw seemed a practical way to prevent the disease. During spring, 1863, Mary Livermore and Jane Hoge launched a campaign to collect vegetables for the troops, using slogans such as, "A barrel of potatoes for every soldier." The potatoes and onions were, and donated, packed transported by ship to Vicksburg, where they were reputed to have helped secure the conquest of the city.²³

20. Mary Livermore, *My Story of the War* (Hartford, CT: A. W. Worthington, 1889), 188.

21. *Ibid.*, 88.

22. *Ibid.*, 509; Jane E. Schultz, *Women at the Front: Hospital Workers in Civil War America* (Chapel Hill: The University of North Carolina Press, 2004): 119.

23. Marjorie Barstow Greenbie, *Lincoln's Daughters of Mercy* (New York: G.P. Putnam's Sons, 1944), 150.

Nearly four decades after the end of the Civil War, Mary Livermore, one of the last living "untrained" nurses of the era was invited to address the Sixth Annual Convention of the Nurses' Associated Alumnae (later the American Nurses' Association) on 10 June 1903. Livermore stated she felt honored to address a body of educated professional nurses; something that she had "never expected to see." She continued that although the nurses of the Civil War had cared for the sick and wounded, they knew they lacked the education they needed for their work. She added that although she had risen to become the superintendent of nurses, she knew little more than the most ignorant nurse there."

Livermore concluded with praise the progress that had been made in the professionalization of nursing since the Civil War.
