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2018

The Development of the First School of Nursing in the Seventh-day Adventist Church

Maria Jankovic

ABSTRACT

THE DEVELOPMENT OF THE FIRST SCHOOL OF NURSING IN
THE SEVENTH-DAY ADVENTIST CHURCH

by

Maria Janković

Advisor: Dr. Denis Fortin

ABSTRACT OF GRADUATE STUDENT REASEARCH

Thesis

Andrews University

Adventist Theological Seminary

Title: THE DEVELOPMENT OF THE FIRST SCHOOL OF NURSING IN
THE SEVENTH-DAY ADVENTIST CHURCH

Name of researcher: Maria Janković

Name and degree of advisor: Denis Fortin, Ph. D.

Date completed: July 2018

Problem

This study sought to follow the development of the School of Nursing within Seventh-day Adventist Church. This demanded the study of the School of Nursing within the United States.

Method

This study was historical in its method. Two key parts of this study are historical analysis of the contexts of the United States and Seventh-day Adventist Church in the time when Schools of Nursing of these two entities developed.

Conclusion

Historical context of the United States reveals that the main reasons for development of the School of Nursing in this country were advancement of medical science and technology along the Civil War. The first School of Nursing in the United States was modeled after the first School of Nursing, St. Thomas Hospital, by Florence Nightingale in London, England.

It was discovered in the second chapter that the key persons in this process, Dr. Catherine (Kate) Lindsey and Dr. John Harvey Kellogg, were closely related to the first School of Nursing in the United States, Bellevue School of Nursing. They received medical training at this school, adopted many procedures and methods, and included them in the curriculum of the School of Nursing within Seventh-day Adventist Church.

Study of the historical context of Seventh-day Adventist Church in the time of the development of the School of Nursing showed that three foundational developments that paved the way for the School of Nursing were development of Health Reform, Educational System, and first Hospital. Even though there is a resemblance between the procedures and methods used in the School of Nursing in the United States and within Seventh-day Adventist Church, the latter placed emphasis on the missiological aspect of nursing profession.

Andrews University
Seventh-day Adventist Theological Seminary

THE DEVELOPMENT OF THE FIRST SCHOOL OF NURSING IN
THE SEVENTH-DAY ADVENTIST CHURCH

A Thesis
Presented in Partial Fulfillment
of the Requirements for the Degree
Master of Arts

by
Maria Janković

2018

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Maria Janković

APPROVAL BY THE COMMITTEE:

Denis Fortin, Ph.D., Advisor

Denis Kaiser, Ph.D.

Bea Ade-Oshifogun, Ph.D.,
RN-BC, CNE, CCRN

Date approved

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CHAPTER 1

INTRODUCTION

Since their beginnings Seventh-day Adventists have placed a considerable amount of emphasis on the development of medical education and institutions.¹ The school for nurses was a vital part of that emphasis for two reasons. The societal context reveals that hospitals of the time were considered the last places where one would go to get better. People were in need of proper medical treatment due to the limited knowledge of medicine and inadequate lifestyle they had. It was quickly noted that well trained nurses from various nursing schools patterned after Florence Nightingale's nursing school in England provided much better results in tending the sick. Adventists were given guidelines through the visions of Ellen White about the importance of health and the fact that taking care of one's health actually is also a religious duty. She also emphasized the need for health institutions that would minister to the sick people, within and outside of the Seventh-day Adventist.² After establishing its first health institution, the Western Health Reform Institute, the need for well trained nurses became very obvious — nurses that would efficiently heal the body but also the soul of the patients.³ However, a review

¹ Jerry Moon, "Institutions, Ellen White's Role in Establishing," *Ellen G. White Encyclopedia*, (2013), 897.

² Lorey Yarosh, "The Early Battle Creek Nursing School: Its Philosophy and Purpose" (MA thesis, Andrews University, 1987), 2.

³ *Ibid.*, 2-4.

of literature on this subject reveals that this development has not been systematically researched. Therefore, the main focus of the present study is to explore the development and establishment of the school of nursing in the Seventh-day Adventist Church.

Purpose

The purpose of this thesis is to present the background of the development of the school of nursing within the Seventh-day Adventist educational system and to note some of its impacts within the Seventh-day Adventist Church. In order to do so the following questions will be addressed: Where did the idea for the establishment of the school of nursing come from? What were the circumstances leading up to the birth of this initiative? What were external influences related to this development? Who were the leading people involved in the process of the organization of this school? What was the purpose of the establishment of the school?

Delimitations

The first Seventh-day Adventist school of nursing was closely related to the educational system of the Seventh-day Adventist Church as well as to the teaching of the health reform message. However, the present study will not provide all the details about these two topics but will refer to them to the extent it is needed to present the development of the first school of nursing.

Methodology

In order to reach this goal, the present study will contain two major parts: Chapter 2 will provide the background information of the development of the first schools of nursing in the United States, and Chapter 3 will present the development of the school

within the Seventh-day Adventist Church. Chapters 1 and 4 are introduction and conclusion, respectively. Chapter 2 will present some of the circumstances which singled out the need to establish a school of nursing and introduce the key person who organized the school and set its curriculum. Chapter 3 focuses on the development of the school of nursing within the Seventh-day Adventist Church and explores the influence of three main developments to the birth of the idea of the school of nursing. These three major developments are: (1) health reform, (2) development of the health institutions, and (3) establishment of the educational system. This chapter will end with a short review of God's ideal given through the counsels of Ellen G. White for (1) the role of nurses in the Seventh-day Adventist medical field, (2) their profile, and (3) their ministry.

The conclusion contains a summary of the entire research along with the synthesis of it into a logical conclusion. The conclusions to this study are not intended to be final words on the subject but rather a basic representation of the way nursing education was established and started within the Seventh-day Adventist Church and also a call for further research on this topic.

In order to have a better understanding about the development of school of nursing a table in appendix will be supplied at the end of the conclusion to summarize all the data that Chapters 2 and 3 contributed. The appendix will also provide some insights about the similarities and differences in the process of the organization of the schools.

Literature

The literature used in this research will consist of the primary sources available at the Center for Adventist Research. These sources consist of letters, diaries and

manuscripts. In addition to the primary sources secondary sources will include books, dissertations, theses, journal articles and textbooks.

CHAPTER 2

THE DEVELOPMENT OF SCHOOLS OF NURSING IN THE UNITED STATES

The beginning of the history of nursing in general is tightly related to the beginning of the first human life on Earth and the first sick person. Thus, what is today called nursing originated from the ancient human need to help the sick.¹ From that moment on nursing went through several developmental stages that can be delineated chronologically. These divisions are helpful for a proper understanding of the development of nursing in the United States. In this chapter more attention will be given to the history of nursing in the United States, including the establishment of the first hospitals and the first schools of nursing.

The History of Nursing – General Historical Overview

Among the many attempts to present the developmental stages of nursing, the most common presentation divides the history of nursing into four stages. These are: (1) Ancient Nursing (5000 B.C. to 100 A.D.), (2) Early Christian Nursing (100 – 500 A.D.), (3) Medieval Nursing (500 – 1835 A.D.) and (4) Modern Nursing (1836 – 1940 A.D.).

¹ Adelaide M. Nutting and Lavinia L. Dock, *A History of Nursing: The Evolution of Nursing Systems from the Earliest Times to the Foundation of the First English and American Training Schools for Nurses*, 4 vols. (Buffalo: Heritage Press, 1974), 1: 3-4; Josephine A. Dolan, *Goodnow's History of Nursing* (Philadelphia: W. B. Saunders Company, 1958), 1-2; Minnie Goodnow, *Nursing History in Brief* (Philadelphia: W. B. Saunders Company, 1938), 24.

During each of these periods significant efforts were underway to improve the profession of nursing. Therefore, each period can be seen as a building block for the next, consistently developing and improving the profession. The most important period for the topic of the present study is the period entitled “Modern Nursing.” The three developmental stages that preceded this period were preparatory periods in which Modern Nursing is deeply rooted.

Modern Nursing (1836 to 1940)

The era of Modern Nursing was ushered in by those who began to think about the needs of humanity and possible ways the art of nursing could meet those needs. There are many examples but for this paper the most significant person is one from Europe. His name was Theodor Fliedner, pastor of Kaiserswerth in Germany, who made a significant contribution to the profession of nursing during this period.² He believed that nursing could be improved by reestablishing the deaconess order, which in that time had become

²Theodor Fliedner was born in Germany in 1800, as one of 11 children. His father died when he was a small boy. The whole family had a very hard time until the children grew up. As Theodor was growing up he got some preliminary education, and then studied for the ministry. Upon graduating he was sent to a small village called Kaiserswerth and became a pastor. He traveled to other countries, and wherever he went he visited people who were doing nursing and some other charitable works. He visited the Sisters of Charity in France. In England he went to London to see Elizabeth Gurney Fry and to observe the work of the nursing sisters she had inaugurated. After returning to Kaiserswerth he married the intelligent young woman, Fredericka Munster, who was just as eager to do something worthwhile for humanity as he was. Both saw the building of improved nursing service for the sick as one of the outstanding needs of the times. Very soon they made plans to start a nursing school for deaconesses, which actually happened in 1836. The Kaiserswerth nurses training school brought great attention in Germany and attracted young woman from surrounding European countries, and very soon institutions like this were developed based on pastor Fliedner’s plan. Florence Nightingale, the worldwide-recognized organizer of the first school for the nurses - before she opened her first school for nurses - visited Kaiserswerth two times and at this place she gained some very important skills and knowledge, which helped her in her nursing and in the process of organization. Luella Josephine Morison and Anna C. Fegan, *Continued Study Unit in History of Nursing* (Philadelphia: Davis, 1941), 7-9; Charles Marie Frank, *The Historical Development of Nursing, Emphasizing the Cultural Background of the Race and the Influence of Philosophy and Religion on the Healing Arts* (Philadelphia: Saunders, 1953), 188-189; Lena Dixon Dietz and Aurelia R. Lehozky, *History and Modern Nursing*, 2nd ed. (Philadelphia: F.A. Davis Co., 1967), 57-59; Minnie Goodnow, *Outlines of Nursing History* (Philadelphia: W. B. Saunders Company, 1938), 75-79; Goodnow, *Nursing History in Brief*, 69.

very disorganized. Together with his wife Frederika, he established a hospital and a home for training deaconesses in 1836.³ As time passed they implemented many new ideas in the curriculum of their institution, becoming a prototype for the first modern school for nurses. Fliedner's work is recognized as one of the first attempts to give nursing a different direction. This was one of the first attempts to distinguish between general "nursing," which had existed for a long time, and "professional nursing," a newly developing profession.

In her book, *The History of Nursing*, Deborah Jensen attempts to make a distinction between "nursing" and "professional nursing" by proposing a definition for both. "Nursing," in the sense of caring for the sick, dates back to antiquity and is one of the natural advantages of social structure. It would also be natural that in any social group those who showed themselves most skilled at caring for the sick would be called upon to nurse friends. "Professional Nursing" as considered in this study, is a new occupation that came into existence in the nineteenth century and was a result of many factors.⁴

As seen from above, nursing has had a long history and has gone through different developmental stages. It has slowly transformed into a new art, a new profession that brings different opportunities to women, especially those who believe that social changes improve their status within society. In the beginning, this process was slow in America but when this movement began, the changes occurred rapidly.

³ Morison and Fegan, Continued Study Unit in History of Nursing, 9.

⁴ Deborah MacLurg Jensen, *A History of Nursing* (St. Louis: Mosby, 1943), 100.

The History of Nursing in United States Before Organized Schools of Nursing

The beginning of the history of nursing in America is similar to the history of nursing in other parts of the world. The rise of nursing in the United States is closely connected to the arrival of the first European colonies. Nursing was very tightly connected to the lifestyle, customs, religious beliefs, and other social characteristics of the first European settlers.

As is known, prior to the arrival of Christopher Columbus on October 12, 1492, America was populated by indigenous groups of people.⁵ The natives (Native Americans), whom Columbus called Indians, had their own culture, religion and way to treat the sick. Some groups of Native Americans were organized as tribal groups or lived as nomads.⁶

The healing methods of each native group differed but almost every tribe believed that their religion was closely connected to illness. They believed in ghosts, demons, and gods and that they had influence over men and that they would respond only to a special person or magician called a shaman, who usually held the office of priest and healer. The Indians believed that the cure for a disease could be found in the area in which the disease started. In addition, they used the plants from their surroundings to heal various diseases.⁷

⁵ Frank states that the indigenous people of North America originally migrated from parts of the eastern hemisphere. Their culture is similar to the culture of the people who migrated from that area. Frank, *The Historical Development of Nursing*, 144.

⁶ Ibid.

⁷ Ibid., 146.

After the arrival of Columbus, the newly discovered region started to change rapidly and substantially. Many new European settlers eager to explore this region came for different reasons. Some of them came to explore the New World; some came to find freedom, especially those who were under criminal sentences in their countries. Others came because they wanted to help, teach, and heal the natives. The two main reasons for the exploration and settling of the new world were trade and evangelism. The new settlers brought with them new cultures, new lifestyles, new religion, new illnesses and new ways, methods and practices of healing.

The individuals that had the most influence on change in nursing at this time were from Spain, France and England. They settled in various parts of the region, namely in North, Central and South America.⁸

The Spanish conquest of South America was led by the Spanish conqueror Hernando Cortez. Cortez entered Mexico in 1519 and he and his followers were astonished with the life, culture and wealth of the people who lived there. In the 14th century, under the emperor Montezuma, the Aztecs rose to a high level of culture. Medicine in the time of Montezuma was highly developed. They had hospices for the care of the sick and over 3,000 plants named in their pharmacopeia. They also used minerals as drugs. They had such skilled surgeons and physicians that Cortez asked the Spanish government not to send medical assistance from Spain.⁹

⁸ Anne L. Austin, *History of Nursing Source Book* (New York: Putnam, 1957), 303.

⁹ Frank, *The Historical Development of Nursing*, 149. Hernando Cortez founded the first hospital in the New World in Mexico City in 1524. The Spanish colonist who followed were accompanied by missionaries, it is reasonable to assume that members of religious groups were among the first hospital nurses. Austin, *History of Nursing Source Book*, 303.

The French expedition into the New World was led by Jacques Cartier under the patronage of Francis I. He sailed to the northern part of the continent in 1534 and 1535 to explore the territory, which was later, called New France and is known today as the country of Canada. When Cartier arrived, he met different types of indigenous people groups. Indian women treated ordinary illnesses with simple herbs. In serious cases the medicine man was called on for aid. Indians were generally healthy and resilient until the arrival of European explorers and settlers brought various diseases unknown to them. Diseases such as small pox and measles were fatal.¹⁰ The missionary work to the Indians and the idea of establishing places for the nursing of the sick were mainly led by Jesuits and Franciscans, the first to serve the community where they lived. The first hospitals were built in Montreal and Quebec, where nuns cared for the sick.¹¹

The European conquerors and the Catholic church brought the heritage of European culture to the New World. Devoted missionaries followed the conquerors and established the church and hospital in every town. Missions were established everywhere by both secular and religious organizations, but the Franciscans, Dominicans, and Jesuits were predominant. They brought Christianity to the New World. The local conditions fostered illness so the Indians easily succumbed to the diseases that the Europeans brought with them. Between 1524 and 1802 approximately 30 hospitals were built in which religious men and women worked.¹²

¹⁰ Frank, *The Historical Development of Nursing*, 155-156.

¹¹ Austin, *History of Nursing Source Book*, 305.

¹² Frank, *The Historical Development of Nursing*, 150, 151.

The English expedition to the New World was different from the first two because England was only an emerging power at the time of exploration. Colonization by the English was a private affair. The government granted permission to an individual or to a company to establish a colony. In the late sixteenth century Humphrey Gilbert, Walter Raleigh, and Richard Grenville obtained patents and settled colonists in the New World, but the settlers either perished or returned to England. The first permanent English settlement was Jamestown, Virginia, which was settled in 1607 by the London Company. It might have perished like other settlements, but the capable Captain John Smith led the company through difficult times. Early in the 17th century a group of Separatists later known as Pilgrims, obtained permission to settle in the New World. They settled in what they later called New Plymouth on November 11, 1620. They brought with them a number of ministers who had been educated at Cambridge University and subsequently they started a college in the colony. The few records that exist of these groups mention that the colonists cared for each other in their homes.¹³

In 1626, the Dutch East India Company established a colony in what was then known as Manhattan and Delaware and called it New Netherlands. The principal town was located in Manhattan and named New Amsterdam. Many Englishmen found their way here and they renamed the city New York. In the Dutch colony, a surgeon of the Dutch West India Company recommended that a hospital be established for employees. This was the first institution to care for the sick in this region that opened in 1658. It later became Bellevue Hospital.¹⁴

¹³ Austin, History of Nursing Source Book, 304.

¹⁴ Frank, The Historical Development of Nursing, 168. Austin, History of Nursing Source Book, 304.

Various religious orders and communities took part in the care of the sick at hospitals and homes on the new continent. Among the earliest were the Sisters of Charity, established in Emmetsburg, Maryland in 1809 by Mother Seton. The Protestant Episcopal Sisterhood also entered the field with the Sisterhood of the Holy Communion, founded in New York in 1845 by Pastor Muhlenberg. The English Lutheran Church began its work with four deaconesses who were brought to Pittsburgh in 1849. They accompanied by Pastor Fliedner of Kaiserswerth.¹⁵

The New England colony was thoroughly English except the Middle States, which were populated by English, Dutch, Swedes, Germans and Irish. For a century and a half, the colonies remained isolated and even antagonistic to one another because of the difference in cultural temperament and religion.¹⁶

Colonial America was characterized by rapid changes in the mode and manner of living in each of the separate areas. In the north, the settlers were chiefly from the laboring classes of England: artisans, farmers, shopkeepers and servants. The members of the clergy were highly educated. The northern New Englanders were stern, thrifty, industrious, puritanical and curious.¹⁷ In the south, the settlements were founded on a semi-feudal system. Plantation owners often came from wealthy families with a more elitist culture than the northerners. Southerners lived rather indolent, luxurious lives. They used African slaves to handle their labor demands. Roads were slowly developed

¹⁵ Austin, History of Nursing Source Book, 304.

¹⁶ Frank, The Historical Development of Nursing, 169.

¹⁷ Ibid., 170.

and with that the methods of transportation improved and the social contact among colonists increased.

Public education began in the northern colonies. By the middle of the seventeenth century, Massachusetts had established an elementary school in every location that had 50 or more householders. Generally, in the colonies, the education of girls and women was completely neglected.¹⁸ But there were institutions for higher learning prior to the establishment of elementary schools. For example, the minister John Harvard founded a school which was latter on called after him Harvard University and graduated its first class in 1642.¹⁹

Physicians were few and those who called themselves physicians were in abundance. Except for the few who were fortunate enough to study abroad, doctors received their training under many different circumstances. For example, after they would clean the stable they went to the house to mix drugs used for prescribed medication. They gained their medical education at the bedside of patients. According to some authors the title “doctor” was not used in the colonies before 1769.

The colonies brought with them the health concepts prevalent in their native countries. Unfortunately, during this period, English hospitals were poorly run and nursing was at its worst. The Puritans in New England believed that illness was given to mankind as a punishment for sin and did not think that God wanted the sick to be given special medical care.²⁰

¹⁸ Ibid., 173.

¹⁹ Ibid., 170-171. Some other institutions can be mentioned such as William and Mary College in Virginia established in 1693, Pennsylvania’s first college founded in 1697. A college was opened in Connecticut in 1701 and was named Yale College in 1746. Ibid., 171.

²⁰ Irmengarde Eberle, *Nurse!: The Story of a Great Profession* (New York: Crowell, 1944), 92.

The first attempts in organized nursing were very simple – much like those of the Middle Ages in Europe – and the care was usually administered in almshouses or prisons, where desperate conditions existed. With the help of religious orders established by settlers and believers of different religious backgrounds, attempts were made to improve care and to educate the people.²¹ This was the situation in which nursing existed in the British colonies in North America. There were deficits in many areas of the field, but development in one area would lead to improvements in others.

Profile and Role of Nurses

Persons known to take care of the sick usually came from two major groups. The first group, who were women, gained some knowledge in healing practices on their own and, with that in hand, served the community where they lived. They were well known in society for their healing skills and were often called on to help the sick. In addition, in every home the nurse was usually the mother and, in wealthy families that job belonged to the most trusted servant in the house.

The second group were women who belonged to a religious order connected to the church and they were well known for nursing the sick. Usually, these women were working in rooms linked to the church that were intended specially for the purpose of helping the sick. Some of them even worked outside the church and went to the parts of the city where the poor and sick lived. In the colonies many poorhouses were opened as a response to the social needs. From the beginning most of the women who served as nurses in these institutions were from different religious orders. After several decades hospitals were opened in many parts of the colonies and the situation started to change.

²¹ Morison and Fegan, Continued Study Unit in History of Nursing, 13.

In the sixteenth and seventeenth centuries, as the colonies spread throughout the region, a third group of women arose who took care of the sick. These women were prisoners who were required to visit poorhouses and hospitals to care for the sick.

