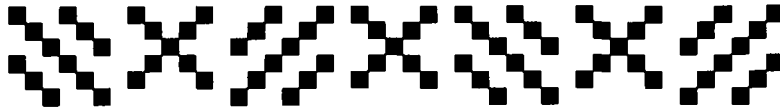


A Hoosier Nurse in France:  
The World War I Diary  
of Maude Frances Essig

*Alma S. Woolley\**



Maude Frances Essig was born November 29, 1884, on a farm west of Elkhart, Indiana. She died in September, 1981, in the Veterans Administration Center in Dayton, Ohio, at the age of ninety-six, after being a resident of the home for twenty-nine years. After Essig's death a nephew found among her possessions a handwritten sixty-eight-page paper entitled

My Trip Abroad with Uncle Sam—1917:1919

American Expeditionary Forces in France—

Reserve Army Nurse Corp—

American Red Cross Nurse #4411

How We Won World War I

By *Maude Frances Essig*—

Superintendent—Elkhart General Hospital 1915-  
1920

Elkhart, Indiana

The cover page also stated that Essig had compiled the account during the summer of 1919 from letters she had written to her mother, from her own diary, and from memory. There is no evidence that she ever attempted to publish or circulate it. The paper was sent to one of Essig's former students, who brought it to the Illinois Wesleyan University School of Nursing in the belief that its contents would be of interest to the school in whose evolution Essig had played a prominent part. The paper's script is similar to printing and not difficult to read. The handwriting is

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identical to that of a book of committee minutes owned by the IWU School of Nursing, each signed by Maude F. Essig. It is also identical to that on letters, notes, and cards sent to former students living in the area of Bloomington, Illinois. The second title, "How We Won World War I," must have been added, however, after another world war gave the numeral "I" to what had formerly been known only as the Great War.

Essig's manuscript, in the form of a diary, begins with a brief entry dated August 15, 1915, documenting transfer of her Red Cross membership from the Chicago to the Indianapolis chapter and ends on March 22, 1919, with her return from France to Elkhart, Indiana. Nursing duties are described as they directly influence the narrative, and from them it is possible to glean a picture of the nurse's role in two crucial phases of military operations during World War I, the army's base and evacuation hospitals.

There were five levels of care for American soldiers wounded in battle in Europe during World War I. Women were involved in only two of them. The system was designed for the type of war being fought, the distance from hospitals in the United States, and the kind of transportation available. In the field itself members of the regimental medical detachment applied first-aid dressings and carried or assisted the wounded to *aid stations*. Here other regimental medical officers applied dressings and splints and prepared the wounded for transport. Enlisted men and litter bearers took them to collecting stations and ambulances. The *field hospitals*, about five miles back of the front lines, were similar to present-day Mobile Army Surgical Hospital (MASH) units. They received the wounded from ambulances and triaged them, performed emergency surgery, redressed wounds, relieved pain, provided nourishment, and treated shock. *Evacuation hospitals* were set up from twelve to twenty miles or more back of the lines on railroad sidings. Women army nurses worked in these evacuation units. Here patients received more thorough care before they were taken by train to the *base hospitals*. Gathered hurriedly but carefully by government and civilian effort, the base hospitals were sent in thousands of pieces to be assembled in Europe to care for American wounded. With them, also hurriedly assembled, went groups of civilian doctors, nurses, technicians, and supporting staff, who, for the war's duration, were absorbed under the aegis and direction of the military.<sup>1</sup>

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<sup>1</sup> Percy M. Ashburn, *A History of the Medical Department of the United States Army* (Boston, 1929), 340-43.



**MAUDE FRANCES ESSIG**  
c. 1925

*Courtesy Alma S. Woolley.*

Essig was among those who answered the appeal of the popular Red Cross recruiting poster, "What are *you* doing to help?" by joining one of these base hospital staffs.

Essig served during the war on the staff of Base Hospital 32, a unit organized by the Indianapolis chapter of the American Red Cross. Although official involvement of the United States in World War I did not begin until early April, 1917, planning for the Indianapolis-sponsored hospital began in February of that year. A large part of its financing was provided by Eli Lilly and Company, a pharmaceutical firm, as a memorial to its founder. The initial donation of \$25,000 in February, 1917, was followed by \$15,000 from the Lilly family, and the rest was raised by the people of Indianapolis.<sup>2</sup> Staff members of the Indianapolis City Hospital, later known as Marion County General Hospital and then as Wishard Memorial, organized the unit. The personnel were to include twenty-two physicians and surgeons, two dentists, sixty-five graduate nurses, six to ten civil employees, and 153 enlisted men; approximately that number sailed with the unit to France. The Indianapolis chapter of the American Red Cross gave each nurse who enlisted a rubber blanket and fifty dollars in gold as a parting gift. The people of Indianapolis continued to support Base Hospital 32 throughout the war. Socks, afghans, pillows, quilts, and supplies of all kinds were made, assembled, and shipped to the unit. Especially welcomed were candy, cigarettes, and apples—all luxuries in war-torn France.<sup>3</sup>

After a number of staff changes Dr. Edmund D. Clark, an Indianapolis surgeon, assumed the directorship of Base Hospital 32 and organized it for overseas duty. Clark's staff included a chief nurse, Florence J. Martin, superintendent of nurses of the Indianapolis City Hospital, whose task it was to recruit and organize the graduate nurses for the staff.<sup>4</sup> It was she who wrote to Essig, her counterpart at Elkhart General Hospital, on June 28, 1917, inviting Essig to join the staff, since membership was by invitation only.

In October, 1918, during Essig's tenure at Base Hospital 32, the unit had an emergency capacity of 2,400 beds. During the hospital's entire period of foreign service it admitted 9,698 pa-

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<sup>2</sup> Marie Cecile Chomel and Anselm Chomel, *A Red Cross Chapter at Work* (Indianapolis, 1920), 234, 236.

<sup>3</sup> Benjamin D. Hitz, comp. and ed., *The History of Base Hospital 32 . . .* (Indianapolis, 1922), 3, 22; Chomel and Chomel, *Red Cross Chapter at Work*, 241, 245-46.

<sup>4</sup> Hitz, *History of Base Hospital 32*, pp. 3, 5; Chomel and Chomel, *Red Cross Chapter at Work*, 240.





WORLD WAR I RED CROSS RECRUITING POSTER

Reproduced from Philip A. Kalisch and Beatrice J. Kalisch, *The Advance of American Nursing* (Boston, 1978), 300. An original poster can be found in the National Archives, Washington, D. C.

tients, which was slightly more than 4 percent of the total number of United States wounded. Over 98 percent of these were transferred to other hospitals or returned to duty. The total death rate was only 1.22 percent. Of the sixty nurses in the unit, most of whom were from Indiana, three became ill and returned home before the unit left for France, where the hospital was established. One became ill during the voyage and died at the naval hospital in Brest, and six returned to the United States because of sickness while in France. Twenty-four nurses from Iowa were added to the unit at a later date.<sup>5</sup>

Base Hospital 32 contributed toward the medical progress that is one of the small compensations for the suffering of war. There, as in all hospitals, research was done on wound inflammation, the use of x-ray and fluoroscopy in locating foreign bodies, and the treatment of shock. Sixty percent of the patients who reached Lilly Base Hospital were gas cases. The most severely affected died immediately or en route to the hospital. Exposure to mustard and phosgene gas caused severe damage to the respiratory system and pulmonary edema. Burned membranes in the throat, bronchi, and lungs necrosed and caused obstruction and respiratory failure. Even hospital attendants were frequently burned by contact with clothing and blankets which had been exposed to the gas.<sup>6</sup>

No satisfactory treatment had been developed for gas inhalation, so the hospital was free to use whatever seemed to provide relief. The English treated these cases with oxygen and benzoin steam inhalations, but an otolaryngologist at Base Hospital 32, Major Lafayette Page, rejected this treatment. He believed that the oxygen was unnecessary and that the steam merely soaked the tissues. He realized that in order for recovery and healing to take place it was necessary for the injured tissue debris to be removed from the lungs, primarily through the natural cough reflex. He therefore devised a mixture of guaiacol, camphor, menthol, and oil of thyme and eucalyptus that was introduced into the trachea through a syringe. When it reached the bronchi, it caused coughing to expel the products of inflammation and suppuration. The patient received immediate relief, breathing was facilitated, pain reduced, and healing begun. This treatment was widely copied in other American as well as English hospitals and became the standard treatment for this injury. Of the six thousand gas cases treated at Base Hospital 32, only two died of

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<sup>5</sup> Chomel and Chomel, *Red Cross Chapter at Work*, 237-42.

<sup>6</sup> *Ibid.*, 251-55; Hitz, *History of Base Hospital 32*, pp. 132-35.

gas inhalation.<sup>7</sup> In addition, Major Harry Byrnes, an ophthalmologist at the hospital, showed that the open treatment of eyes exposed to poison gas was more beneficial than the common practice of bandaging.<sup>8</sup> Essig noted: "It is remarkable to see how the burned eyes respond to treatment."

