

The Red Cross

Author(s): Clara D. Noyes

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THE RED CROSS

IN CHARGE OF

JANE A. DELANO, R.N.

Director, Department of Nursing

THE USE OF THE SPECIAL SERVICE CHEVRON

Much confusion has apparently arisen as to the use of the Special Service chevron, the general impression being that its use is confined only to nurses doing public health work. This is an erroneous idea, since public health nurses form only a part of the group of trained nurses who come under the Red Cross enrollment for special service. In selecting nurses for service, it has always been the policy of the Red Cross to protect, as far as possible, important nursing activities in order that the training of additional nurses might not be interfered with and that the best possible care should be given to the civilian population.

The Red Cross was called upon to supply nurses for public health work, nearly a year ago, both at home and abroad, and authorized a special enrollment of public health nurses with the understanding that they would be called upon only for public health service unless they desired to volunteer for service in military hospitals. With the increase in the number of nurses needed for military service, it seemed desirable to give some recognition to nurses needed for important activities in their own communities so that the public might discriminate between them and the nurses unwilling to accept service. A special chevron was finally adopted and regulations concerning its use worked out by a special committee appointed for the purpose. It was decided that nurses eligible for active service but temporarily more important in their present positions should, upon recommendation of the organization employing them and with their own consent, be placed in a Special Service group and allowed to wear a Special Service chevron while holding the position for which the chevron was issued. In this group were placed members of the Town and Country Nursing Service and nurses holding important positions in hospitals, training schools, public health work and similar activities. The requirements being the same as for active service.

A committee was authorized, in each Division office, to cooperate with the Division Director in the consideration of applications for the Special Service group. The chevrons are issued by the Division Directors to those approved, and may be worn as long as the nurse holds her present position, but when such employment ceases, she

becomes automatically qualified for active service and must return the chevron.

In order that all the nursing resources of the country might be utilized to the best advantage, a Home Defense Service through the Division officers was also authorized, and in this group were placed married nurses and others who were physically disqualified for military service, or who, for other reasons, were unable to accept active duty.

Another wrong impression that has gained wide-spread credence is that concerning the use of young wives with husbands in France, as nurses' aids for service in military establishments abroad. Telegrams and letters asking for verification of this have literally poured into National Headquarters, and have culminated in a cable received recently from France. The original order excluded wives, mothers, sisters and daughters of men in the service from assignment to duty in France. This order was later modified to permit the sending of sisters abroad, but the other requirements have never been changed. The confusion, no doubt, arose over a statement issued through the Surgeon General's office that the wives of men in service would be used as hospital assistants in convalescent hospitals in this country. They are not, however, eligible for assignment to duty abroad, or in the cantonment hospitals where students of the Army School of Nursing are placed. As yet, the Surgeon General has not been willing to accept married nurses for service in military hospitals either in this country, or abroad. The Red Cross does, however, use them in Marine hospitals or in public health work even though they have husbands in service. The Red Cross will also send them to France provided they have not the prohibited relatives in France, or subject to draft.

To provide for an equitable distribution of nurses, both here and abroad, and the use of every available woman with nursing training, the Red Cross is planning a nation-wide survey of the nursing resources of the country. It is hoped to secure a complete classification of all the nursing resources of the United States, and will include graduate nurses, registered and unregistered, under-graduates, pupil nurses, nurses' aids, and that large class of women who are so-called semi-trained nurses. Under this last group come trained attendants, mid-wives and practical nurses. The Secretary of War and the Surgeon General of the Army have requested the Red Cross to take such steps as will be necessary to secure this information and plans for it are already well under way. Frederick D. Munroe, who has had experience along similar lines and has been engaged in numerous other Red Cross activities from time to time, has been secured as director of the Bureau of Survey. The actual work of the survey will

be done through the Divisions and Chapters. With this information, the Red Cross will be in a position to intelligently direct the withdrawal of nurses for war service here and abroad. In planning for the survey, conference was held with numbers of nurses who had been actively interested in making a previous survey under the direction of the American Nurses' Association. Their experience and assistance has been most helpful, and the Red Cross will continue to rely on their coöperation, and will use as far as possible the result of their work. Through this survey of the Red Cross and those previously made, it is hoped to establish uniform statistics for the entire country.

The first of September showed a total enrollment of 27,731 graduate nurses on file at Red Cross Headquarters, and assignment to war service of 15,741 nurses. It is estimated that approximately 10,000 additional nurses must be enrolled between now and January 1st, to secure the 9000 nurses to meet the Surgeon General's request for 25,000. There are also on file in this office, a list of several thousand graduate nurses who have been rejected for physical or other reasons, who are not counted in this enrollment, and also a large number of nurses enrolled for Special Service. These nurses are being assigned to service other than military.