As can be seen from the above descriptions, there was a distinction between religious and secular nursing. In the first period nursing went through different stages as the circumstances changed in the country. Religious orders were always connected to the church and they tried as much as possible to secure the highest level of nursing. They had support from the church and they were obligated to serve. Secular nursing was one of the lowest professions a woman could pursue. It was on the same level as a maid or basic worker. These women nurses often had questionable morals. The only respected nurses were those attached to a religious order. But there were just a few of those and hospitals were often built only for soldiers, the poor, or for those affected by an epidemic.²²

Not many women would choose nursing as a profession if they could possibly make a living in some other way. Most secular nurses expected and took bribes whenever possible and they frequently abused alcohol. The nurses were paid insufficiently and they hardly could support their families. The future was not bright for these women.²³

The secular nurses who had a job to visit the sick in their homes were for the most part ignorant. Many of them could not read or write. In addition, many had superstitious ideas about healthcare that were based on old wives' tales. Finally, many preferred to do what was convenient for them rather than to follow the physician's orders.²⁴

²² Raymond G. Hebert, *Florence Nightingale: Saint, Reformer, or Rebel?* (Malabar: R. E. Krieger, 1981), 5.

²³ Jensen, *A History of Nursing*, 118.

²⁴ Dorothy Giles, *A Candle in Her Hand: A Story of the Nursing Schools of Bellevue Hospital* (New York: Putnam, 1949), 46.

The nurses were poorly paid individuals and they came from the lowest classes of society. They could not be trusted to properly administer medicine or to distribute gifts of food for the patients. Often, they were so deficient in number that the sicker patients had to receive most of their nursing from other patients who were more mobile or from prisoners or inmates of the workhouse. Sometimes the nurses slept in the bathrooms on bundles of straw. Drunkenness and dishonesty prevailed among them.²⁵

The First Hospitals in the United States and Their Condition

Before the reorganization of the field of nursing in the 1870s, which started mainly in hospitals, the hospitals were known as unpleasant, crowded places. Unfortunately, it was better for a sick person to stay at home than to go to the hospital. Nursing was disorganized and without social status. Dirt and uncleanness prevailed in the hospitals and there was no money even for basic needs. There was no ventilation, no hygiene, and plumbing was defective.²⁶

The first hospital building in the New England area that was organized for the care of the sick but separated from the church was a military hospital – the West India Company founded it under the auspices of the Dutch government in 1658. The hospital was located in Manhattan and its mission was to care for sick soldiers and African Americans.²⁷ It was later relocated and called Bellevue Hospital.²⁸

²⁵ Jensen, A History of Nursing, 154.

²⁶ Ibid.; Ruth Duncan Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White and the Incorporation of Them into Their Respective Schools of Nursing” (PhD dissertation, Andrews University, 2001), 35-36.

²⁷ Frank, The Historical Development of Nursing, 175.

²⁸ Eberle, Nurse!: The Story of a Great Profession, 92.

The second well-known hospital of that period was Old Blockley or the Philadelphia Almshouse, erected in 1731 for the sick, insane, and indigent. Sometime later the hospital was separated from the almshouse. Today the hospital is known as Philadelphia General Hospital. In both hospitals, Bellevue and Blockley, the nursing conditions were poor since the hospitals were connected with poorhouses. Both hospitals claim to be the first in the United States. As far as chronology, that honor seems to belong to the present Bellevue Hospital in New York City because it originated in a hospital building. Later, this hospital was combined with the city's poorhouse and the joint institution took the name Bellevue Hospital. However, even in 1736 it had only one ward for the sick.²⁹

The Blockley Hospital, now known as the Philadelphia General Hospital, began as an almshouse in 1720. Pennsylvania Hospital, which was organized in 1751, claims that their hospital was the only hospital consistently devoted to the care of sick and for that reason they believe they have the privilege to be called the first hospital.³⁰

However, the title of first School of Nursing in the United States belongs to the Bellevue Hospital in New York since this hospital was first organized after the Nightingale plan for nursing.³¹ Since the history of nursing researchers recognize Bellevue Hospital as being the first school of nursing in the United States this study now turns to the initiatives started at this institution.

²⁹ Morison and Fegan, *Continued Study Unit in History of Nursing*, 13; Frank, *The Historical Development of Nursing*, 175-178.

³⁰ Dietz and Lehozky, *History and Modern Nursing*, 87; Agnes Elizabeth Pavey, *The Story of the Growth of Nursing as an Art, a Vocation, and a Profession* (London: Faber and Faber Limited, 1938), 249.

³¹ The first record about nursing in American hospitals before the reform movement is related to the investigation by the Bellevue Hospital Visiting Committee in 1872, which was under the chairmanship of Mrs. Joseph Hobson. Jensen, *A History of Nursing*, 154.

There were several reasons for organizing schools of nursing in the United States. The organized system of nursing in the United States dates back to 1871. Nursing is very much interwoven with the general history of this country. The changes in society were reflected in nursing; the social forces that affected society affected nursing as well.³²

The Reasons for the Development of the School of Nursing in the United States

There are several major factors that played a big role in the process of the development of nursing schools. The most important were: medical progress, social changes, technical progress, development of the hospitals, emancipation of women and the Civil War.³³

The lack of nursing education becomes apparent through a study of the growth of medical knowledge and the hospital as a social institution.³⁴ Historians observed even deeper insights into the need for nursing as the following statement shows:

Along with the increase of medical knowledge the demand on the individual doctor became greater, his training more complicated, and more was required from his assistants. In fact, the need arose for an entirely new group of persons, who in cooperation with him could tend to the sick and carry out many procedures, which they could master, often better than the doctor.³⁵

Nursing as a function of church and linked up to an old ascetic idea prevailed until after the development of professional nursing as a secular activity. The concept of

³² Dietz and Lehozky, *History and Modern Nursing*, 104.

³³ Jensen, *A History of Nursing*, 85-89.

³⁴ *Ibid.*, 155.

³⁵ *Ibid.*, 19.

nursing as an economic, independent and secular vocation, an art requiring intelligence, technical skill as well as devotion and moral purpose, was developed first by Nightingale in England and very soon was transferred to America.³⁶

One of the very important factors that showed the need for nursing were wars, especially the ones that took place in Europe and the United States.³⁷ Among the above-mentioned factors, probably the most influential factor that showed the need for the development of better nursing care, was the Civil War. When the Civil War in the United States broke out in 1861 there was a great need for nurses, and just as Nightingale discovered in England during the Crimean War (1853 - 1856), the Americans also discovered that there were almost no one trained for this work. Women with the willingness to nurse were given some instruction and sent to the battlefield.³⁸ The Civil War had done much to call attention to the need for training even though it was hard to convince women that it was necessary to spend six months to learn the art of nursing.

The Civil War in America gave freedom to many women to participate in affairs outside of the home and was closely related to the fifth factor, which was the social emancipation of women. During the Civil War women were taught how to work together and they were impressed concerning the importance of good nursing. It has been

³⁶ Ibid., 19-20.

³⁷ “Another aspiration to form a nursing school was frustrated by the Civil War. Because of the great loss of manpower in the frequent wars, many women could not find husbands and were naturally looking for careers for themselves.” Ibid., 155.

³⁸ Eberle, Nurse!: The Story of a Great Profession, 93; Frank, The Historical Development of Nursing, 192.

estimated that around 2,000 women were engaged in nursing and hospital administration during the conflict.³⁹

After the Civil War the women who had served with the United States Sanitary Commission returned home with a desire to go on being useful to their fellow human beings. Some began to serve as private duty nurses in their hometowns, cities, or country districts. Others started visiting nurse services in offered by existing the hospitals.⁴⁰

These women initiated a campaign for the reformation of public hospitals. A modern system of training for nurses was one of the early results of that reformation. These campaigns took place at different hospitals. The first took place at Bellevue Hospital in New York City.

The First Attempt to Organize a School of Nursing

The desire to bring nursing to a higher level and to educate began to increase in the 18th century. There were always individuals who wanted to improve the lives of others. This was also the case for nursing.

Through the work of three important schools, which appeared simultaneously in 1873, the time came for nursing schools to move to the next level. These schools were founded upon Nightingale's ideas and they were closely related to the hospitals. Due to the lack of endowment, the schools were absorbed into various hospitals, which meant that the development of the nursing schools became closely connected to the development of the hospitals. Even more, most of the schools were created and operated

³⁹ Esther Lucile Brown, *Nursing as a Profession*, 2nd ed. (New York: Russell Sage Foundation, 1940), 16.

⁴⁰ Eberle, *Nurse!: The Story of a Great Profession*, 109.

by hospitals in order to meet their specific needs.⁴¹ But before 1870 there were several earlier attempts to organize schools for nurses or to give women an education.

In 1771, the New York Hospital was founded.⁴² A doctor that realized the hopelessness of trying to save sick people's lives without proper care and the crude help available in the few hospitals that existed set out to improve matters. That person was Dr. Valentine Seaman who made the first attempt to start a school for nurses in America at the New York Hospital, in 1798. At first, the training was very limited.⁴³ Dr. Seaman began a series of 24 lectures focusing on nursing and hygiene.⁴⁴

The next attempt to organize a school of nursing took place about 1839 under the auspices of the Nurse Society of Philadelphia by Dr. Joseph Warrington who was inspired by the work of Elizabeth Fry in England.⁴⁵ Even though the instructions were very elementary, there were regular courses, both lectures and practical demonstrations, using a mannequin. For a long time, he cherished the idea of training nurses in midwifery. His pupils were upstanding citizens and practiced nursing in the homes of the

⁴¹ Frank, *The Historical Development of Nursing*, 161.

⁴² Morison and Fegan, *Continued Study Unit in History of Nursing*, 13.

⁴³ Eberle, *Nurse!: The Story of a Great Profession*, 93; Dolan, *Goodnow's History of Nursing*, 107.

⁴⁴ "In 1798 Dr. Valentine Seaman, attending surgeon to the New York Hospital gave regular courses of lectures to nurses in anatomy, physiology, obstetrics and pediatrics. He published a synopsis of these lectures, probably the first attempt at a nursing text." Jensen, *A History of Nursing*, 155; Goodnow, *Outlines of Nursing History*, 155.

⁴⁵ Dietz and Lehozky, *History and Modern Nursing*, 56. Elizabeth (Betsy) Fry (21 May, 1780 – 12 October, 1845), was an English prison reformer, social reformer and a Christian philanthropist. She has sometimes been referred to as the "angel of prisons." One memorable Sunday she was moved by a talk given by William Savery, a friend from America. From that day on, her love of the world and pleasure seemed to disappear. She started to store clothing for the needy and opened a school for kids in her home in London. One day in 1813 she was asked to carry clothing to the women prisoners. That visit represents the beginning of her advocacy for prison reforms. Meta Rutter Pennock, *Makers of Nursing History: Portraits and Pen Sketches of One-Hundred and Nine Prominent Women* (New York: Lakeside Publishing Company, 1940), 10-11.

poor. The classes were taught at the Philadelphia Dispensary, in the same classes with medical students. After training and when evidence of their proficiency was demonstrated, the nurses would receive a “certificate of approbation.”⁴⁶

The Catholic religious order of the Sisters of Charity was established in 1845. They did excellent work in teaching and preparing women to be nurses. Later many of them served as nurses in the Civil War.⁴⁷ Then in 1862 a physician of unusual intelligence and perseverance, Dr. Marie E. Zakrzewska, established an improved system of nurse’s training at the New England Hospital for Women and Children at Roxbury, Massachusetts. She chose the more intelligent girls who applied for nursing jobs at the hospital. She taught them some of the knowledge that doctors had attained by then because she considered it useful for their work including regularity and cleanliness.⁴⁸

Another attempt in Philadelphia was the school of nursing established in connection with the Women’s Hospital of Philadelphia in 1861. It opened a training school in 1861, but progress was slow until 1873.⁴⁹

In 1872 the New England Hospital for Women and Children in Boston Massachusetts, under the direction of Dr. Susan Dimock, inaugurated their first permanent training school for nurses.⁵⁰ During the 19th century there were several

⁴⁶ Together with medical students, the nurses were called pupils and from 1849 they were housed in a home of their own. Jensen, *A History of Nursing*, 101; Dolan, *Goodnow's History of Nursing*, 107; Goodnow, *Outlines of Nursing History*, 157.

⁴⁷ Sister Helen, the first superintendent of Bellevue, was from a Protestant organization – The Sisterhood of All Saints. Morison and Fegan, *Continued Study Unit in History of Nursing*, 14.

⁴⁸ Eberle, *Nurse! The Story of a Great Profession*, 93; Dietz and Lehozky, *History and Modern Nursing*, 95-96.

⁴⁹ Jensen, *A History of Nursing*, 154; Dietz and Lehozky, *History and Modern Nursing*, 95.

⁵⁰ Dr. Marie Zakrzewska taught the principles of nursing. Linda Richards was the first to graduate from this school and to receive a diploma. She is called “America’s First Trained Nurse.” Morison and

attempts to organize schools for nurses. Each one of them came a step closer to the opening of the first school of nursing in New York City.

The History of Bellevue Hospital – The First School for Nurses

In 1811 New York City purchased the site opposite the Third Milestone on the road leading along the island's east shore to Westchester. That particular portion then belonged to Mr. Brockholst Livingston. A former owner of the property who lived there greatly enjoyed the view across the river of the green fields and scattered farmsteads of Long Island, named this place Belle View. Mr. Livingston retained the name for his estate but altered the spelling to Bellevue.⁵¹

The city leaders decided to buy a piece of land and build an almshouse and hospital. The price paid for the land was \$22,494 and there were those who protested this extravagant expense “for paupers.”⁵² Mayor Dewitt Clinton laid the cornerstone of the almshouse and hospital on July 3, 1811. The building would have been ready for occupancy but the second War of 1812 caused a delay in construction.⁵³

It was not until five years later that Bellevue was opened. The central building was four stories high, 325 feet by 55 feet and had two wings – the north for whites, and the south for colored patients. The hospital had 200 beds and was visited regularly by

Fegan, *Continued Study Unit in History of Nursing*, 14; Dietz and Lehozky, *History and Modern Nursing*, 95-97.

⁵¹ Giles, *A Candle in her Hand*, 49.

⁵² They grumbled that if people were poor it was usually their own fault, especially in a country so rich in opportunities as the United States. Moreover, they said: “once you began to give these shiftless wretches comfort and attention they would make no further effort to help themselves out of their difficulties and distresses.” *Ibid.*, 49-50.

⁵³ *Ibid.*, 49.

several of the city's leading physicians. The cleaning of the wards, the cooking, laundry, and nursing of the sick was done by the women inmates of the almshouse who were able bodied, sober, and sufficiently intelligent to obey.⁵⁴

With fervent prayers and high hopes, the institution, which by a ruling of the Common Council on December 5, 1825 became known by the name Bellevue Hospital.⁵⁵ In 1824 the New York Legislature passed a law and in 1825 made mandatory for each state who already did not possess at least one poorhouse to establish one immediately. In New York City, this provision meant that the court could commit to Bellevue habitual drunkards, prostitutes, petty thieves, drug addicts, sex perverts and charlatans. Many of these were put to work in the hospital wards.⁵⁶

The two decades, between 1830 and 1850, in America were marked by rapid expansion. The opening of the Erie Canal to form a trade route to the food-producing Middle Western states, the building of the railroads and, above all the increase in shipping between Europe and the United States combined to increase the population of New York City exponentially. Large numbers of Irish, Scottish, and German immigrants came looking for homes and opportunities in the United States. These hopeful immigrants poured into New York annually by the thousands. In 1848 some 160,000 Europeans entered the United States through the port of New York.⁵⁷

⁵⁴ Ibid.

⁵⁵ Ibid.

⁵⁶ Ibid., 54.

⁵⁷ Not all of the new arrivals were physically fit or had the stamina to stand the hard work, exposure to a rigorous climate, change of diet, and difficult living conditions. Numbers fell victim to tuberculosis, diphtheria, typhus, and mysterious ailments, which crippled them permanently, and which no one then understood. The hospital in Bellevue was filled with patients who were without long established ties in the country. New York was paying a heavy price for its port. Ibid., 56.

The opening of Bellevue Hospital was necessitated by the influx of new immigrants and sailors. This ever-increasing tide of immigrants stretched the resources of the city and caused serious concern for men like Dr. John Wakefield Francis, once a student of Dr. David Hosack and later an important member of the Medical Board of Bellevue. He was its president for nine years.⁵⁸

Another physician who realized the ever-increasing problem due to the poor was Dr. Willard Parker. In association with Dr. James R. Wood, Dr. Parker reorganized Bellevue after an investigation in 1837.

Dr. Parker had been interested in public health, especially with regard to the inmates of various city and state institutions. The steady increase of poorhouses, orphanages, asylums, and hospitals of various sorts after 1850 had brought some problems. Most of them arose as the result of poor organizational supervision. To all who were concerned it became apparent that the time had come for the local institutions to be supervised by one state agency.⁵⁹ Only by creating a central authority could many errors and abuses be checked and greater efficiency be achieved.⁶⁰

It happened around that time that Dr. Parker was called to Colonel Hamilton's family to help him recuperate because he fell and broke his hip. After a visit Dr. Parker

⁵⁸ Ibid., 57.

⁵⁹ Ibid., 59.

⁶⁰ Massachusetts had charities empowered to supervise the whole system of public charities within the Commonwealth in order to secure the greatest degree of usefulness at the least expense. This provoked discussion among individuals in New York City and Dr. Parker was one of them. Ibid.

met Mrs. Hamilton's two young granddaughters, Louisa and Georgina Schuyler. Louisa Schuyler was then a young woman in her early twenties.⁶¹

That night after Dr. Parker checked the patient he talked to Louisa and Georgina about their plans for their lives. After their answer, which was appropriate for young ladies from the upper class, he asked them the following question: "What do you do for others, for those who have none of the things you have?"⁶² That night Dr. Parker told the sisters about Nightingale and her work, since her name then was on everyone's lips as an English heroine.

Dr. Parker showed them some pictures of some institutions and poor houses and told them to go and visit some of them, to invest some of their time, thought, and money there. But before that promise was kept the news about the Civil War reached everyone.⁶³

All thoughts were turned to the United States Army and its needs. The United States Sanitary Commission was formed in June 1861.⁶⁴ The officers and members of the

⁶¹ Louisa Schuyler's education had been that of most young women of good social status in her day. She was well read in English classics and history and was skilled in French, music, watercolor painting, and embroidery. *Ibid.*, 58.

⁶² *Ibid.*, 60.

⁶³ *Ibid.*, 61.

⁶⁴ The United States Sanitary Commission was a private relief agency created by federal legislation on June 18, 1861, to support sick and wounded soldiers of the United States Army (Federal/Northern/Union Army) during the American Civil War. The president was Henry Whitney Bellows and the executive secretary was Frederick Law Olmsted. It was modeled on the British Sanitary Commission which was set up during the Crimean War (1853-1856), and from the British parliamentary report. United States Sanitary Commission, in the Wikipedia: The Free Encyclopedia, https://en.wikipedia.org/wiki/United_States_Sanitary_Commission (Accessed September 15 2018).

Sanitary Commission included men and women. Two of the most notable women were Dr. Emily Blackwell⁶⁵ and Louisa Lee Schuyler.⁶⁶

Dr. Blackwell went abroad to study hospital and nursing systems in several countries. In England she was in close contact with Nightingale who gave her valuable advice and personal accounts of her hospital efforts in Crimea and later at home. Upon her return in 1861, equipped with new knowledge, Dr. Blackwell gave her time to cooperate with those who were making an effort to establish and coordinate the Civil War Relief Agency. Soon the Women's Central Association was organized and Louisa Schuyler was elected president. She threw herself wholeheartedly into the war effort.⁶⁷

After the war was over in May 1865, Louisa and her sister Georgina Schuyler found themselves, like many other women of the time, without an occupation and they were unwilling to return to a narrow, idle life. At the advice of her physician, Louisa Schuyler went to Europe for a long rest to recover from her hard work for the Sanitary Commission. When she returned to the United States in 1871 she was advised that she must live a quiet, uneventful life. She obeyed this order by keeping her promise to Dr. Parker. She made a visit to Westchester County Poorhouse, then the fourth largest of these institutions in New York State. After seeing the conditions at the poorhouse, she

⁶⁵ Dr. Blackwell was the foremost female physician in the country. She and her sister Dr. Elizabeth Blackwell had founded in 1854 the New York Infirmary for Women and Children. The institution originated from the series of lectures delivered by Mrs. Losier of New York to a class of women students. The lectures were given in her own private parlor because the idea of women studying medicine was extremely revolutionary. Giles, *A Candle in her Hand*, 61. The prospectus reads: "in this Hospital we would also establish a system of instructions for nurses, its plan to be based on those drawn up by Miss Nightingale." Ibid.

⁶⁶ Ibid.

⁶⁷ Ibid.

concluded that: “There was no resident physician and no special care for desperately ill and dying people.”⁶⁸

Schuyler’s work with the Sanitary Commission had taught her the value of organization. She realized that only a powerful organization of influential people would be able to improve the conditions in institutions such as the poorhouse she had visited. To form such an organization she needed more facts related to the existing conditions.⁶⁹

It was at this moment that Louisa Schuyler, fresh from her visit to the Westchester County Poorhouse, asked and obtained permission from the State Board of Charities to inspect Bellevue Hospital. She was escorted on that momentous visit by Commissioner James Bowen⁷⁰ of the Board of Charities and accompanied by a friend, Mrs. Lane.⁷¹

Forty years later Louisa Schuyler wrote the following words in the letter to her friend, Joseph Hobson:

When I walked through the wards of Bellevue Hospital with Mrs. Lane and General Bowen I saw at once that no permanent improvement in the condition of the Hospital could be made until the nursing service was radically changed and that this could only

⁶⁸ Ibid., 64-65.

⁶⁹ Ibid., 65.