Base Hospital 32 also made other medical advances during the war. A combination of ether and chloroform under a closed hood reduced induction time for anesthesia from twenty minutes to one to two minutes. Another innovation was the use of a nasopharyngeal tube for anesthesia, particularly for head surgery. Because the hospital staff recognized that spinal injuries, especially those resulting in severed cords, had a poor prognosis, patients with these injuries were sent home as soon as possible in an attempt to secure the best care for them. And a warning was issued against eating the "beautiful blue grapes" that grew in the French mountains when it was discovered that a particular type of "mania" was the result of belladonna berry poisoning.<sup>9</sup>

Essig comments infrequently concerning the nursing treatments that were administered to patients at Base Hospital 32. She focuses instead on the day-to-day lives of the nurses, who often worked impossible hours under nearly impossible conditions. Essig and her colleagues among the volunteer base hospital nursing staff bore their trials not without complaint but with determination and pride in their obvious importance to the war effort and to other Americans.

Like Essig, the great majority of nurses who served in the war were recruited by the American Red Cross. At first they were assigned directly to the base hospitals, as Essig was, later directly to the army or navy. Need for medical and nursing care soon became great in the army camps within the United States. Thousands of men died of pneumonia and meningitis without ever leaving the country. Many of the nurses waiting to be assigned to hospitals overseas were sent instead to the camps to work, and several lost their own lives as a result. In the fall of 1918, while Allied forces were gaining victories in Belgium, army nurses in camps at home dealt with the Spanish influenza epidemic under crowded and difficult conditions. They joined public

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<sup>7</sup> Chomel and Chomel, *Red Cross Chapter at Work*, 255-56; Hitz, *History of Base Hospital 32*, pp. 135-36.

<sup>8</sup> Chomel and Chomel, *Red Cross Chapter at Work*, 251-53.

<sup>9</sup> Hitz, *History of Base Hospital 32*, pp. 142-43, 156-58.

health workers to detect, isolate, and care for victims of typhoid, meningitis, and other contagious diseases.<sup>10</sup>

During the war the Red Cross also sent nurses to French army hospitals to help care for American wounded. A famous recruiting slogan for the Red Cross was "American nurses for American men." The importance of this practice becomes clear from the many letters written home by soldiers describing their relief at waking up in a hospital and hearing an American nurse speaking English.<sup>11</sup> Essig saw the problem in reverse. She dealt with Hindu, German, English, and French patients as well as American wounded and found it difficult to communicate with them.

Despite the dangers that Essig must have realized were involved in wartime nursing,<sup>12</sup> she records in her diary no period of hesitation, no qualms, no obstacles to her decision to accept Florence Martin's invitation to join the staff of Base Hospital 32. She considered it an honor. A somewhat proper but very human young woman, she did not disdain creature comforts, but her personal and professional ideals enabled her to forego them for a cause in which she believed. In July, 1917, she "reported in person to Miss Martin for personal interview," then returned to Elkhart to await her summons. The telegram arrived on September 6 with directions to "report to Miss Martin, City Hospital, Indianapolis—on Sept. 7, 11 A.M. to be sworn in—" A busy day and night ensued; in an emergency board meeting her responsibilities as superintendent were turned over to an assistant, and she tried to put her "house in order." Leaving Elkhart at 5:30 on the morning of September 7, Essig arrived in Indianapolis in time to take the oath of office. The standard military operating procedure of "hurry up and wait" went into effect, and after two nights and one gloomy day in a hotel a group of sixty nurses left Indianapolis by special Pullman on September 9 and arrived in Penn Station in New York City on Monday, September 10, at 8:00 a.m. In her diary Essig describes the arrival:

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<sup>10</sup> Ashburn, *History of the Medical Department of the United States Army*, 307-30. The United States surgeon general's report for 1919 indicated that while 52,423 men had died in battle, at sea, and as a result of wounds during 1917 and 1918, another 50,714 had died of disease. *Ibid.*, 318. See also Henry P. Davison, *The American Red Cross in the Great War* (New York, 1919), 84-89.

<sup>11</sup> Chomel and Chomel, *Red Cross Chapter at Work*, 247, 249; Davison, *American Red Cross in the Great War*, 89-90.

<sup>12</sup> Between 1917 and 1920, 197 nurses gave their lives in the course of their military service. Most died from disease or accidents. Many were decorated for valor, and several were awarded the Distinguished Service Cross. Davison, *American Red Cross in the Great War*, 92.

We lined up alphabetically—as we did later for endless experiences—marched by twos and followed the flag! . . . We waited ages and finally were taken to Grand Central Station where after more waiting we were finally taken to U.S. Army Hospital No 1 at Bainbridge Ave and Gunhill Road [in the Bronx]. Arrived in time for a late lunch and there began our taste of Army life.<sup>13</sup>

The Bronx barracks served as a mobilizing station for nurses, as did Ellis Island in New York Harbor. The nurses from Indiana joined 250 others who were already there, assigned twenty-five to a “ward,” each with a bed and chair, three dressers to a group. On September 13 Essig wrote: “My duties for the day were to sweep the ward and line up the beds, dressers and chairs. Every one makes his own bed & dusts—We all had *drill* in a near by field—learned to salute and to ‘suck in your belly’—We all returned mighty weary and sore of foot.”

On September 20, “Our uniforms arrived—Classy! . . . Gala occasion. Endless chatter, trying on, fixing marking and picture taking—”

After another week of “drill and duties,” the group moved again, this time to St. Mary’s Hospital in Hoboken, New Jersey, where the Catholic nursing sisters were responsible for housing the waiting nurses. Essig was “one of eleven crowded into one room over the laundry—formerly ‘Helps’ quarter—one narrow cot, a chair and 1 ft. of space each—” Thursday, October 4, Red Cross and Army Parade Day, was the highlight of this waiting period. Ten thousand women, including more than two thousand nurses, paraded down New York’s Fifth Avenue from 79th Street to Washington Arch to demonstrate their active support of the fighting men.<sup>14</sup> The nurses quartered in Hoboken joined their hospital units to march “69 blocks—16 abreast.”

The nurses for overseas duty followed the chief dignitaries and Sousa’s Band—each unit in different parade dress—ie—some in slickers, some in white uniform & cap—some in blue dress uniform—some with capes all blue—some with corner of

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<sup>13</sup> With the following exceptions all excerpts from Essig’s diary have been transcribed as nearly like the original as possible. Essig’s script is similar to printing, and she always used a capital “R” regardless of the location of the letter in a word. These have been lowercased unless a capital was grammatically correct. In a number of instances decisions concerning initial capitalization were arbitrary. Misspellings have been retained, as has Essig’s practice of using dashes instead of other forms of punctuation, even at the ends of sentences. If no punctuation was placed at the end of a sentence, a double space is used to indicate a break in thought. Explanatory material, complete names of individuals, omitted letters, or correct spellings of places have sometimes been inserted in brackets.

<sup>14</sup> Hitz, *History of Base Hospital 32*, p. 23. The number of women who marched is reported as fifteen thousand by Davison in *American Red Cross in the Great War*, opposite 86. In Essig’s diary the Red Cross Parade is erroneously cited as having occurred on Thursday, October 3. The dates for the entire week are mismatched with the days of the week.

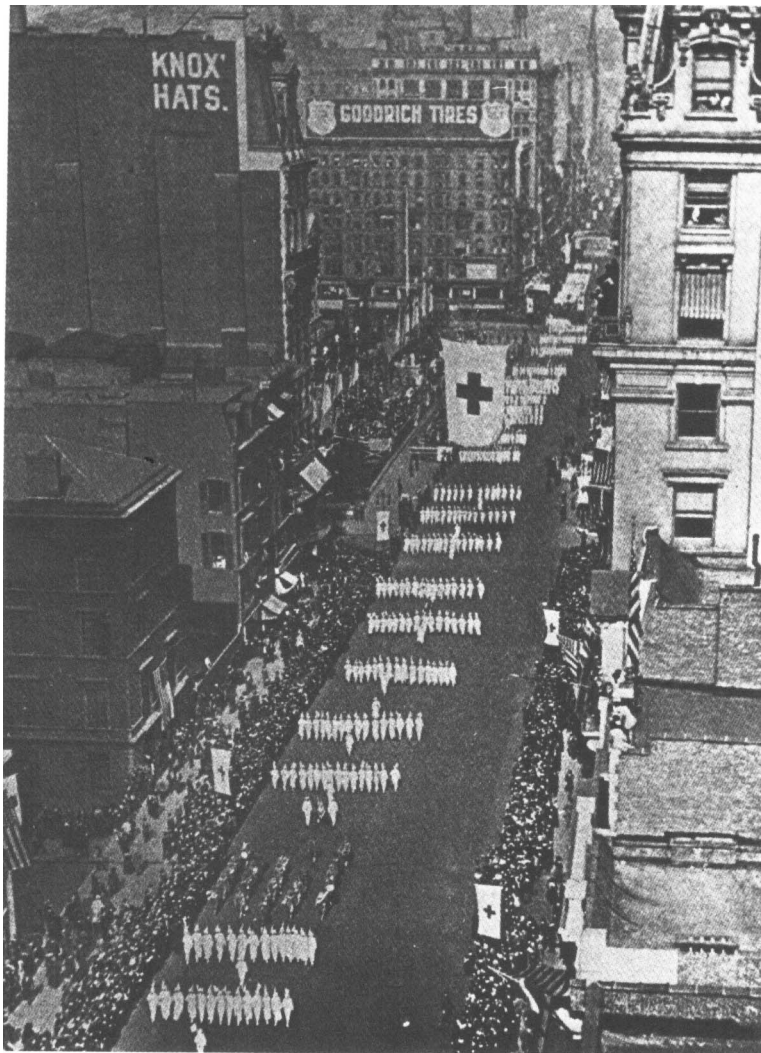
cape thrown back to show red lining, many variations. Our unit wore blue dress uniform—(no wrap) and dress hat—It was a gorgeous sight . . . It took 6 hours for the parade to pass any one point—"The most wonderful sight I ever hope to see . . ."