It is unfortunate that a statement has recently been given widespread circulation in the public press, supposed to be based on an interview with an officer of the Committee on Nursing of the Council of National Defense, assuring the public that the nursing needs for an Army of 5,000,000 men have been satisfactorily met; that there are 100,000 graduate nurses available for service, with an allowance of depreciation of 25 per cent, and that the Red Cross has available, 2000 over and above the request of the Surgeon General for 25,000. The need of the Army has not yet been met, and it is certain that if we are to secure the number estimated by the Surgeon General by January 1st, and those additional nurses that will be needed by July 1, 1919, it will be necessary to continue the campaign for enrollment, and to secure from the nursing resources of the country every individual nurse who can be spared and who is fit for active service. It will mean sacrifice, not only on the part of the nurses themselves but the public as well, and the results of our best efforts will be doubtful if there is any uncertainty as to the actual conditions.

RED CROSS NOTES

BY CLARA D. NOYES

New Order by Surgeon General of the Army Makes Outdoor Uniform Compulsory.—On the 15th of August the Surgeon General issued an order making the outdoor uniform compulsory for all mem-

bers of the Army Nurse Corps (this includes the reserve nurses furnished by the Red Cross) now in service, within three months, and all those who enter the service hereafter shall be required to purchase the uniform within three months after entry into the service. It is also required that nurses in service in this country shall at the termination of six months provide themselves with the regulation white uniforms, although they may use those they possess when entering, providing they do not materially differ. The order also requires that the cap of the Army Nurse Corps shall be worn by all nurses in service. The Red Cross cap, so dear to the hearts of the members of the Red Cross Nursing Service, made familiar to the public through posters and photographs will no longer be permissible. Many letters are now reaching headquarters, making inquiry concerning the new orders. These orders are in line with the general movement to secure uniformity in insignia for all personnel of the Army. For example: officers will wear the letters "U. S." on the collar, whether "regulars" or "reserves." Old distinctions are being swept aside and nurses, like soldiers, must learn to accept quick decisions and rapid changes, as one of the conditions of war.

The outdoor uniform consisting of a blue serge Norfolk jacket and skirt, white cotton or blue flannel or blue silk shirt waists and blue velour hat for winter may be bought for about \$50. When the heavy ulster is required it may be secured for about \$30. The use of the outdoor uniform is highly desirable as it is not only a great protection to the nurse, but an economy as well. It is required that it be worn at all times when not on duty in the hospital.

Nurses may take one or more simple afternoon house dresses with them to the army hospitals, for use in the nurses' quarters. A simple regulation dress of dark blue silk poplin, at a cost of about \$25, has also been adopted by the Army Nurse Corps.

Until the present time, the Red Cross has supplied the outdoor uniform as well as the additional articles required for overseas duty, after the nurses mobilized in New York City. After an adequate length of time for adjustment has been allowed (approximately three months), the Red Cross will cease to provide the outdoor uniform, but will continue to supply the following articles: 1 sweater (gray), 1 blanket, 1 sleeping bag, 1 hold-all, 1 pair gloves, 1 sou'wester, 1 raincoat, 1 pair rubber boots, 2 pairs black tights, 3 pairs pajamas, 4 sets underwear, 6 pairs stockings—wool (white-black), 6 pairs stockings—cotton (white-black), 3 pairs shoes, 4 gray crepe hospital uniforms, 12 sets white organdie collars and cuffs, 2 pairs cuff links, 8 aprons, 1 pair caducii and "U. S." letters, 1 cape.

The friends of the nurses who have been anxious to knit for them

will be glad to hear that a neat muffler or scarf of black, gray, white or navy blue has been made a matter of regulation. They are to be worn under the coat, crossed over the chest, and ends inside. Nurses may secure full information concerning uniforms from Chief Nurses after arrival at military hospitals. In order to avoid unnecessary expense, those who are preparing to enter the service should bear the new requirements in mind and use such clothing as they now possess. The historic blue cape with scarlet lining is now issued to all members of the Army Nurse Corps immediately after assignment to duty. It also forms part of the overseas equipment. This cape is not being issued by the Red Cross to pupils in the military training schools or to hospital assistants. Nurses are advised not to purchase additional articles until after their arrival in New York, as the Division of Nurses Equipment at 222 4th Avenue has made provision to supply many articles at cost, such as, the regulation Never-break steamer trunk, wool corset covers, regulation shirt waists in white silk, woolen gloves, identification tags, safety belts, fountain pens and ink tablets, etc. A new circular to replace ARC 703, giving full information concerning equipment, is now in the hands of the printer. It is expected that it will be ready for circulation in a few days.

The Division of Red Cross Nursing Equipment also issues equipment to dietitians, nurses' aids, reconstruction aids and all other women personnel now being sent overseas. There has been some criticism of the outdoor uniform worn by our nurses, some have deplored its sombre color, others have mentioned the homeliness of the hat and spoken of its harsh lines. It was, therefore, a genuine cause for congratulation, when the New York Sun, devoting the best part of an editorial column to the subject, made favorable comment of the uniform as follows:

Any woman can wear the uniform of the army nurse and draw a murmur of admiration from man, even if the murmur is so grossly ignorant that he does not know what the dress means. * * * The nurses come from all parts of the country in all sorts of gowns, each to the wearer's taste. Some are pretty, all are quiet, businesslike and cheerful looking. They are playing a big part in the war, but they are strangely free from that expression, sometimes observed in very young lieutenants, which says, "Foch and I, Foch and I." The nurses often smile and not infrequently laugh. But, we are speaking of their uniform, the object of the admiration of all and doubtless the envy of some. * * * The hats are a part of the miracle, for although all alike, they are always becoming.