⁷⁰ James Bowen was born at New York City February 25, 1808. His father was a merchant of ample means, and the son was liberally educated. When the Civil War started Mr. Bowen organized six regiments of volunteers. He ceased to be president of the Police' Board at the close of 1862. He was appointed general of the brigade composed chiefly of the six regiments he had enlisted. General Bowen served two terms as charity commissioner, and introduced the ambulance system in the hospital service. He greatly improved the standing and efficacy of Bellevue Hospital, by insisting that the best medical skill should be employed there, with the result that to-day a course in the Bellevue Hospital practical schooling in medicine and surgeries considered recommendation sufficient as to the capacity of any beginner in the professional practice of medical science. James Bowen (railroad executive), *Wikipedia: The Free Encyclopedia*, ed., [https://en.wikipedia.org/wiki/James_Bowen_\(railroad_executive\)](https://en.wikipedia.org/wiki/James_Bowen_(railroad_executive)) (accessed September 2018).

⁷¹ Giles, *A Candle in her Hand*, 66.

be accomplished through the establishment of a training school for nurses. I determined then and there that this should be done.⁷²

Louisa Schuyler was experienced in organizing groups of women in New York who were well fitted to inaugurate and carryout such a project as she had in mind – women whose social position, authority, and wealth were equaled by their earnest desire to use these powers for the welfare of others less fortunate than themselves.

A small group of women gathered in Schuyler's drawing room in the evening January 26, 1872 at her invitation. Describing these women Dorothy Giles writes:

There were women of deep Christian piety who believed, earnestly and unaffectedly, that of those to whom much had been given, God the Giver would expect much. They had courage – the courage of conviction, which sustained by knowledge of a righteous cause, is an unshaken platform in the mind. They were incapable of wavering or compromising to gain a desired end. They represented the best traditions of New York, for they were the daughters and granddaughters of men whose acumen, fortitude, and vision had caused a great, powerful city to rise out of the little Dutch trading post at the mouth of the Hudson River.⁷³

What Miss Schuyler proposed to the ladies at that first meeting was that they should form a committee to visit the city's public hospitals. The first task would be to inform themselves and others about the conditions there with the ultimate goal of bringing about improvements where that would be possible.⁷⁴ She did not say a word

⁷² Ibid., 67; Abby Howland Woolsey, Florence Nightingale, and Elizabeth Christophers Kimball Hobson, *A Century of Nursing* (New York: Putnam, 1950), 146.

⁷³ Giles, *A Candle in her Hand*, 68.

⁷⁴ American women who were not interested in war anymore turned their interests to the domestic charitable institutions and they formed the New York State Charities Aid Association. This association became a venue for the activity of the Bellevue Hospital Visiting Committee under the leadership of Louisa Lee Schuyler. The persons who were members of the committee were from the upper class. They possessed enlightened views, wisdom and benevolence, experience, wealth and social position. They focused their energies on the reformation of the hospital. Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 146; Goodnow, *Outlines of Nursing History*, 163.

about her idea of establishing a nursing school in connection with Bellevue.⁷⁵ The whole committee was first to go in person to the hospital, to be introduced to the authorities.⁷⁶ This idea was realized on the following day, when Commissioner Bowen escorted them through the wards.⁷⁷

Schuyler's plan was that the committee visits the hospitals to see the conditions and report what they saw. The report focused upon the cleanliness, diet, and the condition of the nursing service.⁷⁸ The first hospital visited by the group was Bellevue Hospital, and very soon afterwards they organized a visit to the Westchester County Poorhouse, which was the first place that Schuyler visited after her return from England in 1871.

One of the major concerns of the association in the process of the hospital reforms was the improvement of nursing. Even though the committee met resistance from most of those in authority and the physicians who worked in the hospitals, they remained determined and they appealed to the public for funds. Dr. Gill Wylie, a supporter of the reform, was sent abroad to gain some information from Nightingale⁷⁹ and from the school

⁷⁵ "At the meeting Miss Schuyler assembled a group of ladies who had worked with her during the Civil War. They responded to her call, and she invited them, with others, to join her in forming a Visiting Committee for Bellevue and other public Hospitals of the city of New York. Later she secured legislation, which authorized the members of the State Charities Aid Association, which was founded by her, and of which this Visiting Committee formed part, to visit all the State county institutions of Public Charities in the state of New York for the purpose of reporting their conditions and bringing about reforms." Giles, *A Candle in her Hand*, 68.

⁷⁶ Ibid., 70.

⁷⁷ Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 139.

⁷⁸ Ibid., 147.

⁷⁹ Florence Nightingale is a person who is widely recognized as the first person who made changes in nursing as profession by organizing the first school of nursing connected to St. Thomas' Hospital in England in 1860. Nightingale was born on May 12, 1820, as a younger daughter of William Edward and Frances Smith Nightingale. She grew up in a wealthy family and received a good education from her father and her governess. All her life she desired to become a nurse and help the poor and sick. At the age of 17, as she recalls: "On February 7, 1837 God spoke to me and called me to His service." Hebert, *Florence Nightingale*, 2-3; Frank, *The Historical Development of Nursing*, 215-220; Hugh Small, *Florence*

which she organized and helped. Thus, the school of nursing at Bellevue was founded on the same principles. This same system became known in the United States as the Bellevue System. This was the first school of nursing established in the country.⁸⁰

The Visiting Committee Project and Its Outcome

From their first visit to the Bellevue Hospital, and the other public hospitals in the city as well, the visiting committee members came back with the growing conviction expressed by Louisa Schuyler: “no permanent improvement could be made just through the establishment of a training school for the nurses employed in its wards.”⁸¹

The committee found the conditions so horrible that they were filled with disgust and pity. In New York City a group of women under the leadership of Joseph Hobson

Nightingale: Avenging Angel (New York: St. Martin's Press, 1999), 5-54; Dolan, *Goodnow's History of Nursing*, 190-194; Goodnow, *Nursing History in Brief*, 79-85; Dietz and Lehozky, *History and Modern Nursing*, 62-63; Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 22-24; Gillian Gill, *Nightingales: The Extraordinary Upbringing and Curious Life of Miss Florence Nightingale*, 1st ed. (New York: Ballantine Books, 2004), 57-61, 71-73, 129-133, 282-287, 297-309, 315-318, 337-345, 381-384; Morison and Fegan, *Continued Study Unit in History of Nursing*, 9; Frank, *The Historical Development of Nursing*, 217; Goodnow, *Nursing History in Brief*, 80-81; Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 34, 38-42. In 1856 she received a letter from the Secretary of the War to go to Crimea and help with the nursing of the sick and wounded soldiers. She accepted the invitation and went to Scutari with 38 nurses. In two months she had transformed the hospital into an efficiently managed institution. In six months she had reduced the death rate to 2 per cent. Soldiers loved her. She used to work night rounds and was given the title “The Lady with the Lamp.” Dolan, *Goodnow's History of Nursing*, 194-195; Eberle, *Nurse!: The Story of a Great Profession*, 71-73. Nightingale demanded clean dressings, clean bedding, well cooked, edible food, proper sanitation and fresh air. It was to these improvements that she attributed the lower death rate. Dietz and Lehozky, *History and Modern Nursing*, 63. Her work in the war included more than reforming the hospital and organizing comfort for thousands of soldiers. It had broken through an age-old prejudice and made the world realize that women were needed in every day in life. She had made the public see what good nursing meant and given the world a new conception of a woman's place in it. Goodnow, *Nursing History in Brief*, 87. Summarizing her thoughts about the great work she did for humanity, Josephine Dolan says the following: “Florence Nightingale cannot be considered as the product of her time, since she was ahead of and beyond it, but the season was ripe for her genius as the founder of modern nursing.” Dietz and Lehozky, *History and Modern Nursing*, 189.

⁸⁰ Jensen, *A History of Nursing*, 159.

⁸¹ Giles, *A Candle in her Hand*, 103.

undertook to investigate the conditions at Bellevue Hospital. They found that no nurses were assigned at the wards to care for the sick and poor who were lying there. The only attendants were rough laborers who had no knowledge of the importance of cleanliness and no training in looking after the sick.⁸² The staff that nursed the sick served the food by simply laying it on a wooden table. The patients had to get up out of their beds to eat, usually without forks, spoons, or knives.⁸³

The visiting committee members tried to improve matters but could not make much progress. What they could do to relieve the sick under such dreadful hospital management seemed almost too little to be worthwhile. They decided that they must try to get at the bottom of the trouble – that they must do something drastic. They came to the conclusion that the first thing they must do was to try to get the hospitals to train and employ women of fine character for the work. There had to be a school where nurses could be trained. They meant to start such a school and decided to learn as much as they could from Nightingale in London before they started their plans.⁸⁴

This conviction brought about the formation of a committee to establish a training school, which was chaired by William H. Osborn. They scheduled their first meeting on March 5, 1873.⁸⁵ Meanwhile the committee continued to make their weekly visits to the

⁸² Eberle, *Nurse!: The Story of a Great Profession*, 109. In the notorious Five Points Police Courts of that time drunken prostitutes were often given the option of going to prison or into hospital service. There were 800 patients in Bellevue Hospital when the inspection took place, each nurse had 30 – 40 patients under her care, and there were no night nurses – 3 night watchmen being employed who visited the wards in turns, and gave any essential attention. Pavey, *The Story of the Growth of Nursing as an Art, a Vocation, and a Profession*, 351.

⁸³ Eberle, *Nurse!: The Story of a Great Profession*, 109-110; Goodnow, *Outlines of Nursing History*, 164.

⁸⁴ Eberle, *Nurse!: The Story of a Great Profession*, 110.

⁸⁵ Those present were: Mrs. D'Oremieulex, Mrs. Robert Woodworth (secretary), Mrs. Joseph Hobson, Mrs. William Preston Griffin, Miss Abby Howland Woolsey, Miss Ellen Collins, Miss Julia

hospitals. They learned, among other things, that there were no “night nurses.” The wards were locked and three-night watchmen made the rounds of six hundred patients.⁸⁶

Hobson wrote about her experiences:

One day, on my way home, I shopped at a bookseller’s and ordered Miss Nightingale’s works and some treatises on hospital management. These I studied, and with the members of my committee visited the Hospital constantly. We had learned a great deal in that first month. Miss Nightingale’s papers had taught us what was required and what ought not to exist in a hospital. But oh, how low our standards were. How much we had to learn and act up to, certainly in Bellevue – the largest hospital I had ever seen with 32 wards and over 800 patients.⁸⁷

It was a strict rule of the Visiting Committee that each member kept an accurate detailed account of all that she saw and heard during her visits to the hospitals. A number of these little notebooks have been preserved and are in the historical collection of the Training School for Nurses at Bellevue.⁸⁸

It would seem from the notebooks that the visitors fulfilled the requirement to give an accurate account during their weekly visits to the wards. The women were knowledgeable of the roles of hygiene and sanitation in healthcare, as these matters were understood during their time. They were actively and passionately concerned with all that they saw and heard and were impressed by the urgent need to improve the conditions for

Gould, Mr. Henry G. Stebbins (treasurer), Mr. Chandler Robinson and Dr. Gill Wylie of Bellevue Hospital. Giles, *A Candle in her Hand*, 72.

⁸⁶ Ibid., 73.

⁸⁷ “The days passed. We learned, among other things that there were no regular night nurses. A man called a night-watchman passed through the wards and if he found a patient very ill or dying he called a young doctor. Occasionally patients were found dead in the morning, which were overlooked. Rats scampered over the floors at night.” “The condition of the patients and the beds was unspeakable, the one nurse slept in the bathroom, and the tub was filled with filthy rubbish. That was an Irishwoman of low class, and to her was confided the care of twenty patients and her only helper was a women drafted from the workhouse, many of whom had been sent there for intemperance.” Ibid.; Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 142.

⁸⁸ Giles, *A Candle in her Hand*, 73; Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 142.

the benefit of the poor of the city. They made for themselves and strictly adhered to a set of rules for their visits. The visits were made regularly at least once a week and not on the same day of the week. They established it a rule to remove their cloaks and bonnets before entering the wards and to appear among the patients on as informal and friendly basis as possible.⁸⁹

The Doctors' Reactions to the Idea of Opening a School for Nurses

Most of the physicians did not like the idea of women visiting the hospital. But after the doctors saw the improvements and benefits of the women's committee recommendations they began to change. William Osborn wrote:

Had a long talk with Dr. Mitchell. He confessed to me that there had existed at first among the physicians a great prejudice against our Association. They felt that we would find fault, make trouble, then get tired and summer would disperse us. Now he said, they were not only reconciled to our visits but felt that we had achieved many great and useful reforms and that our visits had an excellent effect on the patients.⁹⁰

The Committee of the Training School was busy with its plans. Although it was formed, nothing was said about it to General Bowen. It was not until the work of the Visiting Committee was well under way that Mrs. Hobson dared to talk about the subject. General Bowen had never heard of a training school for nurses and did not know what it was. This is not surprising for there were none in the United States.⁹¹

General Bowen was strongly in favor of the proposed reform; this point of view was neither shared by many of the other commissioners nor by the members of the

⁸⁹ Giles, *A Candle in her Hand*, 79.

⁹⁰ Ibid., 77; Goodnow, *Outlines of Nursing History*, 165.

⁹¹ Giles, *A Candle in her Hand*, 81.

Bellevue Hospital Medical Board. Many of these gentlemen were exceedingly scornful of women interfering in the Hospital's management.

Surprisingly, however, the doctors of the Bellevue Hospital Medical Board were their chief antagonists. Their comments were that the members of the Visiting Committee were ignorant women and that they were interfering with what was none of their business. When the women tried to improve the nursing service, the board stated that they preferred nurses who would do as they were told. It was believed that the educated, intelligent women they proposed to introduce would not be amenable to discipline.⁹²

But not all of the doctors were so antagonist in their thinking. Some of them were very supportive and one of them, Dr. Ernest W. Cushing of Boston, was even dismissed from the Hospital for giving his support to the Visiting Committee.⁹³ There were other doctors who also supported and defended their work.⁹⁴

In April 1872, after three months of visiting the hospitals, the committee knew what was needed and what they wanted. They decided that the Training School for Nurses at Bellevue Hospital would follow the training pattern of Nightingale's (1820 - 1910) Training School at St. Thomas' Hospital, London.

⁹² Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 149.

⁹³ Giles, *A Candle in her Hand*, 82; Goodnow, *Outlines of Nursing History*, 165.

⁹⁴ Those were: Dr. James R. Wood, Dr. Stephen Smith, Dr. Austin Flint, Dr. Tomas M Markoe, Dr. Gill Wylie. The main support came from General Bowen, the President of the Board. Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 150.

St. Thomas' Hospital in England: Prototype of the Future School of Nursing in Europe and the United States

The first School for the education of the nurses was opened in London in June 1860. It was named St. Thomas School for Nurses. Nightingale was a conceptual leader and the key organizer of this school.⁹⁵

As we mentioned earlier, by the year 1856 Nightingale became one of the most famous persons in England. In July of that year, she returned from the Crimean War and had become the heroine of England. Sidney Herbert, the Secretary of War, and the people of England wanted to honor Nightingale in some special way. Until that time Herbert also had adopted a vision of nursing and suggested a Nightingale Fund, which would be used for the training of nurses. Many prominent persons agreed and contributed to the fund approximately \$200,000 (£40,000). Since the project was the fulfillment of her dearest wish, Nightingale readily accepted the task of administering the fund.⁹⁶

St. Thomas' Hospital in London was selected as the place for this new plan to train and educate nurses. It was the first fully endowed school of nursing in the world and because it was economically independent of the hospital it could do many things, which would otherwise have been impossible. As it was usually the case when some new ideas arose, the plan was met with great opposition, mainly from doctors. Out of one hundred doctors who were asked for their opinion, only four favored the idea. Doctors themselves trained the nurses at St. Thomas' Hospital.⁹⁷

⁹⁵ Austin, *History of Nursing Source Book*, 265; Dolan, *Goodnow's History of Nursing*, 199; Dietz and Lehozky, *History and Modern Nursing*, 64; Frank, *The Historical Development of Nursing*, 225.

⁹⁶ Dolan, *Goodnow's History of Nursing*, 198; Goodnow, *Nursing History in Brief*, 87; Goodnow, *Outlines of Nursing History*, 103.

⁹⁷ Dolan, *Goodnow's History of Nursing*, 198.

The St. Thomas School for Nurses was opened in June 1860. It was hoped that Nightingale would take charge of the School, but her health was not quite well.⁹⁸ She was not even able to present at the opening ceremony. After she came back from the war very much affected with her illness which she obtained at the end of the war, she lived most of the time of later life in isolation. It was very difficult to get an appointment with her, and it could be done only if she was convinced that it was of great importance.⁹⁹

Sarah Elizabeth Wardroper¹⁰⁰ was the first superintendent of that school, where she remained in the position for 33 years. She was an influential woman who was gifted in organization and administration. She had been in charge of the untrained personnel for some years at St. Thomas and had learned nursing simply by personal practice and rose to the position of matron in 1853. However, Mrs. Nightingale selected the students and advised them on details. Mrs. Wardroper was courageous and her judgment of character was remarkable. She was straightforward, true, upright and determined. She was responsible for much of the success of the Nightingale School.¹⁰¹ All of these

⁹⁸ In 1854 Nightingale, accompanied by three of the Catholic sisters, made a tour of inspection of the hospitals of Balaklava in the Crimea. She went over them carefully, planning changes and improvements. One evening she complained of being tired. After an examination it was found that she had contracted Crimean fever. She was desperately ill, and came very close to death. Soldiers wept when they heard of her illness, and all England awaited the outcome. In a few weeks she was better and refused to take more rest. She went back to Scutari. After her return to England, because of exhaustion, her health deteriorated. Goodnow, *Outlines of Nursing History*, 101; Gill, *Nightingales: The Extraordinary Upbringing and Curious Life of Miss Florence Nightingale*, 437.

⁹⁹ Dolan, Goodnow's History of Nursing, 198-199; Goodnow, Nursing History in Brief, 88; Goodnow, *Outlines of Nursing History*, 105-106.

¹⁰⁰ She put her entire life into the work she had undertaken. She was left a widow at 42 with a young family. She had never had any training in hospital life. Her force of character was extraordinary. She was a strict disciplinarian, but very kind and affectionate. She passed away quite peacefully in her 80th year on December 15, 1892. Austin, *History of Nursing Source Book*, 264-266.

¹⁰¹ Ibid., 265; Dolan, Goodnow's History of Nursing, 199; Dietz and Lehozky, *History and Modern Nursing*, 64; Frank, *The Historical Development of Nursing*, 225.

characteristics played a major role in Mrs. Nightingale's decision to choose her to be the first teacher, instructor, and leader of the nurses in the first organized school for nurses.

For women eager to be trained as hospital nurses, the Committee of the Nightingale Fund made arrangements with the authorities of St. Thomas Hospital to give a year's tuition for the training of women between ages 25 and 35. The Hospital would provide board and lodging for free together with some surplus tea, sugar, washing, and a certain amount of outer clothing. A stipend was given to them, which was 10 pounds annually. In June 1860 fifteen selected probationers were admitted for training at St. Thomas, none of them was under 25.¹⁰²

The selected probationers were under the charge of the Matron and were instructed by the ward sisters (those in charge of department or wards) and the Resident Medical Officer. The training lasted one year, which was considered sufficient, but the nurses were required to remain in the hospital for three years for added experience. A certain amount of control after graduation was advocated.¹⁰³

The program included organized instruction taught by the medical and nursing staff and practical experience under the supervision of nurses. Moral training permeated all phases of the program, which also included instruction on prevention of disease as well as care for the sick. The mental as well as the physical welfare of the patient was emphasized in addition to the health of the family and community were stressed. Books, maps, charts and other equipment were provided to aid in the learning process.¹⁰⁴

¹⁰² Dolan, *Goodnow's History of Nursing*, 199; Goodnow, *Nursing History in Brief*, 89; Goodnow, *Outlines of Nursing History*, 107.

¹⁰³ Dolan, *Goodnow's History of Nursing*, 199.

¹⁰⁴ Frank, *The Historical Development of Nursing*, 227.

The students wore uniforms that consisted of a brown dress with white cap and apron.¹⁰⁵ At the end of the year, if their training had been found satisfactory, their names were written in the Committee's register, and they were recommended for a position as a hospital nurse.¹⁰⁶

The Nightingale School admitted two groups of students. The nurse probationers, who were trained for staff nursing, and the lady probationers, who were paid a fee by the school and who were trained for leadership, teaching, and administrative functions. The students resided in a comfortable building where each one was assigned a private room. Home activities included daily prayers, weekly church services, daily exercise and rest, and bi-weekly reading and study classes.¹⁰⁷

Records of achievement encompassing character development and technical proficiency were kept for every student. Students could be dismissed at any time in the program. The control that Nightingale had over the students was so strong that she arranged for their employment after graduation and then followed them through frequent correspondence, with letters of advice and directions.¹⁰⁸

The profile of the woman who wanted to become a nurse was the following: "For the future nurse we require that a woman be sober, honest, truthful, without which there is no foundation on which to build."¹⁰⁹

¹⁰⁵ Dietz and Lehozky, *History and Modern Nursing*, 64.

¹⁰⁶ Austin, *History of Nursing Source Book*, 266.

¹⁰⁷ Frank, *The Historical Development of Nursing*, 227.

¹⁰⁸ *Ibid.*, 228.

¹⁰⁹ Austin, *History of Nursing Source Book*, 267.