Three more weeks passed. The nurses spent their time after duties being entertained by friends at Overlook Hospital in Summit, New Jersey, and going on lunch and theater trips to New York. Activities were somewhat constrained by the fact that no one had yet been paid.

On October 19 Essig's group left Hoboken and was "nicely deposited on *Ellis Island*—one step nearer 'Over-There' "—with the rest of the personnel from Base Hospital 32. Essig reported: "This is a beautiful spot. The air is grand—a wonderful view of the Statue of Liberty. It is a view worth fighting for—" More visiting, dining, and sightseeing, with much partying and sharing of boxes of food from home, resulted in the lament, "Beautiful weather, good eats and I am getting *Fat*—" The monotony was somewhat relieved by daily French classes, which Essig described on November 3 as "progressing and leaving me in the rear." Later she wrote: "For class, two of the nurses hid under their beds—two staid in the bath room and others just disappeared—Out of a class of 19, 8 were present—Class is more unpopular than scrubbing—" On November 5 she commented: "Fine weather but we are sick of all this waiting and of being of no use to any one—and broke—I have just 24¢. The pay master's money ran out before he reached our unit—which means we will have to sign another pay roll—"

By the end of November, 1917, Christmas boxes from home began to arrive, and "In trying to eat everything, I broke off a front tooth, which means I must see a dentist—I look a sight—" Another period of Thanksgiving and birthday feasting, as well as several dental appointments, ended abruptly with orders for departure on December 3. Baggage space was limited, so extra clothing was hurriedly given away, mailed home, or worn in layers. "One of the nurses dumped a lot of nuts sent to me in her umbrella and we were glad to have them later when food was at a premium—"

The ship assigned to carry the personnel of Base Hospital 32 was the *George Washington*, an American transport that had recently been taken from the Germans and that carried approximately seven thousand passengers. Twenty days later the ship arrived safely at Brest in France, but the voyage was extremely rough. Essig and many others were seasick: "I fed the fishes all day and all night—I really wanted to die but lived to tell this tale . . . Nothing anyone can do—I must endure—Every one is most kind, but all I desire is to be left alone, and, if possible just



RED CROSS AND ARMY PARADE DAY  
NEW YORK CITY, OCTOBER 4, 1917

Reproduced from Henry P. Davison, *The American Red Cross in the Great War* (New York, 1920), opposite 86.





pass out . . . Oh for our Hospital—Good Old E.G.H.” Just as Essig began to recover enough to return to activity, the ship entered the Bay of Biscay and encountered a tremendous storm. Several lifeboats and crew members were reportedly washed overboard, and everyone was confined to cabins. Captain Carleton B. McCulloch, M.D., adjutant of the unit, later wrote a nine-stanza poem entitled “Lines Dedicated to the Bay of Biscay.” His general sentiments were summed up in the last stanza:

When the struggle is concluded and the victory is sure,  
The foe must take some punishment most grievous to endure;  
I'll offer this suggestion when the councillors convene—  
They be made to cross old Biscay in some Fall like Seventeen.<sup>15</sup>

On December 18 Essig wrote in her diary that she had been successful in bribing a porter with twenty-five cents to get her a sour pickle. “It was what I craved and needed and worth a dollar—” Her electrolyte balance was undoubtedly at least partially restored! The coast of Brittany was sighted on December 20, and the ship anchored in the Bay of Brest. Hospital personnel remained on board until December 24 while the thousands of troops disembarked.

An afternoon of sightseeing—at an old château in Brest—was followed by a two-day rail trip across northern France. Four nurses were locked into each compartment and given rations for the trip. “Attending to nature’s wants was a serious problem—Jam and Tomato Cans served our need—” Christmas Day brought a stop in a town where sandwiches could be purchased to supplement rations. Members of Base Hospital 32 communicated with each other “by sticking our heads out of the little window in our little doors—” The train ride ended in Contrexéville la Vosges at 3:00 a.m. on December 26. An unheated building recently vacated by French soldiers, with all toilets frozen, was the group’s lodging for the next two days. Essig wrote: “I slept all night in my sleeping-bag under my down comforter which had been brought all the way from home (not such a crazy idea as some had thought—).”

On December 28 the group moved up the hill to the buildings which would house Base Hospital 32. The town of Contrexéville, about forty miles southwest of Nancy, was a summer resort with a spa whose healing waters were shipped in bottles

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<sup>15</sup> Quoted in Hitz, *History of Base Hospital 32*, p. 26.

throughout France. The resort had three parks, tennis courts, and a casino with a theater, gaming rooms, and a salon. Hotels, villas, and small hostelrys, as well as a location fifty miles behind the front lines and near a railway, made the town suitable for a military hospital site. The French had been using some of the larger buildings as hospitals but had recently evacuated them for American use. Five of the buildings were assigned to Base Hospital 32. Two hotels were designated as surgical units and three as medical. Their planned capacity of five hundred was eventually increased to 1,250 beds. Some of the other buildings were assigned to Base Hospital 31 from Youngstown, Ohio. It took until March to organize and equip the buildings. Certain sections of the buildings and cellars were sealed for storage of what were believed to be art objects, wines, and other items for future peacetime use.<sup>16</sup>

Hospital equipment had arrived prior to personnel and was stored at a medical supply depot. The first task for the unit attached to Base Hospital 32 was to clean the buildings, recently abandoned by the French "in an extremely unsanitary condition." Refuse had to be removed; floors, windows, and woodwork washed; and plumbing, electrical work, and carpentry done before the buildings could be used as hospitals. Special lighting and wiring were needed for surgery and x-ray, and sterilizing equipment, as well as additional sinks and drains, had to be installed. This work was done during January by the enlisted men.<sup>17</sup>

Essig and three other nurses were assigned to a room on the eighth floor of a hotel at the top of a hill. She wrote: "In peacetime I am sure we would pay a handsome price for our room—especially the view—" Having once more unpacked, she and a small group were notified at 3:00 p.m. on December 29 that they would form a temporary relief detachment to go to Base Hospital 15, the Roosevelt Hospital unit from New York, then in Chaumont, France.

At 4:30 the next morning, the group of thirty repacked their belongings and left by truck for the train. Chief Nurse Florence Martin gave Essig the travel orders and placed her in charge of the detachment. Another difficult trip ensued.

We boarded the train at 7:00. Changed trains at Nully and again at Longres [Langres]—Some of the nurses obstinate—two refused to change at Longres and I had to grab their baggage off the train and they followed their baggage . . . We

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<sup>16</sup> *Ibid.*, 45-48.

<sup>17</sup> *Ibid.*, 50-52.

waited in Longres from 11:30 until 6:00 P.M.—Terribly cold and damp—no heat . . . Some of girls climbed the steep hill from station to village—City sets on a high hill surrounded with a wall built by Ceasar . . . I tried to make the hill but something went hay wire inside me—terribly nauseated and pain in left side—We finally arrived at Chaumont—[General John J.] Pershing's Headquarters—at 7:00 P.M. very weary *Sore* and Cold. Total distance from Contrexville—as the CROW flies—35 miles—I thought we traveled at least 10 times that—

In the nurses' quarters at Base Hospital 15 Essig and another nurse shared a six-bed ward with four of the Roosevelt nurses. "After our satisfying repast Miss Francis, Chief Nurse, talked with us, giving a list of dos and donts—She delegated me to be in charge of the nurses while here—which responsibility I do not want, and which a few of the nurses I feel would enjoy having . . ." Work began the next morning, December 31. The hospital was overcrowded and had little equipment, and the new nurses were assigned to various pavilions to relieve and do cleaning. Essig commented:

The place looks hopeless—No conveniences—Very little equipment and so many patients—everything so dirty—made me think of Florence Nightingale and her experiences at Crimea! . . . The present rush of work is due to a tragic hike—ordered by some commanding officer—for members of the 42nd Div. across France—Boys were unduly exposed to freezing weather—pneumonia, frozen feet, bad ears (mastoiditis), meningitis etc.—not to mention the very common cold—<sup>18</sup>

Since it was New Year's Eve,

The regular nurses—mostly Roosevelt Hospital graduates gave a dance for the officers of Base #15—Base #32 nurses were invited to *not* attend—Miss Francis was afraid there would be too many women for the men who had been invited—Later—however—about 10 P.M. some of the nurses followed by Miss Francis came to our nurses insisting they attend since they had more men than women Our nurses went to bed instead—at least most of them did. The affair lasted most of the night and from our quarters sounded pretty wild—A great way to welcome in a New Year especially in such a terrible time—The music was good—provided by 101st Regimental Band—Too much drinking and smoking—None of our nurses smoke and of course are looked upon as old foggies from the wild and wooly west!