If any one questions the serviceableness of the outfits furnished to the nurses by the Red Cross, the extract given below from a nurse assigned to Military Hospital No. 40, Liverpool, England, will have all doubts removed. The advice about sugar and soap may be helpful, although sugar is a luxury these days in America.

God bless the people who thought about giving the nurses those lovely sleeping bags and that nice wooly blanket. Oh my, when you are sleeping in a tent how good it is to get into that bag. We have other blankets, too, but oh the comfort of those Red Cross woolies. Will you tell the nurses who may be coming over to bring sugar? Soap can be bought here. It is a little more expensive than it is at home. Sterno outfits can be bought here, also canned heat that goes with it, for about the same that we pay at home. Would also suggest that the nurses get rubbers to fit the new shoes. Should they get into a camp like this, the dew is heavy on the grass in the evening and when it rains, quite muddy. It has rained every day at intervals during the day for three weeks, not muddy enough to put on your rubber boots, but ordinary rubbers would be very useful and they are not to be bought here. We carry our rain coats with us when we go to the tents. If it doesn't happen to be raining when we start it will be sure to rain before we are off duty.

As the steamship companies have recently decided that "Sterno outfits" may not be taken on board the steamers, the information given in the above communication will be very consoling to the nurses. We should advise nurses to take with them either an additional blue serge uniform skirt or one that they may already possess, to be worn on the steamer. This will save their coat suit and make it possible to arrive looking trim and neat.

Italy.—There are about twenty-five nurses now in Italy engaged in many forms of interesting work, such as dressing stations, dispensaries, hospitals for the Ambulance Corps, teaching centers where the nurses live and the Italian women are given instruction in home nursing and care of infants. Recent communications from our nursing representative in Italy state that a suggestion has been made by the Government, to the Red Cross Commission that a national associations of nurses be organized. They are also asking for advice upon the organization of training schools in Italian hospitals. Twenty-five additional nurses are now being prepared for Italy and an Italian speaking dietitian is also required. Base Hospital No. 102, organized by the Red Cross for the Army with a personnel of 100 nurses has probably reached Italy. Many Italian speaking nurses were included in the personnel, also seven Sisters, with Sister Chrysostam of New Orleans as Chief Nurse. The Medical Director, Dr. Danna, also of New Orleans, is an Italian with American training.

Russian Mission.—An interesting mission sailed for Russia about the middle of August. Two nurses were selected to serve with this, Beatrice Gosling and Alma Foerester had previously served with the Russian Unit in the early days of the war.

Greek Mission.—The Red Cross is organizing a mission for Greece. Three American nurses, two well-grounded in training school and institutional work, Marie Glauber and Lena Johnson, and

Margaret Tyman a public health nurse, have been selected. Four Greek nurses, trained in this country and enrolled in the Red Cross Nursing Service are also being prepared, probably to be assigned to Greek hospitals upon arrival, or they may assist the American nurses. They are, Misses Margaret Chrysakis, Zacca, Kouroyen, and Inglezakis.

Palestine.—The Mission to Palestine, sent out some months ago, of which Edith Madeira was the Chief Nurse, arrived about the 17th of June. She reports that they are getting buildings ready for living quarters and hospital use and makes the following statement concerning Miss Macklin's work.

Today Miss Macklin started out as the Matron of the Government Hospital here and there are very large and comprehensive plans of work laid out for us by the British so that my unit will be scattered all around shortly and I shall live on the road keeping track of the work. It is very flattering to have them give us such work at once and we hope to make it go. I am wondering if we shall not be needing more nurses soon and if so send us splendid ones, please. This is such a fine group I have now.

She also makes the following inquiry concerning rank:

What about commissions—have they been given yet? We heard a rumor they had and I am anxiously waiting for news on the subject. The Australian nurses have their captain's rank for the matron, and 1st and 2nd lieutenantcies for the others and look very smart in their shoulder straps.

France.—There are now about 269 nurses in France under the Red Cross, engaged in all forms of work, largely with the civilian population, in hospitals for adults and children, in sanatoria for tuberculosis, dispensaries, clinics, convalescent homes, work with refugees, etc. As the American soldiers have been convoyed to the French military hospitals, American nurses with French-speaking aids have been detailed to look after their interests. During the last big offensive, nurses were drawn from the civilian work in large numbers and sent to these hospitals, or to other stations where our sick and wounded men were carried. There has been some confusion in the mind of the nurses who have been selected for service under the Red Cross, concerning their final assignment, although we have tried to make it clear to them, that they serve directly under the auspices of the Red Cross and are not detailed to the hospitals of the A. E. F. except as they may be called upon for temporary emergency work after arrival "over there," yet they seem surprised when they arrive to find that this is the case.