We want gentle women who come with settle purpose to do the work, free from all romance and affection but yet not wanting in some genuine enthusiasm, possessed of that valuable and uncommon quality common sense. They must come prepared to make sacrifices without thinking themselves self-sacrificing ... impressed with the dignity of their work, the essential importance of the way it is done, to think nothing beneath them, or too small to be well and thoroughly done. They must not be self-important but remembering that they are members of a community.¹¹⁰

The Nightingale Training School for nurses required students to be 25 years old and this was the general pattern in the United States as well.¹¹¹

The woman who was accepted was trained in different areas:

We train them in habits of punctuality, quietness, trustworthiness, and personal neatness. We teach her how to manage the concerns of a large ward or establishment. We train them in dressing wounds and other injuries, and in performing all those minor operations which nurses are called upon day and night to undertake. We teach them how to manage helpless patients in regard to moving, changing, feeding, temperature, and the prevention of bed sores.¹¹²

Nightingale's students were required to be proficient in reading and writing. She insisted that a student had to be taught why things were so and that they be given time to learn. She had such a close relationship with all of them that she always called the nurses her "daughters."¹¹³

¹¹⁰ Ibid., 269.

¹¹¹ Dietz and Lehozky, *History and Modern Nursing*, 106.

¹¹² Austin, *History of Nursing Source Book*, 267. The candidates who were best qualified for the ordinary duties of the Hospital nurse appear to be daughters of small farmers who were used to household work and well educated domestic servants. Ibid., 269.

¹¹³ Dolan, Goodnow's History of Nursing, 199-200; Goodnow, *Outlines of Nursing History*, 107.

Nightingale became adviser in general to the hospital in nursing matters. She held this position not only in England but very soon around the world. She was called to evaluate plans and advise in construction, equipment, and management. She was consulted concerning questions of policy and every new phase of nursing and most of those who organized the first schools in America, in different ways, consulted her.¹¹⁴

In 1859 before the School was organized and opened Nightingale published her *Notes on Hospitals*, which is considered the most valuable work of its kind. Writing and publishing this book, Nightingale raised the status of nursing to a dignified occupation and improved the quality of nursing care. She is considered the founder of modern nursing education. She died on August 13, 1910 at the age of 91.¹¹⁵

Development of the Organization of the Bellevue School of Nursing

As stated previously, Hobson and Schuyler closely studied the methods of Miss Nightingale and tried to follow and implement many of them, which she gave directly and indirectly through her letters and books. They generated the plan and presided over their implementation.

The first step in the organization was to get the consent from the Commissioners of Charities. Lane and Schuyler were deputed to confer with Commissioner Bowen and lay the project before him before making a formal - written application to the Board. General Bowen received the proposition favorably and promised to advocate for it with his colleagues and with the hospital Board. He was assured that if they were allowed to

¹¹⁴ Dolan, Goodnow's History of Nursing, 200; Goodnow, Nursing History in Brief, 91.

¹¹⁵ Dolan, Goodnow's History of Nursing, 202.

have charge of the nursing of three or five wards that they would cover the cost. Then the Committee would meet any additional expenses. This was agreeable to both sides.¹¹⁶

In the end General Bowen frankly told the delegates of the Visiting Committee that he could not get an appropriation from the board to establish and support a school of nursing. But Schuyler and Osborn assured him that if the Visiting Committee was allowed to have full charge of the nursing of three or four wards of the hospital, they could improve the conditions in the hospital. This resulted in General Bowen giving his permission at the end of the meeting.¹¹⁷

The Summer 1872 passed and no notice was taken of their application. But, the Visiting Committee members did not waste time. Hobson was appointed the chairman of the hospital committee responsible for preparing a plan for the organization of the school. The first thing to do was to learn exactly how the work of such a training school was to be conducted. Dr. W. Gill Wylie, a member of the Hospital Committee, offered to go to England at his own expense and get the practical information they needed.¹¹⁸

Dr. Wylie spent three weeks in St. Thomas' Hospital and was allowed to visit every facility. He began his communication with Nightingale, who wrote him a lengthy correspondence stating the fundamental principles of the management of the training school. The members of the Visiting Committee always pointed to this letter as the Constitution of the School in Bellevue.¹¹⁹

¹¹⁶ Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 151.

¹¹⁷ Giles, *A Candle in her Hand*, 82.

¹¹⁸ Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 151-152.

¹¹⁹ Ibid., 152; Giles, *A Candle in her Hand*, 82-83; Eberle, *Nurse!: The Story of a Great Profession*, 110. In the summer 1872 the young doctor W. Gill Wylie, journeyed to London to gain information and advice. He made an intensive study of the nursing practices at St Thomas and in the

In September 1872 the Hospital Committee of the Association, submitted its plan for the School, and reopened negotiations with the Medical Board. The Medical Board approved the plan and they were free to act. After its approval, Hobson prepared a pamphlet and an appeal was made to the public for funds to establish the school. Within six weeks over \$23,000 was pledged.¹²⁰

There was much preliminary work to be done. Before they started, the committee realized that the hospital needed some improvements: the walls needed to be washed with carbolic soap, the floors needed to be dry scrubbed with earth saturated with carbolic acid, bedsteads had to be cleansed with carbolic soap and painted. In addition, fresh ticks needed to be filled with oat or rye straw. Furthermore, a nurse's room and kitchen were needed and the elevator needed to be repaired.¹²¹

Mrs. Osborn and Mrs. Hobson undertook to visit all the hospitals in New York and in Boston to observe nursing practices and to inform themselves on hospital regulations. There was the immediate necessity of finding out how such a training school should be established and conducted.

After Dr. Wylie made the trip to England and came back with some plans and much advice, the nurse's training school was shortly established at Bellevue.¹²² The question that was in the mind of the founders of the school for nurses was how they would define the instructions, the duties, and the position of the nurses in distinction to

hospital attached to the University of Edinburgh. He had hoped to meet Miss Nightingale and discuss with her the plan of establishing a training school at Bellevue. But he was disappointed because Mrs. Nightingale's health was not so good and she could not meet with him. Giles, *A Candle in her Hand*, 85.

¹²⁰ Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 153.

¹²¹ Giles, *A Candle in her Hand*, 98-99.

¹²² Eberle, *Nurse!: The Story of a Great Profession*, 110.

those of doctors. Will they run into or overlap each other's duties? However, the committee believed that the duties of a nurse were very clear. The duties of a nurse can never clash with the medical duties of doctors. The purpose of their training is to enable them to understand how best to carry out medical and surgical orders, including the art of cleanliness, ventilation, and nutrition.¹²³

The Organization of the Bellevue School of Nursing

While Dr. Wylie was in England, permission had been given by the commissioners to open the proposed school on May 1, 1873 and authorities had agreed to turn over to the school of nursing six wards of the hospital. Dr. Wylie could not personally meet with Miss Nightingale, but a letter from her was waiting for him when he returned from England. In the letter, she stressed the necessity of having the nursing in the wards done by pupils of a school directed by a woman superintendent, who should be appointed by and responsible to the Committee of the Training School. It was important that the question of authority and responsibility should be settled from the start and be thoroughly understood by everyone connected with the hospital.¹²⁴

There were several problems that should be solved. The first and maybe the biggest one was where to find a woman superintendent sufficiently trained according to Nightingale's standards in the United States, when at that time there was none. They issued a circular letter through the country's districts, inviting applications.¹²⁵ The second

¹²³ Giles, *A Candle in her Hand*, 87.

¹²⁴ *Ibid.*, 91.

¹²⁵ "The promise was made to open the School on the first day of May, but the first of February arrived and they could not find a trained superintendent. They could find no woman in the country with the

problem was finding a home for the superintendent of the school and the student nurses. It was important that the nurses be housed conveniently near the hospital. The third issue to be solved was finding new students who would enroll for the next school year.¹²⁶

The committee placed an advertisement in the New York *Herald* for nurses trained in England or in Continental schools. Six applicants replied to the advertisement, but as it turned out, none of these had any training to meet this qualification.¹²⁷ Another advertisement for students, which the Committee placed in the New York papers and a letter, circulated through some of the rural counties brought a number of applications. In all some 70 applications were received and of these 19 pupils were accepted. The applications came from as far as Colorado territory, Minnesota, and even California, showing how widespread the interest was in this new opportunity for women to work outside of the home. At that time to call nursing a profession publicly would have met with incredulity and opposition. But, they were truly pioneers in the emancipation of women and in raising not only the standards of nursing but also the status of women in this honored profession.¹²⁸

As they tried to solve the third problem, after several weeks of investigation, the Training School Committee resolved to lease a home for nurses at 314 East 26th Street. The home was repaired and painted. The work of furnishing the house was a personal

qualifications Miss Nightingale required. The only nurses available were ordinary monthly nurses.” Ibid., 92.

¹²⁶ Ibid., 91.

¹²⁷ Ibid., 92.

¹²⁸ Ibid., 91.

labor of love of the members of the Training School Committee. The ladies worked as if the residence for nurses were their own private home.¹²⁹

During the winter and the beginning of spring the Committee remade the hospital mattresses and pillows. But, still they did not have a superintendent. Four women who were ordinary monthly nurses, but who were well recommended as of good character and experience, had been engaged as head nurses.¹³⁰

As time went by they needed somebody to work as a superintendent. Mrs. Hobson wrote: The first of April came. I was in despair, and expressed my anxiety to Mrs. Osborn. I don't despair she said. I have so prayed for the success of this work and I have such faith in it that I shall make that superintendent's bed, confident that she will come to occupy it." And she did make all the preparation with her own hands. All those who knew her believed that she murmured her prayers as she carefully smoothed the sheets.¹³¹

The answer to her prayers came to fruition very soon. Hobson remembered:

A few days after this conversation, while I was at home one morning, my servant announced that a person who looked like a Sister of Charity wished to see me. A woman in a formal religious habit entered the room. At first sight she was of not so much attractive appearance, but when she spoke, her beautifully trained English voice dispelled the first unpleasant impression. She said: "I am told you are establishing a Training School for Nurses in New York. I have had some experience in that work and as I am free to remain a while in United States and I shall be glad if I can be of my service to you."¹³²

Her name was Helen Bowdin, Sister Helen of the Order of All Saints, an order of the Church of England, which had made improvements in nursing at the University

¹²⁹ Ibid., 93.

¹³⁰ Ibid., 91.

¹³¹ Ibid., 93; Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 155-156.

¹³² Giles, *A Candle in her Hand*, 94.

College Hospital in London.¹³³ Sister Helen was a great nurse and very capable person.¹³⁴ She had been sent to Baltimore to establish a branch of the Order in that city. Now she had a leave of absence, which gave her the time she offered to Bellevue Hospital.¹³⁵

Sister Helen was asked to meet the Committee the next day. Meanwhile, they sent a telegraph to Baltimore for information to corroborate the statements of Sister Helen. The report was satisfactory in regards to her ability and experience. Sister Helen was accepted and introduced to the members of the Training School Committee. She started work on April 16 as the new superintendent.

As it was planned the school was opened on May 1, 1873. She brought thorough training to Bellevue Hospital and though Nightingale never trained her, she was fully acquainted with the principles of that school.¹³⁶ She had had an excellent nursing education for that time, and wide experience, having worked in hospitals in England and the United States.¹³⁷

¹³³ Sister Helen or Miss Bowden was born in England and had been trained at the University College Hospital in London. At the time of her application she was in residence at the Community House in Baltimore. Ibid., 6; Goodnow, *Outlines of Nursing History*, 166.

¹³⁴ Woolsey, Nightingale, and Hobson, *A Century of Nursing*, 147. "Sister Helen was a wonderful woman, though she would not pass today as a well -trained nurse. She had a gift for organization, she knew how to distribute work to those best qualified to do their part well. She was a thorough and strict disciplinarian. She greatly prized good work, though she was not given to many words of commendation, and she required much of those who belonged to the school." Linda Richards, *Reminiscences of Linda Richards, America's First Trained Nurse* (Boston: Whitcomb & Barrows, 1911), 116.

¹³⁵ Giles, *A Candle in her Hand*, 94.

¹³⁶ Jensen, *A History of Nursing*, 160; Morison and Fegan, *Continued Study Unit in History of Nursing*, 14.

¹³⁷ Eberle, *Nurse!: The Story of a Great Profession*, 110.

The Opening of the School

The Opening of the Bellevue School of Nursing took place as anticipated on the 1 May, 1873.¹³⁸ The school had its superintendent, four head nurses, and six pupils who had passed the entrance requirement and had pledged themselves to obey the rules of the School during two years of training. Yet it was the stipulation of two years that deterred many from enrolling. Many women thought this was too much time to devote to training. They thought that whatever training a nurse required could be taught in six months.¹³⁹

A change in the public attitude toward hospitals developed. They no longer regarded such institutions as exclusively for the poor. As hospitals catered more to those who could pay, their status increased. During this period the public health movement took on its modern aspect.¹⁴⁰

During the summer months 1873 the training school began to develop into a settled institution. There was no class work and lectures were given irregularly.¹⁴¹

Shortly after the opening of the school, Bowdin reported to the committee the immediate necessity of engaging more head nurses. It was impossible for one nurse to be in charge of two wards at a time. They agreed that no probationers should be assigned to night duty. The committee voted to pay a salary of \$20 a month to the night

¹³⁸ In May 1873 the school was started with twenty-nine applicants for training. Many proved unsuitable, and some found the work uncongenial. Only six completed the full training. Pavey, *The Story of the Growth of Nursing as an Art, a Vocation, and a Profession*, 352.

¹³⁹ Giles, *A Candle in her Hand*, 96.

¹⁴⁰ *Ibid.*

¹⁴¹ Richards, *Reminiscences of Linda Richards, America's First Trained Nurse*, 16.

superintendent and \$16 per month to the night nurses.¹⁴² Linda Richards was engaged as the night superintendent.¹⁴³

Each week on Wednesday morning at 11am the members of the Training School Committee met faithfully and they reviewed reports from Bowdin and from the matron of the Nurses Home, Elizabeth Husband. On this weekly meeting every matter connected with oversight of the School was brought forward for discussion. They made decisions on all the upcoming questions and issues led by the Article of Incorporation and Nightingale's letter. The Article of Incorporation contained two main points: the name of the Society which shall be known as "The Training School for Nurses" and the object of this Society which would be the training of nurses for the care of the sick.¹⁴⁴

Three members of the Committee (William Osborn, Joseph Hobson, and William P. Griffin) were the force behind the Bellevue Training School of Nursing. Their enthusiastic interest and zeal for the advancement of the nursing profession never flagged. For the first quarter century of the School's experience they guided and formed its tradition and set the standards.¹⁴⁵

Thinking about the founders, superintendent, and first nurses of the Bellevue School of Nurses, Mrs. Dorothy Giles gives the following description:

¹⁴² Giles, *A Candle in her Hand*, 99.

¹⁴³ Linda Richards (Melinda Ann Judson Richards), who had graduated in 1873 from the course of training at the New England Hospital for Women and Children in Roxbury, Massachusetts, was engaged as the night superintendent. She was the first nurse to receive her certificate and became known as the First Trained Nurse in the United States. *Ibid.*; Jensen, *A History of Nursing*, 161.

¹⁴⁴ Giles, *A Candle in her Hand*, 100.

¹⁴⁵ *Ibid.*, 103.

The founders, the superintendent, and at least several of the first students who enrolled for training at Bellevue were all motivated by the ideal of service to humanity. They viewed their work in the light of a mission in which they were privileged to be coworkers with God. They believed in scientific knowledge and skill, which are needed to be good nurses, but they believed wholeheartedly in the dictum of Florence Nightingale: “To be a good nurse, one must be a good woman.”¹⁴⁶

The First Year. The prospectus of the School offered a two-year course in training, and the School’s founders, in line with Miss Nightingale’s recommendation, strictly enforced this minimum length of time. There were some objections to this. Applicants professed to believe that they could learn all they needed to be taught about nursing in a much shorter length of time. These differences in thinking brought some problems which the Board were called to face during the training of the first class. The discipline and rules were very strict and the students were obligated to obey. During the early period several students were dismissed for incompetence, disobedience, or because their health was not equal to the work.¹⁴⁷

In November 1873 when the School had been in operation just six months it was decided to place an advertisement for new probationers in the “Weekly Tribune.” The news of the Training School spread throughout New York and various organizations began to offer gifts to the School to help them, some of them in money and some of them

¹⁴⁶ Ibid. Into these schools there were intelligent young women with an eagerness to be of use in the world. They come out of the school full of enthusiasm and with good enough training and hospital experience to be able to help the progress of nursing along still further all over the United States. Richards, *Reminiscences of Linda Richards, America's First Trained Nurse*, 16.

¹⁴⁷ Giles, *A Candle in her Hand*, 107.

in clothing and other needs for their wards. After accepting these contributions, the Committee voted to use the money for medical lectures for the students.

Later that first year, the New York Hospital made an additional grant to a number of nurses for the Women's Hospital. This was evidence that the leading men in the city approved of the School's methods of training.¹⁴⁸ In May 1874 three maternity wards were turned over to the School of Nursing and Miss Richards was placed in charge.¹⁴⁹ On July 1, 1874 Dr. Isaac E. Taylor, president of Bellevue Medical Board, gave the obstetrical wards to the Training School Committee.¹⁵⁰

The first class of six students graduated in May 1875, having completed a course of two years, although the first year was only regarded as training.¹⁵¹ Sister Helen worked at Bellevue until 1876.¹⁵² Miss Elisa Perkins succeeded her, a woman who was not a nurse but who did excellent service for 15 years.¹⁵³

At that time written night orders and reports were unknown in hospitals. Night nurses would report to duty at 8 pm while Richards who was the night superintendent used to begin her shift at 7:30 pm. She would receive orders from head nurses who had covered day shifts and pass them on to the night nurses. In the morning, Richards would

¹⁴⁸ Ibid., 109.

¹⁴⁹ Ibid., 112.

¹⁵⁰ Ibid.

¹⁵¹ Goodnow, *Outlines of Nursing History*, 167.

¹⁵² Sister Helen went to America to work with a mission and was in Baltimore when she offered her services to Bellevue Hospital. She accomplished a marvelous pioneering work, but she returned to England in poor health in 1876. She recovered and worked as a nurse in the African wars. She died at All Saints House. She founded the first secular training school for nurses in America. Pavey, *The Story of the Growth of Nursing as an Art, a Vocation, and a Profession*, 352.

¹⁵³ Goodnow, *Outlines of Nursing History*, 167.

verbally pass the reports to the head nurses as they began their day shift. This was all done verbally. When Richards was on duty almost a year she kept notes of one case to be written up by a nurse for Sister Helen. Each nurse was required to write up a case. It was soon realized that this habit of making written reports about cases was very useful and each nurse was required to keep a record of one case.¹⁵⁴ Keeping written records became a requirement in all future schools nursing and hospitals. Taking these brief written notes laid the foundation for the system of medical records.¹⁵⁵

The Life of the Nurses. In the process of founding the School of Nursing one point was very important to the Committee. They saw the need that the nurses should live outside of and away from the hospital. They believed that the place where they lived needed to be as much like home as possible. New students were housed in a building rented for that specific purpose. Although many older nurses applied for acceptance into the school they were refused because young girls from the higher classes rather than the servant class were recruited in order to make nursing an attractive career. Their training followed a schedule but included irregular lectures. The success of the school was obvious since three additional wards were added to the 6 that already existed.¹⁵⁶

¹⁵⁴ The doctor of the division saw the report and thought it was for him. He was glad of it, as it helped him in his notes of the case, and after that he asked Mrs. Richards to write reports of all serious cases. This was the beginning in Bellevue of a custom now considered an elemental necessity in all hospitals and in all serious cases of illness under the care of trained nurses.” Giles, *A Candle in her Hand*, 117.

¹⁵⁵ “Dietz and Lehozky, *History and Modern Nursing*, 97; Goodnow, *Outlines of Nursing History*, 167. Remembering the time she spent at Bellevue Linda Richards wrote: “I have always been glad that I went to Bellevue because of the very valuable experience I gained there. I have often since told my nurses during my long life in hospital work that experience comes only in hard work and I certainly had my full share of that while at Bellevue. After the completion of my year’s work at Bellevue it was with sincere regret that I refused the kind offer to remain as Sister Helen’s assistant, but a desire to take up the special work of training school organization induced me to go to a new field which was the Massachusetts General Hospital from Nov 1874.” Giles, *A Candle in her Hand*, 117.

¹⁵⁶ Giles, *A Candle in her Hand*, 117.

Great emphasis was put on the importance of the health and morale of the pupils. They should have a comfortable, cheery home where they can each day throw off the stress of their profession and rest when exhausted. The School attributed the good health enjoyed by the pupils to their daily walks to and from the Hospital.¹⁵⁷

Rules were set for the pupils, enforcing regular hours for making beds and changing linen. The members of the nursing school committee wished their pupils to be religious women, but did not require that they should belong to any given sect. Their doors were open to Catholics and Protestants of any denominations.¹⁵⁸

Uniforms for the Nurses. In the beginning the uniform was not very strictly standardized. It consisted of a simple calico dress and flat slippers.¹⁵⁹ When the School was organized, General Bowen told Sister Helen that uniforms were essential for the nurses. There is no record that any effort was made to have the nurses and students wear a distinctive dress. The school had been in operation for nearly a year before the committee, after reading over the rules at the New Haven Training School for nurses, decided to give large white aprons to nurses for afternoon wear. There are photographs of nurses in dark woolen dresses, white aprons – none of them were of the same design – and white caps of various designs.¹⁶⁰

In December 1875 the Secretary drew attention to the ladies' caps and a paper was written for the Committee in which it should be impressed upon the nurses that the

¹⁵⁷ Ibid., 147.

¹⁵⁸ Ibid., 163.

¹⁵⁹ Ibid., 161.