January, 1918, began cold and damp. Essig found herself in an uncomfortable position between sick and complaining nurses and the chief nurse of Base Hospital 15. On January 2 she reported:

Many of our group have colds and are feeling badly Much griping . . . Unable to get a doctor to see the sick ones and no medications—I know they hold me responsible for all that goes wrong . . . [on January 3] I listened to endless com-

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<sup>18</sup> For information concerning the 42nd "Rainbow" Division and concerning battles and wartime strategy during World War I, see Robert H. Ferrell, *Woodrow Wilson and World War I, 1917-1921* (New York, 1985), 56-57, 71-73, 81-83, *passim*.

plaints and reported sick nurses to *Miss Charles*—asst chief nurse—I made rounds later with *Dr. Martin* and tried to secure medications . . . *Miss* [Nellie M.] *Birch* furious after her first night on duty. Says sanitary conditions are terrible—no precautions possible against infection—She knows this will be the end for all of us. I feel helpless—I think *Miss Francis* holds me responsible for so much complaining—I wish I could care for patients

The next weeks were occupied with trying to keep warm, do laundry, get medicine for the sick nurses, and keep the group functioning. On January 8 *Essig* wrote: "Snowing and much colder. Everyone sick and complaining I feel disgusted and discouraged—We are surely not much Help to anyone here. I want to go on duty but *Miss Francis* insists I am her assistant and in charge of B.H. 32 nurses The nurses do not agree with her . . ." On January 9 she continued: "I pleaded with *Miss Francis* to put me on regular duty—just any thing—she said she would—Food not so good the cook is sick!" *Essig's* request was granted on January 10 when she was assigned to duty in the sick officers' pavilion. Several nurses had measles and one had mumps, but these were apparently confined and did not spread. By January 15 more friction had developed between the Roosevelt unit and the nurses from Base Hospital 32.

Miserable day—raining ice-water—Only three patients now. One of Roosevelt nurses . . . thinks it is a disgrace to their nurses to have to work under me and does not lose an opportunity to insult me. She refuses to carry out any order that I may post—(She thinks Indians still roam the middle west and Chicago has only racketeers—ignorance is prevalent)

The January rain produced mud, but off-duty hours were used for sightseeing, laundry, purchase of souvenirs, and visits to a dentist. *Essig* was still dealing with the front tooth that she had broken just before leaving New York and was attempting to have root canal work done whenever she could get away for appointments. Visits to the hot baths in the town were not frequent but were greatly enjoyed. On January 28 she commented: "I was told I am supervisor of Officer's Bldg—*Miss* [name deleted] went to the Commanding Officer with her troubles—and in return he had her transferred to the worst Bldg on the grounds—on night duty—I am surely sorry this unpleasantness had to happen because of me—" By January 31 she was forecasting the end of her stay in Chaumont.

Ten orthopedic nurses arrived today for regular duty. The[y] are a fine group—have been on duty in Paris. Also five of Roosevelt nurses returned from Military Hospital #3 in Paris where they have been on detached service. B.H. #15 family is increasing, so we think our days here are numbered. *Miss Francis* has asked me to ask for transfer to B.H. #15 and stay on—How I would love to do just that but it doesn't seem to be the right thing to do.

On February 4, with no warning, Essig's group was ordered off duty to pack for the return to Contrexéville. They arrived in that town at 9:00 p.m.; but no one seemed to be expecting them, and accommodations were again sparse.

Our room is as bare as a barn in "*Hotel Jeanne Pierre*," third floor front—We each have a miserable French cot, a chair and that is all—we must buy pillows we have nothing but a straw bolster—and I refuse to put my head on that—It seems strange that some units are well provided for and we have nothing—I almost wish I had staid in Chaumont.

On February 6 she reported:

I have a boil on my neck which is not pleasant . . . The utility room (?) opens into Mary Housers and my room—It is the only place where the 24 Nurses living on our floor can congregate around a little stove (usually heatless) to take baths, wash, visit and such—It is like a continuous "coffee clotch" It takes an expert to keep even a semblance of a fire in the peanut of a stove—No rest in our room—but we do have some fun swapping yarns—A sheet strung across one corner of the room provides the bathing facility! The cord occasionally breaks and furnishes amusement for all but the bather.

After two more weeks of cleaning five hotels, including the frozen toilets, "Miss Martin ordered that nurses were no longer to scrub floors or wash wood-work—" Essig continued to visit a dentist for root canal work: "how it did hurt—no Pain Killer in the army—" The monotony was relieved by occasional packages from home with sweets and such amenities as bath soap and toothpaste. Essig was then assigned to the second floor of the Cosmopolitan Hotel, the main surgical building, which could accommodate a total of five hundred patients. The weather continued wet and cold, and she wrote: "The rain continues—our Bldgs are so very cold and damp—Water drips from the walls—especially bad in our patients room . . . I went to church at 10:30 Very fine talk on Faith and we surely need it—"

March brought some relief from the weather, and spirits rose. Short excursions to local sights to buy souvenirs helped pass the time. "Little rivers (?) of stench flow down each side of the Roads Sanitation is awful—not up to U.S.A. Standards." Patients in the hospital were still mainly sick personnel. Finally, on March 23, she reported: "We received our first real convoy—about 300 All 42nd Div.—Rainbow Div. I received 68 on my floor mostly mustard gas burns—Terrific suffering—"

On March 24 she continued:

What a change from last week. 82 patients on my floor—About 20 doctors assigned to my floor All want something, every place—*Stat*—We do not have supplies nor equipment to meet their demands This type of burn is terrible and nothing seems to give relief—Eye and genitalia burns are most painful—Terrible situation—The patients are good scouts—and most appreciative—So happy to be in

the hands of U.S.A. They came to us from a French Evacuation Hospital and they say nothing was done for them and only thin soup was given to drink—Most of the boys are from Iowa, New York and Wisconsin—

By the end of March there were ninety-one patients on the floor. As charge nurse, Essig's chief duty was to "secure endless supplies and keep records adequately." She lamented: "I would so love to do more for the boys but others are responsible for nursing care—Two meals a day are all I've been getting—I am dead tired—the corridors are so long and the walk from Nurses' Quarters to "Cosmo" is uphill all the way and much too long—" On Easter Day the nurses were awakened at 5:45 a.m. by Easter hymns being played on four horns. "It sounded Heavenly." But working conditions were still difficult:

We use endless surgical supplies and at this rate I don't see how we can keep going—We have no water in our building (frozen or turned off for the winter) Every drop we use must be carried from outside—We try to keep one bath Tub filled—heat what little we can on sterno stove, using denatured alcohol . . . The orderlies have to work terribly hard—beside carrying the water up four flights of stairs they have to carry up all the food and the fuel for our fire place—Convalescents help as they can—but so far we have had few convalescents.

On April 4 Essig wrote that she was "very much upset" because she had been transferred to a convalescent floor at the top of the Cosmopolitan and had eight flights of stairs to climb. "*I don't like it*—I worked so hard to get things organized and clean on 2nd Eme—now I will have the same on this floor—Miss Martin *said* the change was made, because I had worked so much harder than other nurses and she felt I should take it easier for awhile—I doubt her reason, however—" Shortly after the transfer Essig herself became a patient and was isolated with erysipelas, a streptococcal infection with localized inflammation of skin and subcutaneous tissues, as well as systemic symptoms. Her "*very sore face*" was treated with "Continuous Mag. Sulp [magnesium sulphate] dressing heated on Sterno—Painful ordeal—and lonely—" Five days later she returned to duty and the eye, ear, nose, and throat specialist said that she had not had erysipelas, but "Furunculosis of Nose."

At the beginning of May a United States Commissary opened, and Essig commented: "we can buy many things we do not need—candy and cigarettes to the desires—me for candy—our nurses do not smoke cigarettes—(with two exceptions)—" May passed with few patients being admitted. Mother's Day, Joan of Arc Day, and opening of the resort theater by the Red Cross were all celebrated. Memorial Day was the most elaborate since two American soldiers had been buried in the Contrexéville cemetery.

After the German drive on the Marne in the spring of 1918, wounded of all nationalities arrived in trainloads. The admitting corpsmen took them to the bathhouse, a convenient conversion of the spa, and scraped off the mud from the trenches. Each patient was given a Red Cross bag for his personal belongings, as well as pajamas, bathrobe, slippers, towel, and washcloth. Clothes were sent to a sterilizer to get rid of germs and the ever-present lice. Wounds were redressed and x-rayed for shrapnel, and surgery was done if necessary. Patients were either sent back to the lines or transferred to convalescent hospitals, so that beds at the base hospital could be kept open for new convoys. Many stories were written home of the confusion and humorous incidents that resulted from dealing with multilingual patients and their unfamiliarity with American determination to disinfect everything possible.<sup>19</sup>

In early June Base Hospital 32 received two convoys of French and English wounded. Most had gunshot and shrapnel wounds, but some had been gassed or were shell-shocked. Essig's difficulty in communicating with the French soldiers motivated her to resume studying French. She admitted: "I am not an apt pupil."

When evacuation hospitals in the area became filled early in June, the designation of Base Hospital 32 was changed to Evacuation, which meant that the wounded were received directly from the field hospitals and the dressing stations at the front lines. On June 19 a list of nurses who were "to be ready to leave on one hour's notice for service at the front" was posted. Essig wrote: "I wish I might be on the list but I am not." On June 25 a large convoy of wounded arrived, and the German prisoners were put on Essig's floor.

I was allowed to care for them—Twelve Boche—under guard . . . The Germans are in bad shape—and require much care—All have high temperatures—all very young—they seem to be afraid of me—One who talks English says they have been told repeatedly that if they landed in a U.S. Hospital they would be poisoned . . . One of the prisoners needs considerable care—His face most of it was shot away and feeding is a problem—He is most grateful and is improving—

At last, in July, Essig's tooth was fixed; the gold cost \$5.00. She did not enjoy the teasing that ensued. Further problems required a wisdom tooth extraction shortly thereafter. On the seventeenth she reported standing in line for a bath at the Red Cross bathhouse with Mrs. Belmont Tiffany, a New York society

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<sup>19</sup> Chomel and Chomel, *Red Cross Chapter at Work*, 250-51; Hitz, *History of Base Hospital 32*, p. 78-79.

matron who became a Red Cross leader abroad. Essig felt "almost like somebody to be in such distinguished . . . [company]—War is truly a leveling influence."

As a result of the fighting around Château-Thierry in June of 1918, the number of seriously wounded soldiers arriving directly from the front steadily increased, and some busy weeks ensued. Many were evacuated after treatment, but many required surgery and intensive care before being moved. On July 24 Essig wrote:

We are very busy All beds are filled and every staff member is working the limit. The stretcher bearers are working very hard—They have to carry the patients up the 8 flights of stairs, then down 7 flights to operating rooms and back up the 7 flights to bed—I surely pity them . . . Our census today is 130 on my floor—I shudder when I have time to think of what they have been through—The patients are all cheerful and so glad to have such a "swell place"—many are lying on straw ticks on the floor—Much better than lying out on the battlefield waiting for some one to rescue them—they say—Last night 14 of my patients went to surgery—three surgical teams worked all night—My patients were all back from surgery by 11 P.M. and it meant a busy night for me and my one orderly—All patients had eaten red beans for supper, and had ether anesthesia on full stomach—so we had some really sick boys until the red beans were eliminated—When awake they gave no trouble and were wanting to help—One fellow with a T. of 104.6 at mid night I watched carefully—he slept finally and at 5 A.M. I found him sitting on the edge of his bed eating a chocolate bar left on his bed by a Red Cross worker—Later he got up on his own power and went to the toilet—His back was riddled with shrapnel and surgery had made two long incisions the length and breadth of his back—and had inserted several Dakin tubes which I irrigated every two hours—I was unable to comprehend their endurance—Several were of this fellows caliber—Another badly wounded fellow, who had been lying on the floor before surgery, I thought should have a bed after surgery and made a switch with a less serious patient—but—when the poor sick fellow returned, he absolutely refused to keep the bed *and* when he awakened, I had to make another switch and let him rest in peace on his *own straw-tick on the floor*—Dakin tubes and all—He slept after the move until morning and never roused even when I irrigated the tubes—Such guts!

Convoys of wounded continued to arrive. On July 29 Essig commented:

Our census increases day by day. We receive and evacuate every other day. More arrive than are sent away—My floor is fairly quiet after mid night—Most of the patients sleep through Dakin irrigations, yet when they are awake they fuss considerably about treatments—Last Thursday we received a large convoy at an early morning hour—and we staid on duty until noon—17 hr. stretch—off duty until after our evening meal—That evening 16 of our patients went to surgery—no operating done after 11 P.M. These are busy nights and busier days. Miss [Mary L.] Elder, charge nurse is anxious for me to get off night duty and relieve her—Says she cant take it—Our patients are coming directly from *The Front* and they say it is terrible—lying there waiting for help to come—All come in awful condition—no previous care has been given to their wounds—It takes a lot of soaking to clean their wounds, dried blood, filth and dirt and lice—The bath-house is not able to cope with the situation and neither can our limited staff and walking patients—



Four of our nurses left for the front—Conditions are worse there—We do have a roof, a floor and everyone is fed after a fashion. No one works less than 12 hrs. in 24 and most of us do more—I see no one these days but my patients—I am happier than any time since in France—I feel I am really needed. No deaths yet.

By the end of July the number of patients on the floor was 140, and all leaves were cancelled. Everyone's nerves were frayed. "Miss Elder said she never knew things could be so bad. It is sad that some nurses refuse to take orders from her—and say to her as they did to me—'You don't *rate* any more than I, and I'll take no orders from you'—Thank God that type are a minority, but they make our work most difficult—"

By August the numbers of wounded decreased enough to allow for leaves and time for attention to personal needs. Essig had her hair shampooed and wondered at the ability of the French to get even long hair clean with only two quarts of water. A week of sightseeing in southern France at the end of August included plenty of sleep, food, and shopping. In the resort village of Chamonix Essig watched the full moon rise over Mont Blanc, and was "so over come I could not sleep—The nearest Heaven I ever hope to be in this world—" The trip culminated with a weekend in Paris and a whirlwind tour of the major attractions, as well as a trip to Versailles. Essig observed: "French women are surely temptresses and it is small wonder if our boys go wrong—in Paris—Soldiers—U.S.A—are not given passes to Paris but they get there AWOL."

September was quiet and cold. Essig relieved a night supervisor on leave and was in charge of the five buildings comprising Base Hospital 32. She refused the permanent assignment, as she did not like either night duty or the supervisory responsibility. There was a celebration to commemorate the first anniversary of their taking the Oath of Allegiance.

The end of September was the beginning of the "Big Drive." The Meuse-Argonne campaign lasted six weeks and involved over one million American troops. They were successful in penetrating the Argonne forest held by the German army and in reaching the railway bringing troops and supplies to the enemy. American losses were approximately 117,000 dead or wounded.<sup>20</sup> The number of patients on Essig's floor rose to 175, and another frantic period of caring for many seriously wounded ensued. On September 30 she wrote:

Our men are winning but the price is too high . . . One is never equipped nor prepared for such Hellishness—Never thought I could work so hard—Many of our

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<sup>20</sup> Ferrell, *Woodrow Wilson and World War I*, 81-83.

staff are off duty sick and for a couple of days I thought I could not take it but am up and at it . . . We have 175 patients on our floor—all have been wounded and most require dressing daily—beside serving meals and the innumerable things that should be done . . . I am responsible for a lot of clerical work and for keeping up supplies—For the first time we did get a few baths given today—The patients are so patient and so grateful for the little they receive They say “This is so much better than the trenches”

Florence Martin and many other observers also told of the relief and gratitude of the wounded American soldiers when they found themselves in the care of American nurses. Martin wrote:

Ever since we have been here we have had letters and letters telling us what wonderful, unselfish work we are doing. We all have heard this until we are ashamed. . . . we are getting what I wish many at home who are working quite as hard as we, could have, and that is the privilege of being right here in the midst of things.<sup>21</sup>

October brought many more wounded to Base Hospital 32. On October 4, 1918, Essig commented:

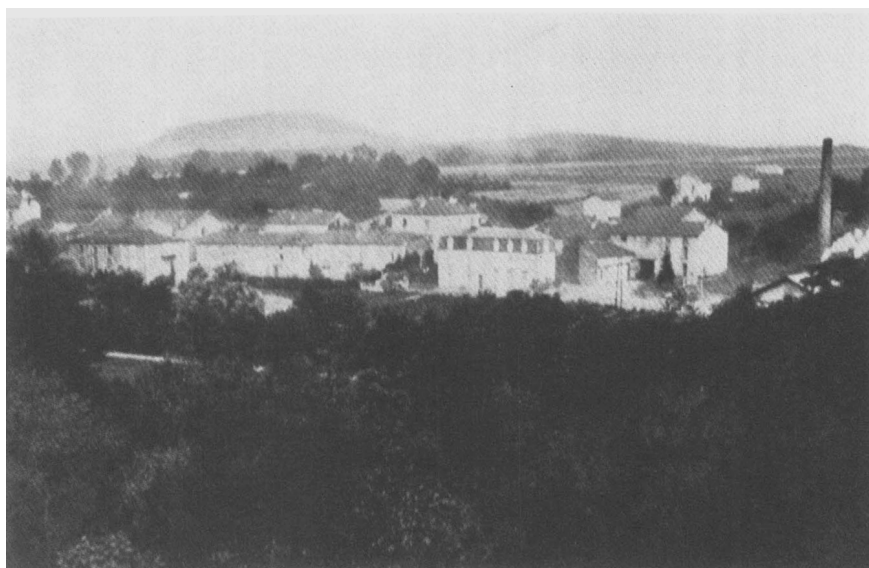
The rush continues only more of it—Miss Martin drives us off duty at 8 P.M.—but our hours of duty are without end—We are never finished—We receive [*sic*] new patients and discharge all that we can—The *Bath-House* is a Godsend—The boys are *usually* taken to the B.H.—shed their *lousy* uniforms are given Baths and clean pajamas & bath robes—before coming to us—Their uniforms are sterilized to kill the cooties and when discharged they leave in some awful shrunken outfits—To be free of cooties even for a short time is heavenly the boys say—A bath, clean clothes, wounds dressed and a few square meals—make new men of them—I never saw hungry men—Food is carried up 8 flights of stairs in huge garbage cans and served on the men’s mess kit—the servings are a mess but the men don’t seem to mind—Anderson starts at the front end of the corridor and ends up at the rear where he turns over all the food left to the German prisoners—They fare well—and in return have to wash the cans to be returned to the kitchen—They wouldn’t think of running away—haven’t had it so good in a long time in spite of some of the awful injuries—