¹⁶⁰ Dietz and Lehozky, *History and Modern Nursing*, 168; Giles, *A Candle in her Hand*, 120.

caps were intended to cover the hair and not to be simply ornaments.¹⁶¹ At a meeting of the Training School Committee on February 6, 1876 the necessity of uniform dress was discussed. In engaging a pupil, she should be told that her wages for her first month will be kept back to furnish her with a simple hospital outfit. Mrs. Lane and Mrs. Osborn made an estimate of the quantity and cost of material required for the present nurses.¹⁶²

The tradition long cherished by the Training School concerning the origin of the nurse's uniform can be traced to Miss van Rensselaer. After returning from a few days' leave she wore a neat, plain gown of blue and white striped cotton material, with white collars and cuffs and a white apron. Her new uniform appeared handsome and contrasted the simple uniform then worn. This dress was copied by the other nurses and ultimately became a model for the Bellevue uniform. It became a symbol of devotion and efficiency, respected wherever the name Bellevue Hospital was known.¹⁶³

The Course of Training and the Curriculum. The first class of six probationers had not been easy to secure. Many applied but few were chosen. But, by 1876 the enrolment had grown to forty pupils. During the year there were more than two hundred applications for admission to the School. Of these, 29 were selected for entrance as probationers and seven of them were rejected at the end of the month, indicating that there was a very careful selection process. Of these only fifteen students graduated in 1876, which indicates the school's high standards.¹⁶⁴

¹⁶¹ Giles, *A Candle in her Hand*, 120.

¹⁶² Ibid.

¹⁶³ Ibid., 121; Dietz and Lehozky, *History and Modern Nursing*, 168-170.

¹⁶⁴ Giles, *A Candle in her Hand*, 140. Seventy-three had applied for training, and 29 had been accepted. Some were dismissed and some dropped out. Goodnow, *Outlines of Nursing History*, 167.

The caliber of the nursing was so satisfactory that, gradually, the Medical Board transferred other wards to the Training School. By February 1, 1876 the School's nurses were working and learning in nine wards - 160 beds. At the end of 1877 there were 12 wards with 192 beds, which were cared for by the head nurses and fifty students.¹⁶⁵

Those women who fulfilled the conditions of the probationary month were accepted as Pupil Nurses. They had to sign a written agreement to remain at the School for one year and after that time to remain subject to the orders of the Committee.¹⁶⁶

The students were instructed in several areas:

The dressing of blisters, burns, sores and wounds; the application of fomentations, poultices, and minor dressings

The application of leeches externally and internally

The administration of enemas for men and women

The management of trusses and appliances for uterine complaints

The best methods for frictions to the body and extremities

The management of helpless patients, moving, changing, giving baths in bed, preventing and dressing bed sores, and managing positions

Bandaging, making bandages and rollers, lining of splints

Making patients' beds and removing sheets while patients were in bed.¹⁶⁷

The curriculum at Bellevue school included six months of courses, which were largely devoted to the study of nursing arts, social science, and the biological sciences as

¹⁶⁵ Giles, *A Candle in her Hand*, 140.

¹⁶⁶ *Ibid.*, 141.

¹⁶⁷ *Ibid.*

applied to nursing. After the student received sufficient instruction to do simple nursing procedures she would begin to go to the wards for four to six hours each week. This helped connect classroom instruction with the care of the patients.¹⁶⁸

The pupil nurses would attend operations and assist with them. They were taught how to cook different kinds of meals for every kind of disease and to prepare drinks and stimulants for the sick. They had to understand the art of ventilation, to make accurate observations and report to the physician the state of various aspects of the patient's health, such as the pulse, temperature, and breathing.¹⁶⁹

Attending and resident physicians and surgeons conducted the teaching at the bedside of the patient. The superintendent and head nurses also taught. The managers recognized the importance of education in the training of a nurse. Mrs. Griffin was appointed a committee to select the lecturers and arrange for courses of instruction. One of the first physicians to lecture to the student nurses was Dr. Frank Hamilton, Professor of Surgery of Bones and Accidents at the Bellevue Hospital Medical College. Miss Griffin made an arrangement that each physician who accepted the School's invitation to lecture should be asked to give one hour monthly. The time was divided into two periods: an address lasting 45 min, and 15 min for an examination of the students after the lecture. Miss Griffin proposed to pay ten dollars per lecture to any of the young physicians who gave their time. The older doctors should not be paid. They should feel rewarded by simply doing a good deed.¹⁷⁰

¹⁶⁸ Jensen, *A History of Nursing*, 161.

¹⁶⁹ Giles, *A Candle in her Hand*, 141.

¹⁷⁰ *Ibid.*, 108.

Student nurses were lodged at the school's housing facilities and were paid \$10 a month for clothing and personal expenses. When the first year expired, they were promoted to positions if they were found capable. They also got salary increase.¹⁷¹

Twenty-six nurses graduated from Bellevue in 1878. In the next year the class numbered 30 graduate nurses. Griffin reported to the committee that it was no longer difficult to secure lecturers to speak to the nurses because now it was considered an honor to lecture before Bellevue nurses.¹⁷²

The business of the School had increased to such an extent that a bookkeeper was required. The School's nurses were now active in most of the wards of the hospital. When the full term of two years was ended, the nurses were at liberty to choose their own field of labor, whether in a hospital, a private home, or a district. On leaving the School they would each receive a certificate describing their ability and good character, which was signed by the physicians of the Committee and the Superintendent. This certificate was renewed at fixed periods in order to prevent the public from being imposed upon and to keep up the nurses' interest in the home.¹⁷³

The Broadening of the School Program. As the work of the School extended to the Hospital's wards, the managers of the School felt the need to broaden the education of the student nurses. The following is an example of the lecture schedule from 1875:

- Circulation, Respiration, Digestion, Women and Care of Children
- Dr. Beverly Robinson 8 lectures

¹⁷¹ Ibid., 142.

¹⁷² Ibid., 149.

¹⁷³ Ibid., 142.

- Obstetrics - Dr. Murray 4 lectures
- Urine, Wounds, Eruptive and Typhoid Fevers - Dr. Hill 10 lectures
- Anatomy, Physiology and Digestion - Dr. Isham..... 10 lectures
- Digestion - Dr. Wisters 3 lectures
- Obstetrics - Dr. Polk 2 lectures
- On Walking - Dr. Crosby 1 lecture
- Hemorrhages - Dr. Silver..... 1 lecture
- Bedside Manipulation or Rubbing - Mrs. Mayerinck..... 1 lecture

Two years later in 1877 Dr. Wylie came before the Training School Committee to present a plan to enlarge the lecture courses for the coming year. He said that the Training School had grown so much in popularity with the doctors and patients that the program should include instruction on medicine, surgery, diseases of women, physiology and hygiene.

Instructional Materials. The School had difficulty acquiring books for their program. At that time the only textbooks on nursing were published in England. The managers of the School had appointed a committee to compile a manual of instruction for use in the School. This manual, entitled “The Manual of Nursing,” was the first book of its kind in the United States and was published in 1878. It was accepted in all hospitals and nursing schools and became the standard work on the subject. The book was one of Bellevue’s contributions to the advancement of nursing as a profession.¹⁷⁴

Doctors wrote the first textbooks used in nursing. Clara Weeks, from New York Hospital, was the first nurse to author a textbook. Other authors from the nursing

¹⁷⁴ Ibid., 152-153.

profession were: Diana Kimber and Lavinia L. Dock (Material Medica), Mary E. Reid and Isabel McIssac.¹⁷⁵

Under Jane A. Delano's¹⁷⁶ supervision, instruction passed largely from the bedside into the classroom. Through the cooperation of Hospital authorities, the medical building was remodeled into a suitable lecture hall and demonstration room for the class. The study of chemistry and bacteriology were added to the curriculum. During 1903, 1,150 applications for admission to the school were received. Of these, only 62 could be accepted due in part to a lack of accommodations.¹⁷⁷

Register for Nurses and the Expansion of the School for Nurses. In the course of time the Training School managers felt the need to protect the name and reputation of the School because one of its former students was accused of stealing. This incident led to the decision that a register of the names of all graduates of the School should be kept by the superintendent. Graduates were required to keep the superintendent informed about where they were employed and to bring testimonials to be recorded. If they did not comply their names were erased from the Register and they were not recommended for employment. Nurses outside of New York had to report every six months. An advertisement ultimately appeared in various newspapers to inform the public about these decisions. One part of this decision stated:

¹⁷⁵ Morison and Fegan, Continued Study Unit in History of Nursing, 15.

¹⁷⁶ Jane A. Delano was a member of the class 1886 at Bellevue School of Nursing. After several years working at Bellevue she went to Jacksonville Florida, where she managed the Sandhills Hospital during the epidemic of yellow fever.

¹⁷⁷ Giles, A Candle in her Hand, 179-180.

If a nurse would forfeit the confidence of physicians or her employers, her name will be erased from the Register and her diploma will not be renewed at the end of two years term as required by the rules of the School. The Managers of the School will not be responsible for the character or ability of those nurses who may have been in the School but who do not continue to keep their name inscribed in the School's record book.¹⁷⁸

After some time, they decided to provide a pin for each graduate. Each nurse had to pay for it. The pin would distinguish graduates from Bellevue School from other trained nurses. The pins¹⁷⁹ were approved and placed on sale for five dollars in 1880.¹⁸⁰

The publicity connected with the Training School at Bellevue and the organization of a number of other training schools in New York and other cities greatly increased interest in nursing as a career for women. In an 1882 article titled "A New Profession for Women" by Franklin North, which appeared in the *Century Magazine*, it was noted that women of intelligence, education and good character were actually taking up nursing as a life career.¹⁸¹

The School and the number of nurses continued to grow steadily. In 1882 there were 61 nurses in the school. In 1885 the number of nurses was 65 and 28 of its graduates had gone out to hold responsible positions in other hospitals as superintendents of

¹⁷⁸ Ibid., 154.

¹⁷⁹ "The pin shows a crane against a circle of blue surrounded by a wreath of poppy leaves and capsules. The crane was chosen as a symbol of vigilance. The blue field signifies constancy and the poppy leaves and capsules signify the original function of nursing and medicine – allaying pain and bringing rest to the suffering. The pin represents a trinity of purpose: to be vigilant, to be constant, to be merciful." Ibid., 155.

¹⁸⁰ Ibid.

¹⁸¹ Ibid., 162.

training schools, matrons, and head nurses. Twenty years later the number of graduates holding important positions in hospitals far beyond the walls of Bellevue reached 60.¹⁸²

Many remarkable women who graduated from Bellevue were very influential.¹⁸³ Lavinia Dock, class 1886, became the assistant superintendent of nurses at the Illinois Training School and at Johns Hopkins. She wrote a book entitled *The History of Nursing* that became the standard work on the subject. Her other books on nursing subjects were textbooks used in most of the schools for many years.¹⁸⁴

Since the beginning of nursing schools in the 1870 the content of formal classes and bedside teaching had been decided by the individual school. Each school planned its own curriculum and published its program of classes and lectures. When state board examination became nationwide it was necessary for the uniformity of the classes in order that all students would have the same basic course. The National League of Nursing Education undertook the preparation of such a curriculum. Adelaide Nutting was the chairman of this committee. The standard curriculum for all the Schools of nursing was published in 1917, after the committee worked on it for three years.¹⁸⁵

In 1902 the managers of the School changed the curriculum to a course of two years and six months. All of the students' time was spent in the hospitals. The school now

¹⁸² Ibid., 163.

¹⁸³ Among the early graduates of Bellevue were many great American pioneer nurses, who founded important schools and were leaders in the nursing profession: Kate Richards founded the Mt Sinai School in New York in 1877; Mary E. Brown founded the Illinois Training School in Chicago in 1878; Agnes Brennan was in charge of the Bellevue School from 1888-1902; Jane Delano founded the American Red Cross Nursing Service; Isabel Hampton worked at Johns Hopkins in Baltimore and wrote textbooks on nursing practice; Lavinia L. Dock also authored several nursing textbooks. Goodnow, *Outlines of Nursing History*, 168.

¹⁸⁴ Giles, *A Candle in her Hand*, 169.

¹⁸⁵ Dietz and Lehozky, *History and Modern Nursing*, 106.

had charge of all the female wards and one male ward. Bellevue's patients numbered at this time around 23,000 annually with a daily average of 800 under treatment.¹⁸⁶

A bill to compel trained nurses to pass a state examination under the Board of Regents, which would entitle them to the degree of Registered Nurse, was introduced to the State Legislature at Albany. The bill was passed and became state law in 1903.¹⁸⁷ Since the turn of the century the nursing course has been extended from one to three years.¹⁸⁸

Summary

The order of deaconesses organized by Pastor Theodor Fliedner in Germany, Europe can be seen as the beginning of modern nursing. This effort was followed by the initiative of Nightingale in England who organized the first school of nursing at St. Thomas Hospital after visiting Fliedner's school and learning many new things that helped fulfill her dreams.

The medical and technical progress, the development of hospitals, social changes and the emancipation of women. The Civil War in the United States are the key circumstances that triggered the birth of schools of nursing. People like Dr. Valentine Seamar, Dr. Joseph Warrington, Dr. Susan Dimock, and Dr. Marie E. Zarkzewska tried to establish a school of nursing but it was not until Luisa Lee Schuyler, Linda Richards, and Helen Bowden organized first school of nursing, the Bellevue school, which started on May 1, 1873. The school used the same methods that Nightingale used in her curriculum

¹⁸⁶ Giles, *A Candle in her Hand*, 173.

¹⁸⁷ *Ibid.*, 177.

¹⁸⁸ Dietz and Lehozky, *History and Modern Nursing*, 106.

at the St. Thomas Hospital School for Nurses. The program for nurses initially was at first two years long but lengthened to three years several years later. The Bellevue School of Nursing was in close relationship with the Bellevue Hospital.

CHAPTER 3

THE DEVELOPMENT OF THE SCHOOL OF NURSING IN THE SEVENTH-DAY ADVENTIST CHURCH

As observed in the second chapter of this thesis, the schools of nursing in the United States had a slow progress until 1873 when the first school officially opened. There were many factors that played an important role in this developmental process. The similar slow progress can be observed in the development of the school of nursing within the Seventh-day Adventist Church which opened in 1883. The development of a school of nursing in the Seventh-day Adventist Church was mainly influenced by three earlier developments that played a very important role in the process. These developments were: (1) an emphasis on health reform, (2) the establishing of a health institution and (3) the development of a Seventh-day Adventist educational system.

The development of health reform had a foundational role in relation to the other two factors. Therefore, this factor will be presented first, and then the other two will be addressed afterwards.

The Development of Health Reform

After the Great Disappointment on October 22, 1844 many of the followers misinterpreted and left the Millerites movement but a very small group that adhered to the movement's original beliefs remained and later became the members and the founders of the Seventh-day Adventist Church.

During the early years of the Church's formation, the early Adventists focused primarily on the development of some important biblical doctrines. The church was constituted of a small group of those believers who continued to study the Bible and tried to live as the Bible thought them to live. In the process of the development of Seventh-day Adventist theology and beliefs, health reform was not recognized nor held by the core of members until many years after the Great Disappointment in 1844.

Early Adventist were as physically affected with the illnesses as their contemporaries because of their life styles and circumstances of the time they lived in. One of the first Adventist leader who started to think about the health principles and the cause of disease was Joseph Bates. Since 1824 he gradually understood the harmful effect of intoxicating drinks, tobacco, tea and coffee, and flesh food on his body and he gave up on using them.¹

In the years following 1844, the theological differences between the remaining group of the Millerites movement later became Seventh-day Adventists and other churches became noticeable but the positions on health and life style were not so much different. In 1848, during this period of early doctrinal formation, Ellen White, who is considered a prophet among Seventh-day Adventists, received a vision regarding health reform.² Her first vision in 1848 is considered as the preliminary message before the beginning of the development of health reform in the Seventh-day Adventist Church.

¹ Herbert E. Douglass, *Messenger of the Lord: the Prophetic Ministry of Ellen G. White* (Nampa, ID: Pacific Press, 1998), 279-280.

² Ellen White is one of the founders of the Seventh-day Adventist movement. Seventh-day Adventists have accepted her writings and lectures as a the prophetic gift. She was born on Nov 26, 1827 to Robert and Eunice Gould Harmon, in Gorham, Maine. She was married to James White on August 30, 1846, in Portland Maine. Together, they had four boys. White died at her Elmshaven home in St. Helena, California, on July 16, 1915 and was buried in Oak Hill Cemetery, Battle Creek, Michigan. Jerry Allen Moon and Denis Kaiser, "For Jesus and Scripture: The Life of Ellen G. White," *Ellen G. White*

In early 1848 Ellen White received a vision about the harmful effects of tobacco, tea and coffee. For some of the followers this message was hard and they were not easily convinced regarding the tobacco. White wrote some encouraging letter to those who struggled to break the tobacco habit. The introduction of the call for the further changes in dietary habits seemed to be source of distraction and division among the believers. Since the message about reform in matters of health came just four years after the followers of the Millerites movement gathered together following the disappointment, to achieve the doctrinal unity was consider more important.³

The second vision on health was received on February 12, 1854. It dealt with cleanliness, temperance, rich foods, and fine food.⁴ White was shown the importance of the cleanliness among those who are calling themselves Christians. She wrote: “I saw the houses of the saints should be kept tidy and neat, free from dirt and filth and all uncleanness.” She continues: “We must take special care of the health that God has given us, deny the unhealthy appetite, eat less fine food, eat coarse food free from grease.”⁵

Encyclopedia, (2013), 18-19; “White, Ellen Gould,” *Ellen G. White Encyclopedia*, (2013), 549; *Seventh-day Adventists Believe: A Biblical Exposition of 27 Fundamental Doctrines* (Washington, DC: Ministerial Association, General Conference of Seventh-day Adventists, 1988), 217-229.

³ The vision of from autumn 1848 dealt with the injurious effects of tobacco, tea, and coffee. James White wrote: “It was twenty-two years ago the present autumn 1848 that our minds were called to the injurious effects of tobacco, tea, and coffee through testimony of Mrs. White.” James White, “Present Truth, the Present Conflicts: or the Duties and Dangers of our Time,” *Review and Herald* (1870): 164; Dores Eugene Robinson, *The Story of Our Health Message: The Origin, Character and Development of Health Education in the Seventh-day Adventist Church* (Nashville: Southern Publishing Association, 1965), 53-56. “I have seen in vision that tobacco was a filthy weed, and that it must be laid aside or given up.” Ibid., 57; Ellen G. White to Brother and Sister Howland, 12 November 1851, Letter H-30, 1851, Center for Adventist Research, Andrews University, Berrien Springs, MI.

⁴ Merlin Burt, “Issues in Ellen G. White Studies,” (Berrien Springs, MI: Andrews University, 2013); Robinson, *The Story of Our Health Message*, 66; Roger W. Coon, *The Great Visions of Ellen G. White* (Hagerstown, MD: Review and Herald, 1992), 91-100.

⁵ White, *Selected Message* book 3, 274.

On June 6, 1863 just two weeks after Seventh-day Adventists organized themselves under a General Conference, White received an important vision in Otsego, Michigan, about many details connected to the health reform. It resulted in the writing of a chapter in *Spiritual Gifts* entitled “Disease and Its Causes” in the book *How to live*. Some of the most important things were: 1. Care for personal health as Christian duty, 2. The diseases are the consequences of violating the laws of health, 3. Christians have a duty to fight with the all forms of intemperance, 4. God’s natural remedies are pure water and pure air, 5. Proper diet is very important, 6. Discontinuance of flesh articles – especially pork – from the diet, 7. Importance of human efforts combined with divine power in bringing the reform in the life, 8. Physical health depends upon the successful control of the mind, 9. Material previously shown was repeated and elaborated.⁶

Reflecting on how God led the Seventh-day Adventist movement, James White said the following: “The Lord also knew how to introduce to His waiting people the great subject of health reform, step by step, so they could bear it, and make a good use of it, without souring the public mind.”⁷

But the purpose of the health message given to Ellen White was not just to call on people to live better and longer, but to equip believers for a spiritual mission.⁸ White saw the health message as closely linked with the gospel: “as the hand is with body.”⁹ Beside

⁶ Merlin Burt, “Issues in Ellen G. White Studies,” (Berrien Springs, MI: Andrews University, 2013 – Outline 12, page 4).

⁷ Review and Herald, Nov 8, 1870, *Counsels on Diet and Foods*, 495, 496.

⁸ Herbert E. Douglas, “Health Reform,” *Ellen G. White Encyclopedia*, (2013), 858.

⁹ Ellen G. White, *Testimonies for the Church*, 9 vols. (Battle Creek, MI: Review and Herald, 1948), 3: 62; *ibid.*, 486; *ibid.*, 288; Ellen G. White to Words of Instruction to Responsible Men, 30 July 1899, Letter 105, 1899, Center for Adventist Research, Andrews University, Berrien Springs, MI.

these visions, White received several others that provided further developments of the health message. Through visions about the health reform message God intended to teach the Church about biblical principles and the importance of good health practices regarding – the body and especially the mind, which is closely connected to the spiritual dimension through which God communicates with human beings.

White received her fourth vision regarding the health reform on December 25, 1865. The key points of the vision were that God wanted Ellen and James White to go to Dansville so they can learn in such a short time many new things about the health and health institution. The Dansville institution was the best health institution in United States at that time, but their leaders were just humans and their judgment was not always correct.

God could not be glorified by answering the prayers of his people while the Whites were in Dansville. The physicians there would take the glory which should be given to God. Through this experience God was preparing James to be a stronger leader in health reform. James had let anxiety and fear overwhelm his faith. By the power of his will and trusting in God's power, he would regain his health.

Church members were negligent in acting upon the light which God has given regarding to the health reform. Only a few understood how much their habits of diet have to do with their health, their characters, their usefulness in this world and their eternal destiny. And because of this God's people were not ready for the loud cry.

The most important point in the vision was that Seventh-day Adventists must develop their own health institutions. These institutions have to be the place where their faith will be introduced to the patients and carried to the new places.¹⁰

Through His messenger, God instructed the Church to open a health institution where all those who suffered from various health problems could regain their health. Patients and visitors were also to learn how to treat their body and maintain health.¹¹

The interconnectedness between the development of the nursing system and the developments of health reform and medical institutions requires knowledge of some background information about the development of these institutions. The next section will summarize this information.

The Development of a Health Institution

Progress in the areas of health reform and medical practice as it could be seen in previous passage was initiated in 1865 when new light came from God about the importance of an organized institution to help cure the sick. After Ellen White received these visions on health reform she decided to write down everything that she saw.¹²

¹⁰ Herbert E. Douglass, 302, 303.

¹¹ This vision was a supplement to the 1863 vision. The new element was an urge for establishment of an Adventist Health Institution. In a vision that Ellen White received in Rochester New York she was shown that the Church needed to establish its own health care institution. At the General Conference session in May 1866, White emphasized the need for a health care institution. White, *Testimonies for the Church*, 1:492, 493, 553; *ibid.*, 165 -185; Richard W. Schwarz and Floyd Greenleaf, *Light Bearers to the Remnant: Denominational History Textbook for Seventh-Day Adventist College Classes* (Mountain View: Pacific Press, 1979), 104; Burt, "Issues in Ellen G. White Studies".

¹² She wrote down everything that she was shown very precisely so that as she said: "no one would say that I had received my light upon the subject of health from physicians and not from Lord." She even refused to read about new knowledge in the field of medicine and health from journals and publications in order to deliver the message that God gave her. Robinson, *The Story of Our Health Message*, 73-74, 117; D.E. Robinson, *The Battle Creek Sanitarium: Its Origin, Development, Ownership and Control* (Hagerstown: Review and Herald, 1943), 5; Harold Milton Walton and Kathryn L. Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896* (Washington: Review and Herald, 1948).

White understood the main purpose for the establishment of the health institution as the following statements demonstrate:

Our people should have an institution of their own, under their own control, for the benefit of the diseased and suffering among us who wish to have health and strength that they may glorify God in their bodies and spirits, which are His. Such an institution, rightly conducted, would be the means of bringing our views before many whom it would be impossible for us to reach by the common course of advocating the truth...By becoming acquainted with our people and our real faith their prejudice will be overcome and they will be favorably impressed. By thus being placed under the influence of truth, some will not only obtain relief from bodily infirmities, but will find a healing balm for their sin – sick souls. This institution is designed of God to be one of the greatest aids in preparing a people to be perfect before God.¹³

The Lord gave me special light in regard to the establishment of a health reform institution, where treatment of the sick could be carried on – on altogether different lines from those existing in any institution in our world. It must be founded and conducted on Bible principles, and be the Lord's instrumentality, not to cure with drugs, but to use nature's remedies. Those who have any connection with this institution must be educated in health – restoring principles.¹⁴

In the early 1860s, some Seventh-day Adventist leaders became sick because of overwork and exhaustion. They tried to understand the reason of that and find some solution for their situation.¹⁵ White and her husband James heard about the Dr. James C. Jackson's health institution in Dansville, New York, and decided to spend some time there. In September 1864 they went there together and got some rest. While there they observe their methods of operation in the institution.¹⁶

¹³ White, *Testimonies for the Church*, 3:492, 493.

¹⁴ Ibid.; Michael W. Campbell and Jean Davis, "Health Reform Institute," *Ellen G. White Encyclopedia*, (2013), 862; Ellen G. White to Counsels Relating to Certain Phases of Our Medical Work, 1907, Manuscript 1907, Center for Adventist Research, Andrews University, Berrien Springs, MI, 66.

¹⁵ Arthur L. White, *Ellen White: Woman of Vision* (Hagerstown: Review and Herald, 2000), 137.

¹⁶ Moon and Kaiser, *For Jesus and Scripture: The Life of Ellen G. White*. 45; Schwarz and Greenleaf, *Light Bearers to the Remnant*, 108. Ellen and James White spent three weeks at Dansville. Since their health was then better than usual they took no treatments but listened to Jackson's health lectures, observed the variety of baths and packs prescribed, tasted the hygienic food they served. The Whites, however, did not like certain aspects of the program at Dansville. The dances, card-playing, and amateur

After last then a year, on Wednesday, August 16, 1865, James While suffered a stroke of paralysis. For five weeks James was tenderly cared for by Ellen in Battle Creek. Since they spent some time at “Our Home” in Dansville last year Ellen White was convinced in the value of water in healing methods of hydrotherapy. But there was none in Battle Creek who would be able to treat James with these little-known hydro remedies. This led her to take James to Dansville. Dr. Horatio S. Lay who was at that time in Battle Creek was sent to help them to decide that James should go with him to Dansville.

James and Ellen accompanied with some friends arrived at Dansville at the end of September. They lodged in a cottage near the institution. Dr. Jackson’s judgment was that James needed rest and not to do anything what would disturb his recovery. White’s spent about three months at Dansville. While they were there they even more observed some methods used in healing. James made very slow progress. Sometime in December, Ellen was convinced that they should return to Battle Creek to be among brethren in Church. She prayed about it and the conviction about the idea grew even more. After talking to Dr. Lay and Dr. Jackson on December 6 they took the train and travel to Rochester to the home of the John N. Andrews. While they were there Ellen received a very important health vision.¹⁷

White presented what she had seen in the vision on December 25, 1865 in Rochester, New York at the General Conference session on May 17, 1866. The vision was closely connected with the prior vision of June 6, 1863 at Otsego and unfolded the significance of health reform as part of the third angel’s message. She wrote:

theatricals seemed to them so “worldly.” White, *Testimonies for the Church*, 1:554; Schwarz and Greenleaf, *Light Bearers to the Remnant*, 106; Robinson, *The Story of Our Health Message*, 116-117.

¹⁷ White, Ellen White: Woman of Vision, 120-125.

Christmas evening as we were humbling ourselves before God, and earnestly pleading for deliverance, the light of heaven seemed to shine upon us, and I was wrapped in a vision of God's glory. It seemed that I was borne quickly from earth to heaven, where all was health, beauty, and glory. I was shown that we should provide a home for the afflicted and those who wish to learn how to take care of their bodies that they may prevent sickness. We should not remain indifferent and compel those who are sick and desirous of living out the truth to go to popular water cure institutions for the recovery of health, where there is no sympathy for our faith."¹⁸

Church leaders accepted her instruction and by July 10, 1866 a site of six acres was purchased and the former home of Judge B. F. Graves was remodeled for the institute. On September 5, 1866 the Western Health Reform Institute was opened in Battle Creek, Michigan under the charge of Dr. H. S. Lay. J. N. Loughborough was the first president of the institution. The institute expected to be able to accommodate 40 to 50 patients. In January 1867 Dr. Phoebe Lamson joined the medical staff.¹⁹ This was the

¹⁸ Since James experienced a sever stroke on Aug 16, 1865 and Ellen was worried about his improvement she continued: "I had an encouraging view of the case of my husband, and the particulars of which will be presented hereafter." Arthur L. White, *Ellen G. White: Volume 2 The Progressive Years, 1862-1876*, 6 vols. (Washington, DC: Review and Herald, 1986), 126. She wrote: "I was shown that our Sabbath keeping people have been negligent in acting upon the light which God has given in regard to the health reform, that there is yet a great work before us, and that as a people we have been too backward to follow in God's opening providence as He has chosen to lead us." White, *Testimonies for the Church*, 1:485. "The health reform, I was shown, is a part of the third angel's message and is just as closely connected with it as are the arm and hand with the e human body. I saw that we as a people must make an advance move in this great work." Ibid., 486. *ibid.*, 489. *ibid.*, 492-493; Warren L. Johns and Richard H. Utt, *The Vision Bold: An Illustrated History of the Seventh-day Adventist Philosophy of Health* (Washington: Review and Herald, 1977), 45-46; White, *Ellen White: Woman of Vision*, 138-139; White, *Testimonies for the Church*, 1:485-493; Douglass, *Messenger of the Lord*, 302-303.

¹⁹ When the institution opened it had two doctors, two bath attendants, one nurse (untrained), three or four helpers and one patient. The Western Health Institution in Battle Creek was an institution for health reconstruction. Schwarz and Greenleaf, *Light Bearers to the Remnant*, 105-106; Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 74; Robinson, *The Battle Creek Sanitarium*, 9-10, 12; Robinson, *The Story of Our Health Message*, 129-133; J. H. Kellogg, "Special Medical Missionary Course at the Sanitarium for 1894," *The Medical Missionary* 4 (1894): 11; Douglass, *Messenger of the Lord*, 303; White, *Ellen White: Woman of Vision*, 139-140. The goal of the institution was to treat diseases using natural remedies and to educate patients about health reform. In 1876 J. H. Kellogg was placed in charge of the institute and in 1877 they built a new institution called Battle Creek Sanitarium. Moon and Kaiser, *For Jesus and Scripture: The Life of Ellen G. White*. 862; *ibid.*, 44.

first health institution owned by the Seventh-day Adventists. It started as a small water cure institution, a method of healing well-known in Europe at the time.²⁰

Besides the healing of the body, the Seventh-day Adventists had a higher purpose for establishing a health institution and schools. Christian service was the theme that ran throughout the health institution and missionary school in Battle Creek. Divine counsel through his messenger was stated in the following sentences:

The Lord desires the efforts put forth for the recovery of the sick to be a means of preparing them to receive the message of mercy. The Sanitarium is the place of healing, a place in which reforms are to be wrought out, a place in which young men and women are to receive an education in the use of the facilities that God has given for the benefit of suffering humanity. God has placed us in the world to bless one another, and we desire the sanitarium here to give the students in the school a representation of the highest kind of medical missionary work. God wants the students in the school and the nurses and helpers in the sanitarium to strive for perfection in all that they can do. He desires each of us to perfect a Christian character.²¹

It may be said that the purpose of the institute was healing and training nurses not only to teach the people how to live a healthy lifestyle but eventually to point them to the Master Healer.

As our example, Christ linked closely together the work of healing and teaching, and in this our day they should not be separated. In our schools and sanitariums, nurses should be trained to go out as medical missionary evangelists. They should unite the

²⁰ Vincent Priessnitz (1799-1851) was a peasant farmer in Graefenberg, Austria, who is generally considered the founder of modern hydrotherapy, which is used in alternative and orthodox medicine. Priessnitz stressed remedies such as suitable food, air, exercise, rest and water, over conventional medicine. He is thus also credited with laying the foundations of what became known as Nature Cure, although it has been noted that his main focus was on hydrotherapeutic techniques. Priessnitz's name first became widely known in the English-speaking world through the publications and lecture tours of Captain R. T. Claridge in 1842 and 1843, after he had stayed at Graefenberg in 1841. However, Priessnitz was already a household name on the European continent, where Richard Metcalfe, in his 1898 biography, stated: "there are hundreds of establishments where the water-cure is carried out on the principles laid down by Priessnitz". The Water Cure institution started to spread very quickly in Europe and in the United States. Two physicians who recognized the value of water and used it as an excellent natural remedy were Dr. James C. Jackson (1811-1895) and Dr. R. T. Trall (1812-1877). Both of them discontinued the use of drugs in their practice. Robinson, *The Story of Our Health Message*, 27-31.

²¹ Ellen G. White, "The Nebraska Sanitarium," MS 6, 1905, Center for Adventist Research, Andrews University, College Views, NE.

teaching of the gospel of Christ with the work of healing. This line of work is to be brought into our schools as part of the regular instruction.²²

One of the things that Ellen White emphasized very strongly was that competition with worldly institutions in size and splendor should never be guiding principle for the establishment of Seventh-day Adventist institutions.²³ Schwartz and Greenleaf stated: “We never proposed to establish Sanitariums to have then run in nearly the same grooves as other institutions. If we do not have a Sanitarium which is in many things, decidedly contrary to other institutions, we can see nothing gained.”²⁴

Several years after the opening of the Health Institute the leaders and workers in the health institution realized that education, especially education of the nurses, was a very key element to the future success of the institution and mission.

The Development of the Educational System

After the Great Disappointment, the remaining followers of the Millerites movement strongly believed that Jesus’ second coming would happen soon. This made those who remained part of the movement to be hesitant to follow the call for the establishment of the school. They were also reluctant to get the education for themselves and for the children. This attitude began to change in the 1850s. In her appeal to parents, Ellen White “indicated that believers cannot look with certainty to any specific date for

²² Ellen G. White, *Adventist Review and Sabbath Herald* (1908): 7.

²³ Ellen G. White to The General Conference Committee and The Medical Missionary Board, 6 July 1902, Letter B-128, 1902, Center for Adventist Research, Andrews University, Berrien Springs, MI, 3.

²⁴ Schwarz and Greenleaf, *Light Bearers to the Remnant*, 108-109; Robinson, *The Story of Our Health Message*, 154; White, *Counsels Relating to Certain Phases of Our Medical Work*, Manuscript 1907.

Christ's return." She emphasized that children need to obtain basic skills to deal with the secular world. As a result, parents chose to homeschool their children.²⁵

Ellen White reminded the parents about their responsibilities toward their children's education in the article in 1850 entitled: "Duty of Parents to Their children." In 1858 James White announced that Battle Creek believers had invited John Fletcher Byington to open a school for their children. There were three more teachers preceding Byington and none of them was successful. Thus, after a couple of attempts the lack of support caused the end of this initiative.²⁶

In 1867, Goodloe Harper Bell came as a patient to the Battle Creek Health Institute to get help for his dyspepsia. Before he moved to Grand Rapids, Michigan, he obtained some education at Oberlin College. While at the Health Institute his Adventist roommate made a huge impression on him and he became an Adventist. After meeting Edson White, James and Ellen White's son, who was impressed with him, the Battle Creek church hired him to hold a school for children of church members, but the church was not yet ready to take the whole responsibilities to support the school.²⁷

Some difficulties in the Battle Creek church made it impossible for teacher Bell to succeed in his desire to organize a school. In 1870 James White became aware of many young Adventists who were employed by the publishing house and many ministers who needed to improve their speaking and writing skills. In the spring of 1870 White and Uriah Smith launched the Minister's Lecture Association for this purpose. This

²⁵ Schwarz and Greenleaf, *Light Bearers to the Remnant*, 116.

²⁶ Ibid., 116-117; Douglass, *Messenger of the Lord*, 354.

²⁷ Schwarz and Greenleaf, *Light Bearers to the Remnant*, 118.

association lasted just a year. At this point, the leaders of the church were fully convinced that church workers needed better education. An important counsel came to them through Ellen White's vision.²⁸ White received her first detailed vision on the proper principles of education in 1872 and she appealed: "We need a school, to educate children and where those who are just entering the ministry may be taught."²⁹ The right kind of education, Ellen White stated, should pay attention to the physical, mental, moral and religious life of students. In 1872 White called for the improvement of this school in her testimony "Proper Education," in *Testimony for the Church*, No 3.³⁰

By May 1872 the General Conference committee had agreed to take all administrative and financial responsibility for the school. It was scheduled to begin its first 12-week term on June 3, 1872. Bell's original school was reconstructed as a site for the new school. With the beginning of the winter term in 1873 the building was no longer adequate for the increased number of students. A resolution at the General Conference session in 1873 was approved to buy a site for a denominational school which was dedicated in January 1875 and named Battle Creek College. The number of students increased every year. Over the period from 1872 when 12 students enrolled in the college the number increased to 768 students in 1893. The college offered elementary, secondary and college level courses.³¹ James White served as the principal of the school until 1880 and Sidney Brownsberger carried the responsibilities for the curriculum. The students

²⁸ Ibid., 120.

²⁹ Ibid.; Ellen G. White, "The Principles That Should Control," Manuscript B 128, 1902, Center for Adventist Research, Andrews University, Berrien Springs, MI.

³⁰ White, *Testimonies for the Church*, 3:131-160; Ellen G. White, *Fundamentals of Christian Education* (Nashville: Southern Publishing Association, 1923), 15-46.

³¹ Arnold C. Reye, "Battle Creek College," *Ellen G. White Encyclopedia*, (2013), 635.

could earn a Bachelors of Arts degree in five years, and Bachelors of Science in three years period.³²

Certain changes took place regarding the college board membership at the time changes took place in the college board membership as Dr. Kellogg joined the team in 1880. President Brownsberger joined the school's team but since Kellogg's and Whites views concerning the curriculum were quite different than his, Brownsberger resigned in 1881. To find a quick solution the board chose Alexander McLean to take over Brownsberger's position. Very soon it was clear that this was a mistake. Because of certain unpleasant events the board decided to temporally close the Battle Creek College. In 1897 Edward A. Sutherland, who was much closer in his views concerning the school curriculum to the White's, became the president. In 1901 the college closed, was relocated to Berrien Springs and renamed to Emanuel Missionary College, later Andrews University (1960).³³

After 1880 Dr. Lindsay and Dr. Kellogg saw the need that a school for nurses, later a medical school, operated by Seventh-day Adventist needed to be established. There were several reasons that led to the decision to build and open these schools. The main one was that Adventist students needed to be educated regarding the different approaches to healing the sick. Before the college was opened, Adventist students received their medical education at different universities across the state. The closest University to Battle Creek which offered medical education was the University of Michigan. There were some students who went to Bellevue to obtain their diploma and

³² Schwarz and Greenleaf, *Light Bearers to the Remnant*, 124.

³³ Reye, Battle Creek College. 636-637.

skills. This created some difficulty when those graduates started to work at Battle Creek Sanitarium. They were influenced by a drug-oriented therapy in the process of healing. However, Dr. Kellogg had a different view of healing than was taught in the non-Adventist Schools.

The first medical college started its first class of forty medical students in the fall 1895. It was named American Medical Missionary College.³⁴ By the end of the century the American Medical Missionary College had secured membership in the Association of American Medical Colleges and could state that its graduates were accepted by the major medical examining boards in the nation.³⁵

Establishment of a Seventh-day Adventist Nursing System

Up until the establishment of the first Seventh-day Adventist Health Institution the nurses who took care of the sick did not have any nursing education.³⁶ Two doctors that worked at the Battle Creek Sanitarium were instrumental in establishing an the Seventh-day Adventist Church school of nursing, Dr. Catherine (Kate) Lindsay and Dr. John Harvey Kellogg. To have a better understanding of their role, this study will present some historical details about their lives and will identify the steps taken toward the establishment of the school.

³⁴ Schwarz and Greenleaf, *Light Bearers to the Remnant*, 203.

³⁵ Ibid., 120.

³⁶ Ibid., 109.

Catherine (Kate) Lindsay: Early Life

The circumstance related to various aspects of human life, especially those related to women, were challenging in the time Catherine Lindsay was born. The public education was offered to females only up to the elementary level and women's rights were not fully recognized. Women were prevented from attending schools of higher education. Slavery was still existing.³⁷

Kate Lindsay was born on September 11, 1842 in the state of Wisconsin. Her parents, Tomas and Catherine Lindsay, migrated from Scotland the previous year.³⁸ They were farmers with eight children and Kate was the first-born.³⁹ Kate did not attend school up until she was nine years old and she finished eight years of formal elementary education. Her first schooling was from a teacher who went from house to house teaching children how to read and write.⁴⁰ Kate was motivated to learn and mastered every subject in school. She studied several subjects at home by herself.⁴¹

Prior to beginning her medical training at the University of Michigan at Ann Arbor, Lindsay had not received a high school education. However, she believed that the

³⁷ Kathryn Luella Jensen Nelson, *Kate Lindsay M. D.: Nurse, Physician, Educator, Author* (Nashville: Southern Pub. Association, 1963), 15.

³⁸ Kate was always proud of her heritage. Her father was a descendent of Lord Lindsay who served during the reign of Queen Mary of England. Her maternal grandmother was Jeanette Livingstone, a cousin of David Livingstone, the great African missionary and explorer. Schwarz and Greenleaf, *Light Bearers to the Remnant*, 109; Mary Elizabeth Lamson, *Early Life of Doctor Kate Lindsay* (Boulder, Colorado: The Boulder-Colorado Sanitarium, 1923), 2. Kate's father Thomas was a gardener for a rich lord while they lived in Scotland and her mother Catherine was a waiting maid to the lady. They heard that America was the land of freedom and wealth, so they came to America in 1841. Ibid.

³⁹ Four of the eight children died: Euphemia, Andrew, Mary and Kate. Lamson, *Early Life of Doctor Kate Lindsay*, 2.

⁴⁰ Nelson, *Kate Lindsay, M. D.*, 15, 22-23.

⁴¹ Lamson, *Early Life of Doctor Kate Lindsay*, 3.