On October 7, 1918, she continued:

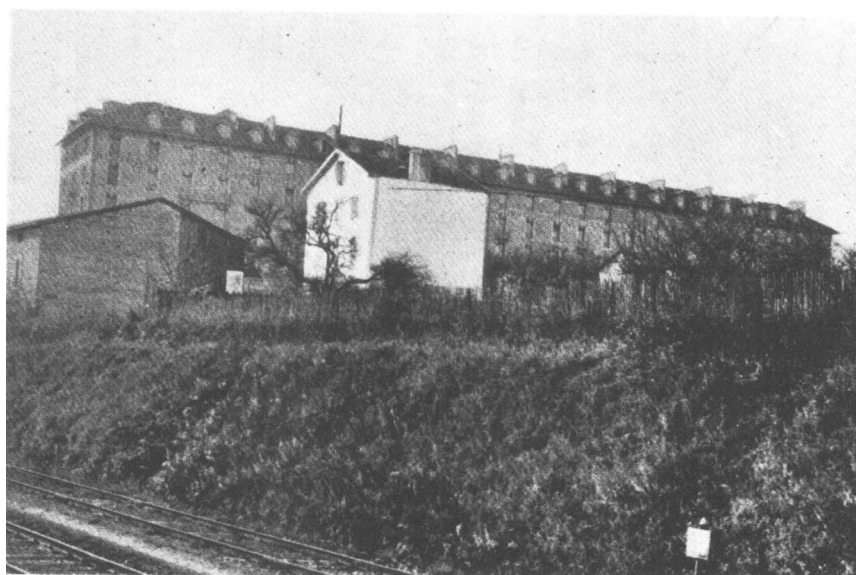
We have 160 patients and 40 have Flu beside their wounds. The odors are bad. Even the Dakin’s Sol. on wounds cannot overcome the odors of pus—sweat and lysol—The latter is our only way of sterilizing equipment and instruments—no *boiling* facilities We are working 12-14 hrs—and it is impossible to walk down 8 flights and 1/2 mile to nurses Quarters *for meals* with the thought of having to walk back up the hills, up 8 flights of stairs again—We eat as we work—grab what we can—Some of our personnel are very sick—

The hospital’s capacity was further taxed by the influenza epidemic that affected both patients and staff. Many other diseases complicated the task of caring for the sick and wounded, including diphtheria, malaria, mumps, rheumatic fever, tuberculosis,

<sup>21</sup> Quoted in Chomel and Chomel, *Red Cross Chapter at Work*, 247.

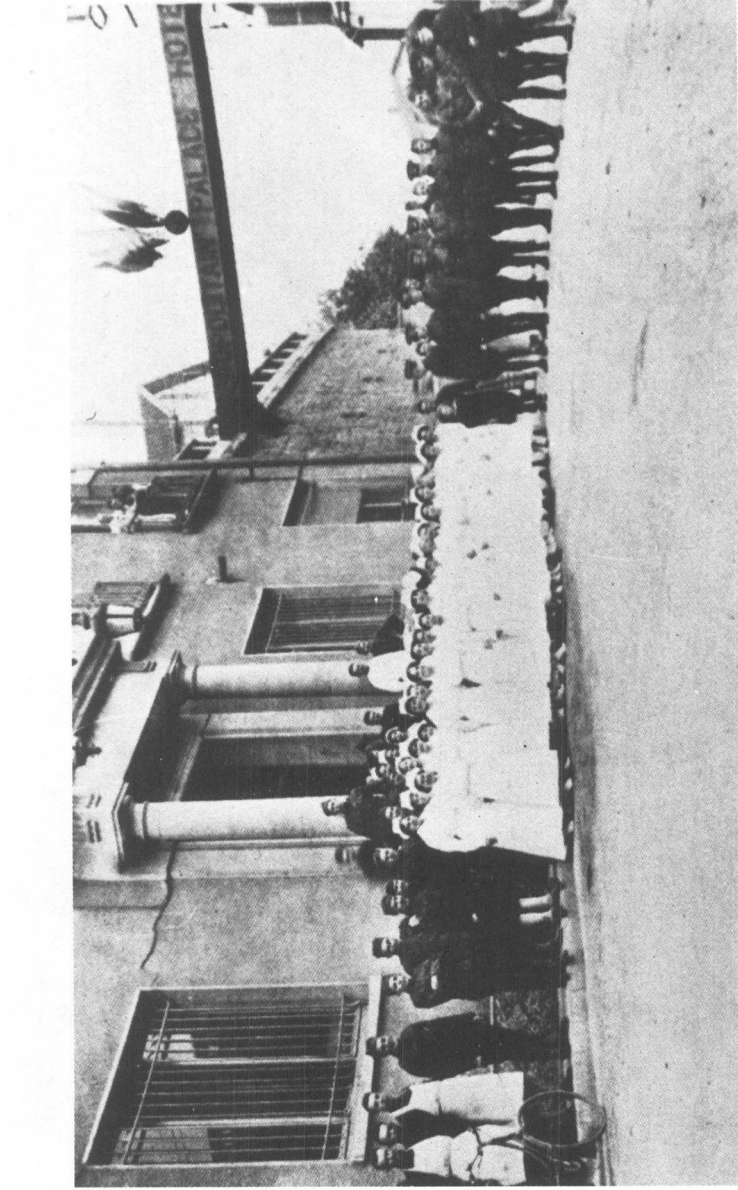


CONTREXÉVILLE, FRANCE, LOOKING TOWARD VITTEL



HOSPITAL A, COSMOPOLITAN PALACE HOTEL  
CONTREXÉVILLE, FRANCE

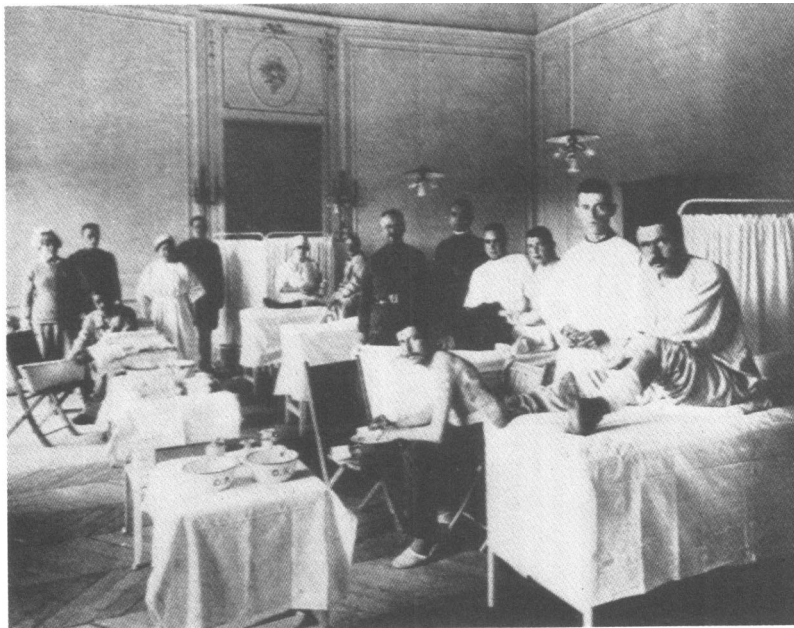
The photographs above and those on the following five pages were reproduced from Benjamin D. Hitz, comp. and ed., *A History of Base Hospital 32* . . . (Indianapolis, 1922), opposite 21, 100, 76, 103, 81, 132, 141, 199.



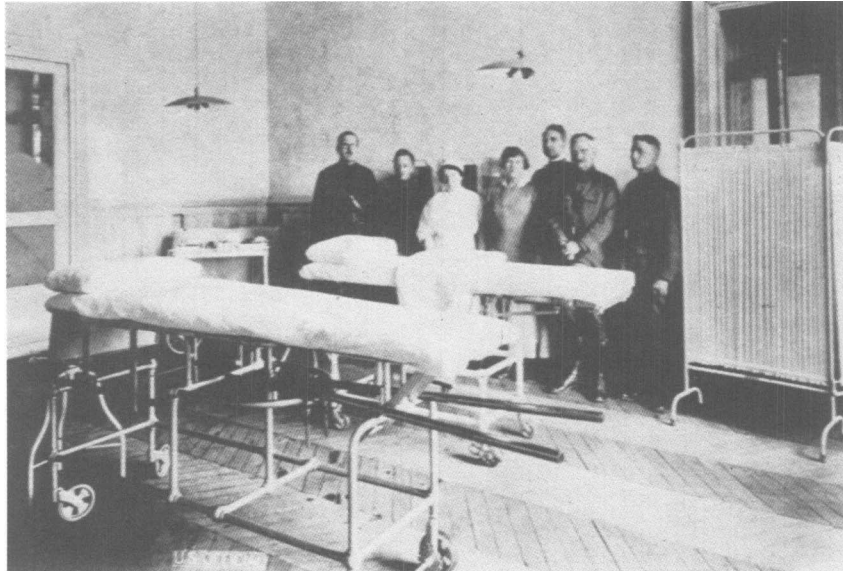
PERSONNEL, HOSPITAL A



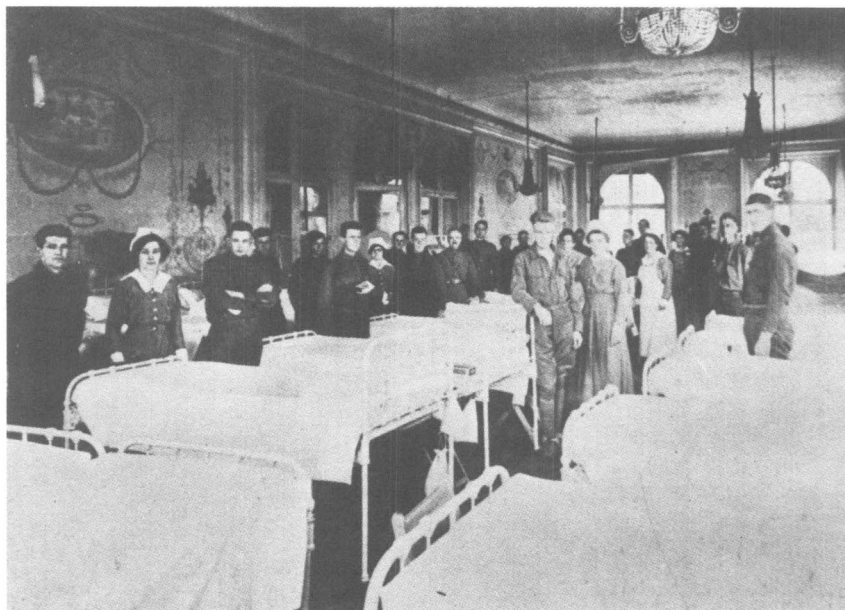
UNLOADING PATIENTS AT THE BATH HOUSE



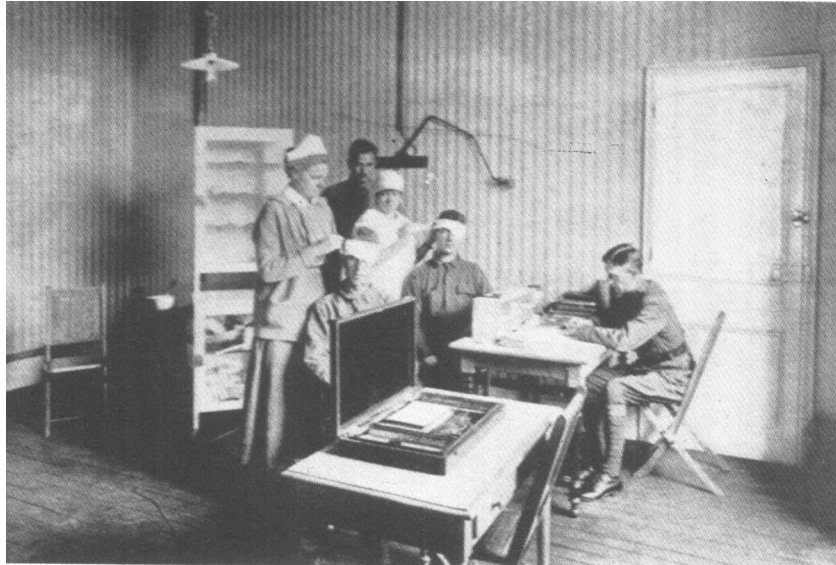
DRESSING ROOM, HOSPITAL A



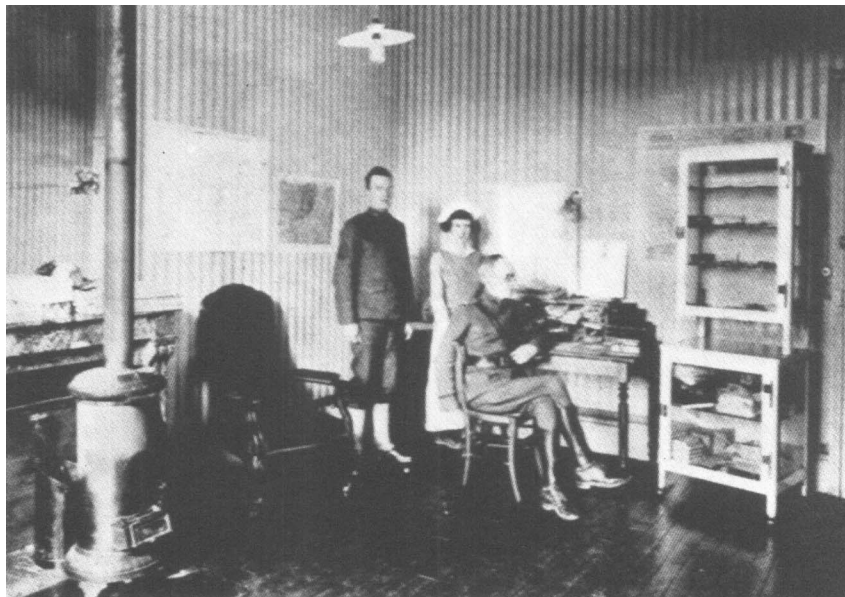
MAIN SURGERY, HOSPITAL A



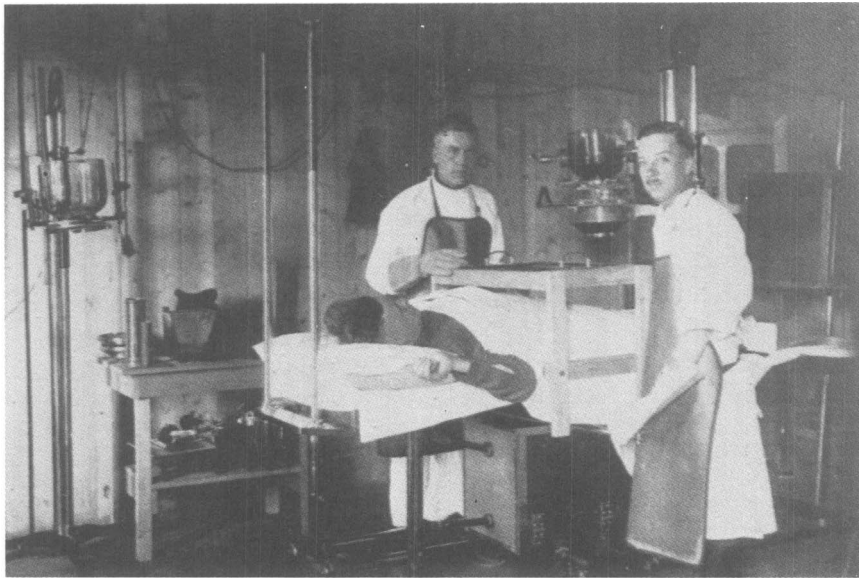
LARGE SURGICAL WARD, HOSPITAL A



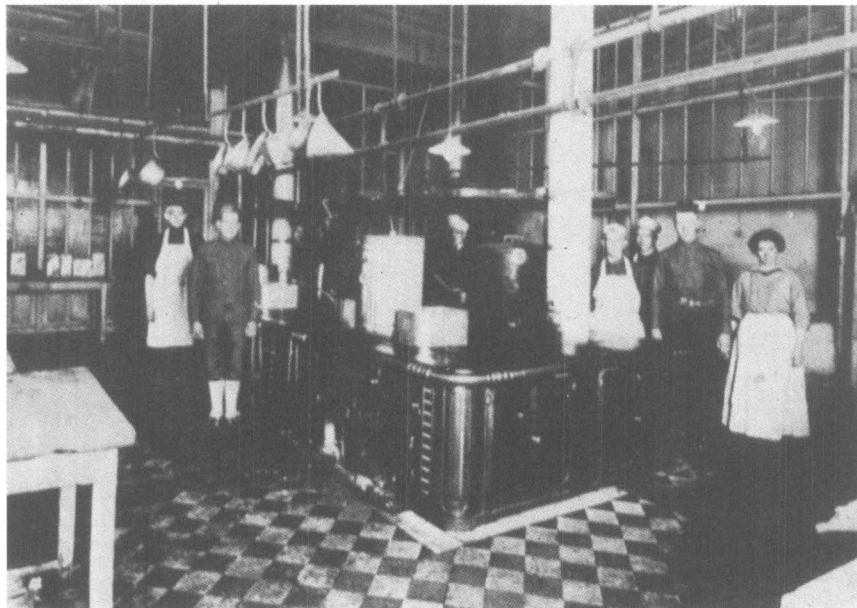
EYE DEPARTMENT, HOSPITAL A



NOSE, THROAT, AND EAR DEPARTMENT, HOSPITAL A



X-RAY DEPARTMENT, HOSPITAL A



KITCHEN, HOSPITAL A



arthritis, tonsillitis, bronchitis, pneumonia, and enteritis. Encephalitis was common, as was trench fever, a viral infection transmitted by lice, and trench foot which brought pain, burning, redness, and then cyanosis of the feet and was caused by prolonged exposure to wet and cold.<sup>22</sup>

The press of patients continued, with rumors of peace to encourage everyone. Near the end of October Essig herself was feeling "rotten" but took quinine and aspirin, did not tell anyone, and kept working. "I am not satisfied with any of the care we are able to give—but everyone is doing his best and the patients are grand—Weather is cold and rainy—" On November 10 she saw a soldier from home: "Frank Anderson—an Elkhart fellow—arrived on our floor yesterday I tried to do everything possible for him and gave him the afghan sent me by the Shiloh Field Post—He was most appreciative—It was good to see someone from home—Much talk of *Peace*."