Lord had called her to a special work. Despite her chronic catarrh, which she developed because of exposure to pioneer farming during the long severe winters, she pursued her education.⁴² At the age of 17, Lindsay began to study every subject she could find. She was very passionate to gain knowledge. As her sister Mary recounts: “every spare minute she spent with her nose in a book.” Her father commanded, even punished her, to abandon studying, but she refused.⁴³

When she was 18, she met a young man named Porter, who came to Lindsay’s neighborhood to teach at the village school to whom she was engaged. Unfortunately, shortly after the engagement Porter was drafted as a soldier in the Civil War. After a few weeks in training camp in Milwaukee he died of pneumonia. His death adversely affected Kate that she became more reclusive and refrained from intimate friendships. Several years after this event, she worked on the farm and took care of young children.⁴⁴

From her childhood Lindsay was very religious. She loved church services and read her Bible faithfully.⁴⁵ When Lindsay grew up into a young woman her critical approach in evaluating the reliability of what she read caused her to read her Bible with renewed spiritual interest.⁴⁶ Lindsay’s parents were Scottish Presbyterians, but when she grew up she joined the Methodist Church. Nothing her parents said could change her

⁴² Ibid.

⁴³ Ibid., 4.

⁴⁴ Nelson, Kate Lindsay, M. D., 24; Lamson, Early Life of Doctor Kate Lindsay, 5.

⁴⁵ Lamson, Early Life of Doctor Kate Lindsay, 4.

⁴⁶ Nelson, Kate Lindsay, M. D., 17.

decision. Her parents would rather have seen their daughter dead and buried than see her rebel against their religion.⁴⁷

At this time a Seventh-day Adventist preacher, Isaac Sanborn, traveling by foot, arrived in Lindsay's neighborhood. He had "some strange looking charts and preached that Jesus will someday return to this world." Lindsay became a regular attendant to his lectures. Every evening Kate examined the Bible to evaluate everything she had heard that night. After some time, Lindsay's father started to attend the meetings as well. Lindsay and her father and some of the neighbors started to keep the Sabbath. After a long period, her mother did the same. This was Lindsay's entry into Adventism.⁴⁸

During the course of these events, Lindsay became very interested in medicine. She continued to read medical journals and books about health and methods of healing. She followed the development of the work of Nightingale and was fully informed of the movement for the preparation of professional nurses at the St. Thomas Hospital in England. She was inspired by the life and actions of Nightingale.⁴⁹

Lindsay's Educational Achievement

At age 25, sometime in 1867, Lindsay announced to her family that she was going to leave home. As she prepared to leave she read in "*Review and Herald*" about an institute. Lindsay believed that at Battle Creek she would find a good place to learn and become a nurse. She obtained work at the Western Health Reform Institute, operated by Seventh-day Adventists at Battle Creek, Michigan.

⁴⁷ Lamson, Early Life of Doctor Kate Lindsay, 4-5.

⁴⁸ Nelson, Kate Lindsay, M. D., 31-35; Lamson, Early Life of Doctor Kate Lindsay, 5.

⁴⁹ Nelson, Kate Lindsay, M. D., 21-22.

When Lindsay arrived, she was mostly interested in providing care for the few patients and guests who came for help or healing to this small but growing Health Institute. She noticed that there existed a need to establish a school for the preparation of nurses. At that time the institute had no one qualified as a nurse.⁵⁰ This disappointed her as she recalled the type of school Nightingale opened in London.⁵¹ She wished that she might become a student at that institution.

After reading the *Health Reformer*, she recalled the information about an institution in New Jersey where the physician Dr. Russell Thacher Trall⁵² was conducting a school for nurses. She also read the journal, *Water Cure Journal*, published monthly by this same doctor.⁵³ She reviewed the educational program at Bellevue to see the courses offered in nursing. She discovered that the studies at the New Jersey Institute were

⁵⁰ Ibid., 36.

⁵¹ Nightingale's school was opened on July 9, 1860 in London, England as part of the St. Thomas's Hospital. The school was named after its founder, Nightingale, because she was the person who developed the idea for such a school. She was known for several accomplishments: 1. She improved and reformed laws affecting health, morality, and the poor, 2. She reformed hospitals and improved workhouses and infirmaries, 3. She improved medicine by instituting an army medical school and recognizing the army medical department, 4. She improved healthcare for natives 5. She established nursing as a profession with two missions – sick nursing and health nursing. Finally, Nightingale was a pioneer in using statistics. Ibid., 29-30; Hebert, *Florence Nightingale*, 2.

⁵² Dr. Trall's medical school was a notable institute during its time. Founded in New York City in 1853 the Hygieo Therapeutic College moved to New Jersey in 1869 and continued until Dr. Trall's death in 1877. The school emphasized the curative powers of the internal and external uses of water, as well as the benefits of a simple diet, proper exercise, and fresh air. The school practiced little reliance upon drugs of any kind. Dr. Trall was a prominent figure in the crusade to promote healthful living. Like Graham, Dr. Trall entered the health-reform movement from the ranks of the temperance reformers. In addition, he promoted hydrotherapy. Nelson, *Kate Lindsay, M. D.*, 39; Richard W. Schwarz, *John Harvey Kellogg: Pioneering Health Reformer* (Hagerstown, MD: Review and Herald, 2006), 30; Robinson, *The Story of Our Health Message*, 31-32; Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 12-13.

⁵³ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 144.

exceptional. Their practice of medicine and nursing was unique and far ahead of the time.⁵⁴ Kate decided to enroll in this two-year program.

Little is known about the nursing courses she took or her achievement as a student, even though her excellent performance in school was consistent throughout her life. One thing that she discovered was that proper nursing must be taught at the patient's bedside. In addition, she believed that organized classwork was vital when connected with and paralleled to the practical aspects of nursing. Lindsay returned to Battle Creek in the fall 1869. She worked faithfully as a nurse, saving money for the future when she would perhaps study nursing at the postgraduate level.⁵⁵

The Battle Creek Health Institute

As soon as she returned to Battle Creek, Kate thought about the possibility of advancing her nursing knowledge. After some time spent at the Health Institute, Lindsay discussed her plans for the future with the medical superintendent and with James White, who was chairman of the board.⁵⁶

At that time, as was noted earlier, the Health Institute employed two doctors, one nurse, three to four helpers, and two bath attendants. During those first years the lack of professional help hindered the Institute's progress. As a consequence of this flaw, when the needs of the Institute started to expand the leaders objected to building an addition.⁵⁷

⁵⁴ Drugs such as strychnine, morphine, quinine, calomel – which were freely used, were not allowed in Trall's nursing school. They promoted hydrotherapy and they applied water, air, exercise, and diet on a par with other healing methods. Nelson, *Kate Lindsay, M. D.*, 40-41; Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 21.

⁵⁵ Lamson, *Early Life of Doctor Kate Lindsay*, 5-6.

⁵⁶ Nelson, *Kate Lindsay, M. D.*, 45.

⁵⁷ Schwarz and Greenleaf, *Light Bearers to the Remnant*, 108-110.

In response to the Institute's need for competent staff Lindsay was among the first to accept the invitation to become a doctor. Everyone supported her decision and urged her to begin her studies. She hesitated because she knew that the idea of a female physician had not yet been fully accepted.⁵⁸

After much consideration, Kate enrolled in the University of Michigan in Ann Arbor in the second class admitting women. She needed to pass the entrance examination and do well in the general and medical section. It was a big challenge. However, her studies prior to Ann Arbor enabled her to pass the examinations in Latin, literature, and the sciences.⁵⁹

Despite Kate's success, she and the other pioneering women at Ann Arbor faced several challenges. They faced rejection by male students and professors, as well as the majority of the population of the town.⁶⁰ But in 1871 the trustees voted to recognize the rights of both sexes to higher education, even though single gender classes existed.⁶¹ Women physicians fought their way through all sorts of opposition. Although she had to experience prejudice and gender discrimination, in 1875 Kate Lindsay received her degree in medicine from the University of Michigan.⁶²

⁵⁸ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 145.

⁵⁹ Nelson, *Kate Lindsay, M. D.*, 46-47.

⁶⁰ When a girl arrived in the town of Ann Arbor everybody knew and addressed her as university girl, which was not a compliment in that time. Kate once overheard some of the conversation that male students have on the train: "All I can say is that it will ruin the institution. The feminine mind can't stand the pressure, and it will come down to third – rate boarding school for boys and girls." Schwarz, *John Harvey Kellogg*, 26.

⁶¹ On June 22, 1874 the Medical Department Committee announced that: "...there shall be no separate lectures given to women in medical departments..." *ibid.*

⁶² Nelson, *Kate Lindsay, M. D.*, 69.

The greatest need at the Battle Creek Health Institute in 1876 was qualified medical staff. In the *Review and Herald* of October 19, 1876 James White wrote that for more than five years the board of the institute was laying plans to establish the best medical staff in the nation. He announced that Dr. John Harvey Kellogg, a graduate from the Bellevue Medical College, would be the leading physician and Kate Lindsay would join him as a staff physician.⁶³

They worked together very harmoniously and were very ambitious as they sought to build a bigger institution. As they worked they noticed the need for educated nurses. Subsequently, when Dr. Lindsay visited Bellevue Hospital she started planning for a school for nurses at Battle Creek. During her stay she observed the methods, interviewed some administrators, and observed the strength and weaknesses of the Nightingale system at Bellevue Hospital.⁶⁴

Kate returned from her brief visit to Bellevue and urged repeatedly that a school of nursing be established at Battle Creek. Until the school opened, she worked tirelessly from 1876-1883 to realize her plans.⁶⁵

The second main person in the process of establishing the school of nursing in Battle Creek was Dr. John Harvey Kellogg. His life, work, and achievements are vast, but this chapter will focus only the aspects of his life related to the process of the establishment of a school for nurses.

⁶³ James White, "Our Health Institute," *Review and Herald* 48 (1876): 57.

⁶⁴ Nelson, Kate Lindsay, M. D., 73.

⁶⁵ *Ibid.*, 74.

The Life of John Harvey Kellogg

John Harvey Kellogg was born on February 26, 1852 as the fourth child to John Preston and Ann Janette Kellogg.⁶⁶ Kellogg was four years old when his parents moved to Battle Creek where they established a small store and broom factory to support their growing family.⁶⁷

In his early childhood after watching a surgery through the kitchen window, performed on the kitchen table of his best friend, he decided that when he grew up, he would be “anything except a doctor.”⁶⁸

After being engaged in certain teaching work that was interrupted by respiratory trouble, possibly a light touch of tuberculosis⁶⁹ in the spring 1872 John turned 20 and enrolled in the teachers training course at Michigan State Normal College in Ypsilanti.⁷⁰

In the fall 1872, while at Ypsilanti, John went back to Battle Creek for a family council. There James and Ellen White, concerned over the struggles at the Health Reform Institute, persuaded Merritt S. Kellogg, the half-brother of John Kellogg, to come from California and take over the Institute. Merritt soon became convinced that the six-month medical course that he took five years earlier at Dr. Russell Trall’s Hygieo-Therapeutic College was insufficient to meet these expectations. Merritt proposed to repeat the course and suggested that some other young Adventists go with him. He called John Harvey Kellogg since he saw in him the qualities needed to succeed as a health reform doctor.

⁶⁶ Schwarz, *John Harvey Kellogg*, 17; Robinson, *The Battle Creek Sanitarium*, 29.

⁶⁷ Nelson, *Kate Lindsay, M. D.*, 106, 19.

⁶⁸ *Ibid.*, 109.

⁶⁹ Schwarz, *John Harvey Kellogg*, 29-30.

⁷⁰ *Ibid.*, 30.

Not so positive about this idea, John agreed to accompany Merritt. Joan Edson and William C. White went with them also and the four of them became students at Dr. Russell Trall's school in Florence Heights, New Jersey. Kellogg had no intention of practicing medicine but expected to use his training only as a health educator.⁷¹

John Harvey Kellogg used to study six to eight hours daily. Merritt noted that he was the most diligent student enrolled in that school. As the winter ended, John joined his half-brother as a part time instructor. He spent 20 weeks in Trall's school. In 1870 Harvard University and the University of Pennsylvania became the leaders in the field of medical training. The standard course increased to three years with a minimum session lasting six months. In addition, new laws transferred the licensing of physicians from politicians to boards controlled by members of the profession.⁷²

James White, more than most Adventist leaders, recognized that the changing climate of medicine would require a sound knowledge of anatomy, physiology, and chemistry. The denomination needed Adventist physicians trained in schools that paid attention to new advancements in medical field. White recommended that John continue his medical education at the University of Michigan in Ann Arbor and he agreed.⁷³

The university had operated for nearly 25 years when John arrived in Ann Arbor. Professor Alonzo Palmer, a former Civil War surgeon who opposed alcohol, tea, and coffee, impressed Kellogg. He warned students against a heavy reliance on drugs. He suggested that they could use simple methods such as bathing, exercise, rest, and Graham

⁷¹Ibid.; Robinson, *The Battle Creek Sanitarium*, 29-30; Robinson, *The Story of Our Health Message*, 176-177.

⁷²Schwarz, *John Harvey Kellogg*, 20.

⁷³Ibid., 29.

bread. While he was in school John heard Dr. Edward Dunster, a physician who had been associated to Bellevue Hospital, describing the volume of clinical material available to medical students. In 1874 John decided to leave Ann Arbor with no intention to return to secure his medical degree there.⁷⁴

John spent the summer in Battle Creek. James White encouraged him to continue his medical education at the best possible school. The Whites lent him \$1000 to meet his expenses which proved that they had faith in his skills. Kellogg soon made his decision and went to Bellevue Hospital Medical School in New York. Bellevue had a reputation for excellence and for a progressive faculty. In addition, it was known for a unique combination of clinical and classroom teachings. John had to spend only one year at Bellevue to qualify for his M.D. degree. On February 25, 1875 he received his medical degree during Bellevue's fourteenth Annual Commencement.⁷⁵

A very important event happened in 1873 when graduates from Nightingale's school in London came to Bellevue Hospital in New York to help improve the condition at that institution. That year was very important for the future of the school of nursing not yet established in Battle Creek and for Dr. Kellogg. While being at Bellevue, he noticed the improvements and innovation made by the Nightingale nurses from London.⁷⁶

⁷⁴ Ibid., 30.

⁷⁵ Ibid., 32; Burness G. Wenburg, *The Dietetic Educator as Mentor* (Lansing: 1990), 2-3.

⁷⁶ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 144.

When John graduated from Bellevue in 1875 he became a physician at the Battle Creek Health Reform Institute.⁷⁷ In the fall 1876 leading church members persuaded John Kellogg, then only 24, to accept the leading position in the Institute.⁷⁸

Within a year after he had taken charge of the Health Reform Institute, John Kellogg decided that a change of name would improve the institution's public image. Consequently, apparently acting entirely on his own initiative, he renamed it the Battle Creek Sanitarium.⁷⁹

In the autumn 1877, Dr. Kellogg decided to broaden his teachings and to open a School of Hygiene in connection with the Battle Creek Sanitarium. Some church leaders urged that the school should grant an M.D. degree to those who finished its course of instruction. Dr. Kellogg opposed this because he thought that one could obtain a first class medical education only in a large city that had an abundance of clinical material.⁸⁰

This interest was passed on to the community when he started the hygienic course. The program included some nursing classes to and in this way it became the precursor to the school of nursing. The program continued very successfully for a number

⁷⁷ Nelson, Kate Lindsay, M. D., 61-72; Schwarz, John Harvey Kellogg, 35.

⁷⁸ Schwarz, *John Harvey Kellogg*, 36-37.

⁷⁹ The word sanitarium had meaning: "A place where people learn to stay well" Schwarz and Greenleaf, *Light Bearers to the Remnant*, 111-113; Schwarz, *John Harvey Kellogg*, 65; Ellen G. White to John Buchmeier, 22 March 1900, Letter 1900, Center for Adventist Research, Andrews University, Berrien Springs, MI; Wenburg, *The Dietetic Educator as Mentor*, 3-4.

⁸⁰ Stanley D. Hickerson, "Battle Creek Congregation," *Ellen G. White Encyclopedia*, (2013), 638; Schwarz and Greenleaf, *Light Bearers to the Remnant*, 111-113, 200; Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 192; Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 123.

of years.⁸¹ Dr. Kellogg was the main faculty but two other doctors, Dr. William Josiah Fairfield and Dr. W.B. Sprague,⁸² who had just graduated from Bellevue Medical College, helped him in teaching. The tuition for the twenty-week course was \$25.⁸³

Approximately 75 students attended their first lecture on January 14, 1878. By the tenth evening the number had increased to 150. The session lasted 20 weeks. In addition to daily lectures and class recitation, Kellogg and other sanitarium physicians offered elementary instruction in anatomy, physiology, chemistry, physics and mental philosophy. For several years the school repeated its course every spring and fall.⁸⁴

Kellogg also recommended that Adventists begin a school of nursing, perhaps in connection with Battle Creek College.⁸⁵ As noted above, Kellogg's interest was not only in healing individuals, but also in teaching them. He wrote: "We speak in behalf of this hygienic school. We believe it is needed. There should be...individuals who understand what to do in the sickroom."⁸⁶

⁸¹ Schwarz, *John Harvey Kellogg*, 98; Schwarz and Greenleaf, *Light Bearers to the Remnant*, 66; *Yearbook 1896* (Battle Creek, MI: International Medical Missionary and Benevolent Association, 1896), 116; Robinson, *The Story of Our Health Message*, 206-209.

⁸² William "Willie" Josiah Fairfield (1853-1933) was a medical doctor. He and his friend W.B. Sprague were trained under Dr. J.H. Kellogg at the Health Reform Institute. James White saw their potential paid for their medical education. Both men graduated from Bellevue Hospital College in 1878 and joined the Sanitarium staff. Michael Campbell, "Fairfield, William "Willie" Josiah," *Ellen G. White Encyclopedia*, (2013), 373-374.

⁸³ Robinson, *The Story of Our Health Message*, 208.

⁸⁴ Schwarz, *John Harvey Kellogg*, 63; Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 123.

⁸⁵ Schwarz, *John Harvey Kellogg*, 66.

⁸⁶ John Harvey Kellogg, *Review and Herald* (1877): 83.

One of the first students was Ella Eaton Clarke who became the wife, life helper and supporter of Dr. Kellogg.⁸⁷ Many of the students who finished the course found themselves assisting in the organization and work of the health and temperance associations, which at that time flourished all over the country. Many of them devoted their life to medical missionary work.⁸⁸ The hygienic course was to include not only the health beliefs of Ellen G. White, but also all branches of practical and theoretical study necessary to qualify competent persons to become professional nurses.⁸⁹

Organizing and Opening the School of Nursing

The history of the school of nursing is closely interwoven with the history of the Sanitarium itself and grew out of the needs of the institution. As the work in the Sanitarium enlarged it became evident that a systematic education was necessary to provide efficient help in the various departments of the Sanitarium. Although Dr. Kellogg was enthusiastic about education, Dr. Lindsay was the one who persisted in her efforts to establish an official school of nursing.⁹⁰

Several years after launching the School of Hygiene, Dr. Kellogg attempted to interest the Adventist leadership in organizing a denominational school for training the nurses in connection with Battle Creek College. The sanitarium doctors decided to act on their own since they did not receive any support. In the spring of 1883 they issued a

⁸⁷ John Harvey Kellogg, *In Memoriam: Ella Eaton Kellogg* (1921), 9.

⁸⁸ Robinson, *The Story of Our Health Message*, 209.

⁸⁹ Schwarz and Greenleaf, *Light Bearers to the Remnant*, 200; Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 193.

⁹⁰ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 192.

public invitation to young women to come to the sanitarium and enroll in a three-month course in the fundamentals of nursing and massage.⁹¹

Historical records are limited regarding the admission requirements for the first nursing class. An advertisement for the program from April 3, 1883 states:

Wanted at the sanitarium, several Sabbath – keeping young men who can come recommended by the churches to which they belong, as assistants in the bath room, to learn the use of electricity, and other branches of the practical medical department. None need to apply, except persons who are strong. “Applicants must possess: 1. Good health, 2. Fair intelligence and education, 3. They must be able to give first-class recommendations, 4. They must be willing to contract to remain from one to three years. Apply at once.” Address Sanitarium, Battle Creek, Michigan.⁹²

Just three weeks later on April 24, 1883 a new advertisement was placed under the business notes column. It said:

Wanted, immediately, at the Sanitarium, several young women to work in the laundry and bath - room; those are desired who are active and strong, possessing fair intelligence and education, and who are willing to contract for one or two years; those who are Sabbath – keepers, and who can come recommended by the churches to which they belong. Address, Sanitarium, Battle Creek, Michigan.”⁹³

The official nursing training program at the Battle Creek Sanitarium began in April 1883,⁹⁴ and it was the second formal nursing program in Michigan since Harper Hospital in Detroit had started its training program for nurses just two months earlier.

Even though only two women responded to the initial announcement, this did not discourage the program’s promoters. The following autumn they announced the

⁹¹ Wenburg, *The Dietetic Educator as Mentor*, 3; Yearbook 1896, 117.

⁹² “Publisher Page, Nursing Advertisement,” *Good Health* (1883): 25; Robinson, *The Story of Our Health Message*, 209.

⁹³ “Publisher Department - Business Notes,” *Good Health* (1883): 277.

⁹⁴ In 1883 two young women answer the public call to enroll in a three months course in nursing procedures and the art of massage. That fall the course was lengthened to six months, and shortly after that to two and three years. Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 193, 196; Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 146.

organization of a Training School for Nurses in connection with the Sanitarium. They lengthened the course to six months. The first six-month course, which began on November 1, 1883, cost \$150, which included board, room, and tuition. Every girl could meet her expenses by working at the sanitarium. Such a procedure was the preferred way since it provided the student with additional practical experience. The course at the Sanitarium Nursing School soon lengthened to two years.⁹⁵ By the end of the century attendance had increased to such a degree that a single graduating class numbered more than 150.⁹⁶

The Sanitarium Staff

Unlike the Saint Thomas Hospital and the Nightingale School of Nursing, a close relationship existed from the start between the Battle Creek Sanitarium and the Sanitarium School of Nursing. Dr. Kellogg was appointed as the director of the Sanitarium in 1876. His initial appointment included just the Sanitarium; but as programs developed, he became the chief executive over all of them, including the nursing program. Although all programs had their own specific rules, they all came under the umbrella of the Battle Creek Sanitarium and required to follow the same principles.⁹⁷

In the early days after the opening of the school for nurses, two women physicians, the sanitarium staff – Dr. Kate Lindsay and Dr. Anna Stewart, carried on

⁹⁵ Robinson, *The Story of Our Health Message*, 209; *Yearbook 1896*, 117.