The Armistice ending the war was signed in November, but the work, the cold, the frozen pipes, and the eight-flight climb continued. Sick and wounded from what was now called the Army of Occupation kept the patient count steady. On December 6 the remaining forty patients were discharged, and the floor prepared for closing. On December 8, 103 new patients were admitted. "None of the patients is very sick but all had to have beds, pajamas, bath robes, towels, blankets and all had to be fed—as usual they were straved [*sic*]—I had one nurse to help me—I did the ordering and dressed wounds as necessary." The cold, the rain, and the mud also continued; but Christmas boxes arrived, and festivities of the season began. The prisoners were still in residence. "The German patients—now on 2nd Floor had a big celebration—Beautiful decorations—a crèche and everything—The[y] sang carols and seemed happier than anyone else!—The nurses gave them Amer Cigarettes and they were delighted—"

By the middle of January, 1919, all patients had been discharged, and another period of waiting, of rumors, and of moving in bits and pieces began. On February 6, 1919, Essig wrote: "The Hospitals have all been closed and equipment has been shipped. There are only the various details, ie; coal, ashes, water and food to supply our needs—The days seem so very long and—cold—Every thing is frozen up except one Toilet!"

At last, on February 20, the remaining personnel received orders to move. Several train trips and cold nights later they

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<sup>22</sup> Hitz, *History of Base Hospital 32*, p. 111-29; Ashburn, *History of the Medical Department of the United States Army*, 352-55.

arrived in Brest to begin the long voyage home on the *America* on March 3, 1919. On February 23 Essig reported hearing that Jane A. Delano, chairman of the Red Cross Nursing Service, had been operated on for mastoiditis at Savenay, where "she had been making a personal survey of the nursing situation in France prior to being stricken—" Essig later added to the diary that Delano had died at Savenay on April 15, 1919.<sup>23</sup>

The homeward voyage was as uncomfortable as the voyage to France. There were twenty-seven nurses assigned to one stateroom. The ship also carried one thousand patients as well as the 104th Field Artillery of the 28th Division. This was the first combat division to return from France, and New York City was preparing to give them an enthusiastic welcome.

I left Brest feeling on top of the world but not for long—Why should any one with a cast iron stomach ordinarily get so desperately sick and want to die and end it all. . . .

I have been sick, sicker, sickest off and on—Have existed on sour pickles, salty crackers mostly some grapefruit and orange—Have kept to my bunk. So long as I lie flat on my back all is well . . .—

On March 13, 1919, the ship docked at Hoboken. "What a grand and glorious sight the *Statue of Liberty*! I was out on deck and missed nothing of our entry into the Harbor—All so wonderful—What an experience for little M.E.!"

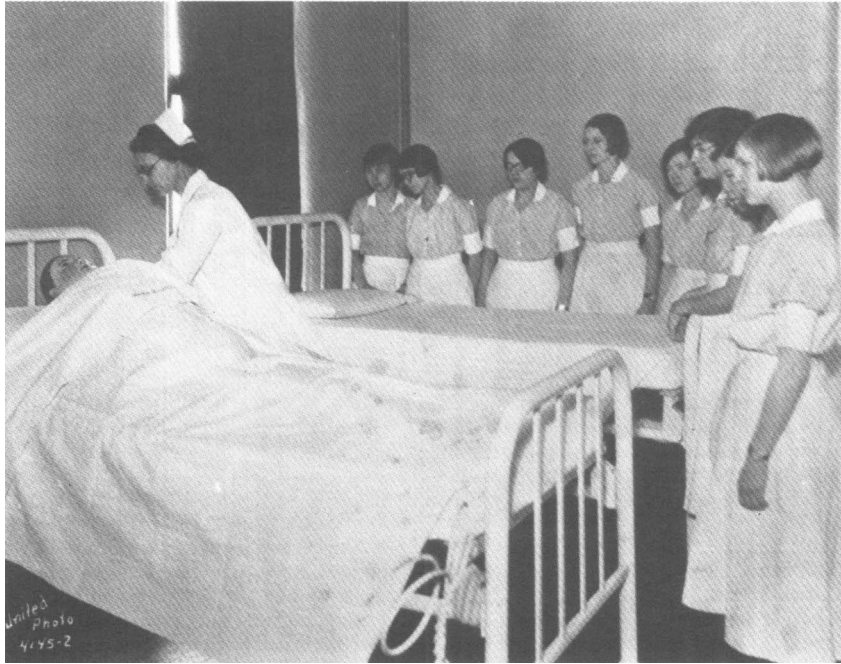
The next few days were spent eating, resting, shopping, and renewing friendships. The transition time was apparently not free of difficulty. A cryptic diary entry for March 15 summarized: "It was not the happiest of days—our first Sunday back in U.S.A. but we expected too much—We are all human . . ."

On March 18, 1919, Essig lamented:

We had our Physicals and hope to leave soon—We had to turn in our Red Cross belongings—It broke my heart to turn in my precious cape—Some simply said they were "lost in action" but I could not say that—much as I wanted to keep it—History was all wrapped up in that cape—with all the holes burnt into the lower edge where it flipped against our little stoves—Never a day that it had not been on duty with me—my faithful friend—

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<sup>23</sup> Jane A. Delano was superintendent of the Army Nurse Corps from 1909 to 1912. She resigned this position in 1912 to become chairman of the Red Cross Nursing Service. When the United States entered World War I, eight thousand nurses had already been prepared to serve. During the war Delano helped supply twenty thousand nurses for service. Buried at Savenay and later reinterred at Arlington National Cemetery, Delano was admitted into the Hall of Fame of the American Nurses' Association in 1982. American Nurses' Association, *Nursing Hall of Fame* (Kansas City, Mo., 1982), 5. See also Davison, *American Red Cross in the Great War*, 92.



MAUDE FRANCES ESSIG AT THE BROKAW HOSPITAL  
SCHOOL OF NURSING, NORMAL, ILLINOIS, C. 1926

Courtesy Alma S. Woolley.

After final clearing of physicals, Essig left New York and arrived in Elkhart, Indiana, at 4:15 p.m. on March 22, 1919. The diary ends: "Such an exciting time—I felt over whelmed—Everyone seemed glad to see me back and needless to say *I am DELighted to Be Back Home*[.]

*Fini*"

### Epilog

Following the war Essig, like many of her wartime compatriots, turned to administrative and teaching duties in the nursing field.<sup>24</sup> From 1920 to 1922 Essig resumed her position as

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<sup>24</sup> Throughout World War I leaders in the nursing profession in the United States challenged colleagues to use their experiences in Europe to enhance and upgrade the nursing profession. By proving the usefulness of their formal education during the war, nurses could insure increases not only in the nursing

director of nursing at Elkhart General Hospital. Then, in 1924, she became director of the Brokaw Hospital School of Nursing in Normal, Illinois; director of nursing at the hospital; then administrator of the hospital from 1930 to 1940. During World War II she moved to Passavant Memorial Hospital in Chicago as assistant director of nursing.<sup>25</sup> She retired from Passavant in 1948, and in 1952 she went to live at the Veterans Administration Center in Dayton, Ohio, a retirement home for persons with military service. She remained there until her death in September, 1981. Essig was buried in the National Military Cemetery adjoining the center as she had requested.

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ranks but also in the money needed to improve schools of nursing. Discharged nurses were urged to put their wartime training to use in administrative and-teaching positions in nursing schools and in public health work. Especially important in promoting these ideas were Delano and Isabel Stewart, head of the Department of Nursing Education at Columbia University. See Isabel Stewart, "Testing the Nursing Spirit," *American Journal of Nursing*, XVII (May, 1917), 707-11; Stewart, "Recruiting the New Nursing Army," *ibid.*, XVII (September, 1918), 1199-1203; Jane A Delano, "How American Nurses Helped Win the War," *Modern Hospital*, XII (1919), 7-9. Although the nursing profession did make great strides as a result of World War I, nurses, who were neither officers nor enlisted personnel and who were thus hampered in giving direction and instruction, were refused military rank. Not until 1947, after World War II, was permanent commissioned officer status achieved. Philip A. Kalisch, "How Army Nurses Became Officers," *Nursing Research*, XXV (May-June, 1976), 164-77.

<sup>25</sup> Essig's move to Passavant was in the nature of a return. After attending the public schools in Elkhart, Essig had received her nursing education at Passavant Memorial Hospital School of Nursing and the Illinois Training School for Nurses in affiliation with Cook County Hospital in Chicago. Graduating in 1907, she had worked for the Chicago Visiting Nurse Association as a school nurse, infant welfare nurse, tuberculosis nurse, and industrial nurse before going to Elkhart General Hospital and Nursing School as superintendent, thence to France.