⁹⁶ In 1883 Dr. Kellogg announced that six month course for the training of nurses would begin at the Sanitarium November 1, 1883. In 1884 the Battle Creek Medical Missionary Training School began two years program and in 1888 a five-year program course. Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 193; Yarosh, “The Early Battle Creek Nursing School,” 6; Schwarz, *John Harvey Kellogg*, 98.

⁹⁷ Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 193-194; Isabel Stewart, *The Education of Nurses* (New York: Macmillan, 1947), 128; *Yearbook 1896*, 2.

most of the instructional programs of the Nursing School, though Dr. Kellogg also gave some of the lectures. From some sources we can observe that the program listed four instructors, all of them physicians: Dr. Kate Lindsay, Dr. Anna Stewart, Dr. W. H. Maxson, and Dr. J. H. Kellogg — though the primary lecturer was Dr. Lindsay. The administration of the program for the first few years is vague, with no specific reference being found to who was in charge. A few personal notes by Dr. Kellogg alluded to Kate Lindsay. In a personal note, on January 5, 1885 he wrote: “Discussed with K. Lindsay, new ideas for nursing students.”⁹⁸ No specific listing was found for the nursing faculty or the medical faculty in the Kellogg’s *Principles of Battle Creek Sanitarium*.⁹⁹

Ellen White’s impact on the Seventh-day Adventist movement may be detected in almost all three main developments: health reform, the establishment of health institutions, and the development of educational institutions. However, she did not directly influence the development of the school of nursing. She held neither an administrative nor a teaching position in the nursing program but had a close association with it. She occasionally gave chapel speeches, attended administrative meetings, and communicated regularly with Dr. Kellogg. Her convictions were incorporated into the curriculum. From the curriculum that Dr. Lindsay used in her classroom teaching it can be concluded that the health guidelines of Ellen White were incorporated in her teaching. Dr. Lindsay lived the principles Ellen White believing that she had received from God.¹⁰⁰

⁹⁸ Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 202; Schwarz and Greenleaf, *Light Bearers to the Remnant*, 200; Schwarz, *John Harvey Kellogg*, 99.

⁹⁹ John Harvey Kellogg, *Principles of the Battle Creek Sanitarium* (Battle Creek, MI: Battle Creek Sanitarium, 1885), 9.

¹⁰⁰ Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 195.

Kate Lindsay as Physician and Teacher

Dr. Lindsay was a competent and exemplary physician and teacher and was instrumental in persuading many students to become missionary nurses. She was an example of self-sacrifice and wanted to pass this kind of attitude on to her students.

Dr. Lindsay did not require anything from her students that she did not require of herself. She was never late to her classes.¹⁰¹ She led by example. Her standards were high. She reproved her students but was always ready to help those in error. She was a tireless student and instructor. At times she gave financial aid to help young men and women to achieve their goals.¹⁰²

All the members and faculty respected Dr. Lindsay highly. She was a hard worker and an excellent teacher that upheld high ideals. She was very strict in dress style of her pupils.¹⁰³ Mary Foy, who was one of her students, said about Dr. Lindsay: “There are probably few women living today who are as well read, intelligent, and able to converse all kind of subjects as was Dr. Lindsay.”¹⁰⁴ She was so well educated that the dean of Michigan’s medical society called her “The best-informed physician in the society.” Dr.

¹⁰¹ This inference was provided by Laurretta Kress. Kress also stated of Dr. Lindsay that “She had a Big Ben clock that she carried to class on her finger, and a large record book which was regular judge, where she has all names written down.” Nelson, *Kate Lindsay, M. D.*, 84, 90-93.

¹⁰² Ibid., 40.

¹⁰³ Anne E. Tabor Blumhart recalled: “After I passed muster in Dr. Kellogg’s office I was conducted to Dr. Lindsay’s office. She wished me a cordial “good morning” then she proceeded to tell me what it meant to be a nurse. She scanned me from head to foot. And said: “No curling of your hair, no corsets, lower heels, and more comfortable shoes, a crisp wash dress and a large white apron. This will be your first requirements. You may report to me day after tomorrow for your schedule for classwork.” Ibid., 48.

¹⁰⁴ Ibid., 92.

Lindsay worked at Battle Creek until 1896 and in 1897 she went to Africa to be engaged in the establishment of the medical missionary work there.¹⁰⁵

A letter from White, while Lindsay was in Africa sent to her by telegraph, asking her to come to Australia shows that White had a big respect for Dr. Lindsay. Writing to her, White said: "I know no one whom I would be more pleased to have tarry with us awhile than yourself, so understanding the needs of the field, I as the steward of God, ask you to come."¹⁰⁶ In her second letter, White urged her to come: "When are you coming to Australia? We need your assistance. We ask you to come as soon as possible. You can help us much with your experience. You could educate (young women) them as no man could do. I send you a most hearty invitation to come to Australia..."¹⁰⁷ But Kate decided to return to the United States.

Admission Standards

An announcement in the *Review and Herald* gives insight into the profile and character every applicant for the program needed to have in order to be admitted. The most important ones were: (1) Good health, (2) Fair intelligence and education, (3) Ability to give first-class recommendations, (4) Willingness to remain at the Sanatorium from two to five years time period at sound wages.¹⁰⁸

¹⁰⁵ Ibid., 109; Schwarz and Greenleaf, *Light Bearers to the Remnant*, 201.

¹⁰⁶ Ellen G. White to Katie Lindsey, 9 August 1899, Letter L-113, 1899, Center for Adventist Research, Andrews University, Berrien Springs, MI.

¹⁰⁷ Ellen G. White to Katie Lindsey, 12 October 1899, Letter K-158, 1899, Andrews University, Berrien Springs, MI.

¹⁰⁸ *Yearbook 1866-1896* (Battle Creek, MI: International Medical Missionary and Benevolent Association, 1896), 119.

During the first year of the course the nurses received uniforms and books, room and instruction, and they were expected to work full time. After the first year they received a small salary.¹⁰⁹ The minimum age of the applicant was not specified. From the example of Mary S. Foy, who was not yet fifteen in 1878 and was not admitted to the college, it appears that the age of fifteen was the minimum age requirement for admittance into the college. However, it is not known whether that applied to the nursing program, since the sanitarium did not make it part of the college until 1927.¹¹⁰ Admission requirements for the college students were different than the ones for nursing students. In 1900 the admission age requirement for the regular college courses was 21. If students were younger, the school invited them to enroll in the preparatory courses for the missionary nurses.¹¹¹

After some time it was decided that the school needed to raise the standard of entrance requirements. Students were required to have not just knowledge of the common branches, but also at least an elementary knowledge of the sciences and a thorough knowledge of hygiene, both practical and theoretical. In order to accommodate those who were not prepared to enter the nurse's training school a preparatory course of six months was offered. This included anatomy, physiology, hygiene, elementary chemistry, botany,

¹⁰⁹ Ibid., 119-120.

¹¹⁰ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 193-194.

¹¹¹ Ibid., 199.

natural philosophy, astronomy, and cooking.¹¹² Admission extended to men as well as women, with males registering each year starting in 1886.¹¹³

As it can be observed from the admission requirements, students were expected to possess good Christian character and receive a recommendation from the church. From these two simple requirements we can conclude that church membership was an important requirement. Even though we do not have a direct, written example for this, one of the sources stated the following: “In the first years of the school, only Seventh-day Adventists were enrolled. But by the first years of the twentieth century, ninety-five percent of the trainees were not Adventists.”¹¹⁴

Several years after the establishment of the school it seems that admission requirements were modified:

In 1896, the admission requirements for the school included “a good character, Christian experience, good health, a fair education (the more the better), and a settled purpose to devote the life to missionary work under the direction of the Medical Missionary Board.” In addition, the school also required recommendations from an officer of the applicant’s church, and a conference officer known to the management.¹ It appears that although students did not need to be Seventh-day Adventist to enroll in the program, they needed to have some religious orientation, and they needed to have some connection to a conference officer of the Seventh-day Adventist church.¹¹⁵

¹¹² Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 146.

¹¹³ Arthur L. White, *Ellen G. White: Volume 3 The Lonely Years, 1876-1891*, 6 vols. (Washington, DC: Review and Herald, 1984), 13-18; Moon and Kaiser, *For Jesus and Scripture: The Life of Ellen G. White*. 63; Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 200.

¹¹⁴ Duff Stoltz, “June 13, 1933, School of Nursing,” in *Heritage Battle Creek* (Battle Creek, MI: Battle Creek Historical Society, 1993), 64.

¹¹⁵ Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 197-198.

The admission records of the Hinsdale school of nursing in Chicago (the sister school of the Battle Creek school) show that at the beginning members of other denominations or churches were hardly accepted, too.¹¹⁶

The first class 1884 graduated nine students in 1886. The number of students increased each year. The largest class graduated in 1898, with 136 graduates.¹¹⁷ The rules and regulations of the school were strict but the student body obeyed discipline. The school rarely dismissed nurses for neglecting rules or being inactive on duty.¹¹⁸

Curriculum

The first nursing program as we mentioned above was a three-month course. The only reference about the curriculum is found in advertisements. One stated that it included all branches of study that would qualify competent persons to become professional nurses, and another indicated that the program consisted of one hundred lectures and a few hours of practical exercise each day.¹¹⁹

¹¹⁶ One of the example is Mary Alice Powell who was born in 1883 at Granite, Salt Lake County, Utah Territory. After sometime she decided to become a graduate nurse. Her friend Katie Grover and herself decided to go to Battle Creek school of nursing or to La Grange as second choice. Since her friend was not accepted in Battle Creek they decided to go to La Grange. But the first night at La Grange they were convinced that the hospital did not offer the training they wanted. They talked to superintendent who offered them to go with them to Hinsdale hospital to talk to the staff there. After several interviews the physician in charge Dr. Paulson expressed interest in having them become the part of the Hinsdale students body. But when he found out that there were from Utah he asked the women if they happened to be Mormons, when the replied that they are, he told them that they could not be part of Hinsdale. The outcome of the story is happy because at the end Dr. Paulson wrote to Battle Creek to see if they would accept them and at that time they did. Mary graduated from Battle Creek and become the first registered nurse in the state of Utah. Kimberly Jensen James, "Mary Alice Powell Lindsey: A Life of Accomplishment," *Ensign* 12 (1982): 37-40.

¹¹⁷ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 201.

¹¹⁸ *Ibid.*, 195, 201.

¹¹⁹ *Ibid.*, 201.

The first two years consisted of the general courses offered at that time in the nursing schools that were spreading throughout the country. In addition, hydrotherapy, calisthenics, Swedish gymnastics, massage, and electricity were included.¹²⁰ After the first three-month course, the hospital administration decided to increase it to six months; but after more careful consideration they increased it to a two-year program starting with the class of November 1884.¹²¹

During the first (1884) the curriculum, included anatomy, physiology, surgical nursing, hygiene, practical nursing, hydrotherapy, and cookery. Second-year classes consisted of massage, Swedish movements, cookery, diseases, and obstetrics and gynecology for women. An 1885 advertisement for the school listed courses in anatomy, physiology, the nature and causes of diseases, principles of cure, management of common diseases, dressing simple wounds, general and individual hygiene, ventilation, disinfection, air and water contamination, general nursing, surgical nursing, monthly (women's) nursing, bandaging, hydrotherapy, theoretical and practical electricity, diet for the sick, massage, and what to do in emergencies.¹²²

Lectures addressed natural remedies, but the students had practical experience utilizing them as well. The curriculum emphasized lectures on nutrition throughout the program. Classroom lectures included dietetics, medical dietetics, cookery, and diets for the sick. The students worked in the kitchen in order to learn the proper preparation of

¹²⁰ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 147.

¹²¹ John Harvey Kellogg, "Sanitarium Training School," *The Adventist Review and Sabbath Herald* 61 23 (1884): 460; Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 202.

¹²² Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 202-203.

food for patients. They also ate a vegetarian diet in the cafeteria and were expected to “uphold both in theory and in practice the principles of diet reform, temperance reform, dress reform, and other reformatory principles which are known to be the basis of the work of the institution.”¹²³

Exercise, another natural remedy, was also important in the nursing program. Students received instruction regarding physiotherapy, which most nursing-program curriculums did not include. Students also had classes in calisthenics, Swedish gymnastics, and massage. In addition, they were also to be in good physical condition themselves and partake of regular outdoor exercise.¹²⁴

The students had schedules that included several hours of study and work. They spent six to eight hours a day in the clinical setting, six days a week. Monday through Thursday they had several hours of class each evening, after which they had time to take care of personal needs. On Saturday, they had to spend four hours in the hospital. In their spare time, they were to do missionary work and visit those in the community. In addition, the students had a daily exercise program. In a letter, Bea Rosenbaum¹²⁵ (an alumna) wrote that the school required the students not only to learn about the importance of diet and exercise, but also to adhere to the Sanitarium’s regimen for patients, which included daily exercise in the gymnasium and a vegetarian diet.¹²⁶

¹²³ Yearbook 1866-1896, 122.

¹²⁴ Kellogg, *Principles of the Battle Creek Sanitarium*, 15; Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 211-212.

¹²⁵ Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 206.

¹²⁶ Kellogg, *Principles of the Battle Creek Sanitarium*, 14.

In 1888 the administration offered additional classes for those who desired to be medical missionaries. A small group of students volunteered to enter into a five-year course. They pledged to devote themselves to missionary work as directed by the Battle Creek Board for this period of time. These students received advanced instruction in addition to regular training and served as missionaries and teachers in Adventist healthcare institutions.¹²⁷ In 1891 the school changed its name from the Training School for Nurses to the Medical Missionary Training School for Nurses. This was the first missionary training program established by the Seventh-day Adventist Church. Until this time the requirements for acceptance into the school's two-year program was upstanding morals and good health. However, only those who chose to use their education for missionary endeavors were accepted. The first two years of the program were spent in regular study.¹²⁸ Speaking of this program, Dr. Kellogg stated: "The object of the school is the uplifting of down-fallen beings wherever we can reach them, this necessitates making our course of training much more thorough than that of any other class of nurses, for our nurses, where they have no physician to help them, and no one to direct their work, this being as it were both physician and nurse."¹²⁹

As the popularity of the Sanitarium Nursing School increased, Kellogg decided not to admit those interested in the profession simply for monetary rewards. For a time, the school accepted no students unless they agreed to work for five years at the Battle

¹²⁷ Mary Staines Foy, "Nursing at Battle Creek Sanitarium," *Medical Missionary Journal* (1903): 38; Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 203; Yarosh, "The Early Battle Creek Nursing School," 6; *Yearbook 1866-1896*, 117.

¹²⁸ Yarosh, "The Early Battle Creek Nursing School," 7; *Yearbook 1866-1896*, 117-118.

¹²⁹ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 204; John Harvey Kellogg, "Nursing," 1888, John Harvey Kellogg Collection, Bentley Library, University of Michigan, Ann Arbor, MI,

Creek Sanitarium or a similar philanthropic institution after their graduation. In later years, prospective students had to sign a declaration that they would use their training to serve as missionaries. Even after completing their course of study, sanitarium nurses did not receive their diplomas until they had worked for a period of time in some sort of missionary activities.¹³⁰

In 1893 the school extended the regular two-year course of study to a total of three years. The classes which had previously been considered advanced or optional were now included in the standard program. However, a class was later formed that put two of the years of theoretical training into one. This was necessary because many of the students had already been appointed to positions in mission fields and did not have sufficient time to spend in the longer course.¹³¹ The following two years of the missionary program required students to spend several months as visiting nurses in dispensary work at the Chicago medical mission operated by the Battle Creek Sanitarium. They also spent time in missionary visits, office work, and industrial nursing.¹³²

Because of the increased need for medical missionary nurses, the curriculum again changed in 1895 to shorten the time needed for nurses to complete the program. Based on need and the premise that individual differences necessitated a variety of curricula, the school developed three levels of nursing. Those levels were: general nurses,

¹³⁰ "Sanitarium Training School for Nurses," *Good Health* (1885): 5.

¹³¹ Yarosh, "The Early Battle Creek Nursing School," 7; *Yearbook 1866-1896*, 118-119.

¹³² *Yearbook 1866-1896*, 118-119; John Harvey Kellogg, "Sanitarium Medical - Missionary School," *Good Health* (1888): 2; John Harvey Kellogg, "The Battle Creek Sanitarium," *Good Health* (1896); Kellogg, "Special Medical Missionary Course at the Sanitarium for 1894," *The Medical Missionary*: 114.

surgical and obstetrical nursing, and superintendence of visiting nurses.¹³³ The first was a general, one-year nursing course or two years with included specialty. The second two-year program was to train surgical and obstetrical nurses. The third program involved supervision of visiting nurses and teaching classes in nutrition and physical culture. This curriculum extended the program an additional year.¹³⁴ Although these courses are routine in nursing curricula today, they were uncommon in the nursing programs of the late 1800s.

The nursing students at the Battle Creek Sanitarium were not only lectured on a regular basis but also had a textbook for study. The first textbook of which we have any record was written by Clara S. Weeks in 1894. About the same year Dr. Lindsay wrote her own book entitled: *Lectures: The Sanitarium Medical Missionary School for Nursing Students*.¹³⁵ She taught many classes at the school but still continued her medical practice in the Sanitarium. There is no extant document that records the methods Dr. Lindsay used in teaching. However, a comparison with the methods that were accepted on behalf of the Seventh-day Adventist Church show some similarities between the two.¹³⁶ Of Ellen

¹³³ Kellog, "Special Medical Missionary Course at the Sanitarium for 1894," *The Medical Missionary*: 143.

¹³⁴ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 205; Schwarz, *John Harvey Kellogg*, 99.

¹³⁵ The book included some brief lectures on anatomy and physiology, hygiene, medical and surgical nursing, the care of children, gynecology, and obstetrics. The appendix also included a paper read before the section of hospitals, dispensaries, and nursing schools of the International Congress of Charities, Clinics, and Philanthropy, held in connection with the World's Fair in Chicago in 1893. Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 150.

¹³⁶ Dr. Kate Lindsay wrote the book: "The Sanitarium Medical Missionary School for the Nursing Students." The book consists of eleven sections: "General nursing," "Fresh air and clean water," "Neatness," "Making beds," "Diet for the sick," "Rest, mental and physical," "What the nurse should know about symptoms," "Treatment, medicines, disinfectants and disinfection, and antiseptics," "Fevers and fever nursing," "Causes of diseases of women," "Instructions for operating room," and "An easy drill for three bearers (lifting and moving patients)." Although this was one of the students' primary textbooks, they

White's eight natural remedies Dr. Lindsay included six in her textbook: (1) importance of the healthy diet, (2) exercise, (3) water, (4) sun, (5) fresh air and (6) water. Even though temperance and trust in divine power were not included in her text were they included in the curriculum.¹³⁷ The curriculum emphasized nutrition throughout the program. The students worked in the diet kitchens in order to learn the proper preparation of the food for patients.¹³⁸

The instructions were given in theory and practice. One or two lectures were given each week, and several recitations were included. Lectures were illustrated with charts, models, and French manikins that displayed every organ of the body.¹³⁹

Courses of Study

That the Sanitarium was preparing nurses for a different purpose than other nursing schools of the time can be determined by comparing the curricula offered. Classes offered in every school included: Anatomy, Physiology, Surgical Nursing, Obstetrical and Gynecological Nursing, Hygiene Medical Dietetics and Cookery. However, the Sanitarium offered a unique addition. Dr. Kellogg wrote some years later on the nature of the Nurses Training School:

It was a new departure in the training of nurses. No attempt was previously made to put into the hands of women and men by systemic instruction and daily drill the

had a library in the hospital which housed books of Ellen G. White and Dr. John Harvey Kellogg along with other medical books. The students occasionally had lectures from Dr. Kellogg. Mrs. White spoke to them in chapel regularly, when she was in town. Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 206-207.

¹³⁷ Ibid., 210.

¹³⁸ Ella Eaton Kellogg, Dr. Kellogg's wife was the person who organized School of cookery and thought many of the classes to the students of the school of nursing. Kellogg, *In Memoriam: Ella Eaton Kellogg*, 17-19, 31.

¹³⁹ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 154.

diversified and wonderfully efficient curative means comprised under the general head of physiologic therapeutics. Some of the classes teaching physiologic therapeutics included: Practical Hydrotherapy, Practical Application of Massage and Faradic Electricity, Manual and Mechanical Swedish Movements, and Assistance in Gymnasium Work.¹⁴⁰

Theoretical Studies

The second-year curriculum consisted of the following subjects held only for women: massage, electricity, nature and causes of disease, the language of disease, management of common diseases, elementary chemistry, what to do in emergencies, surgical nursing, dressing wounds and injuries, bandaging and monthly nursing.¹⁴¹

The third, fourth and fifth years included advanced courses and the following subjects were studied during these years: electro physics, electrotherapeutics, hydrotherapeutics, material medica, advanced physiology, sanitary science, chemistry, bacteriology, advanced anatomy, biology, anthropometry, symptomatology, manual Swedish movements, urinalysis, advanced physical culture, pharmacy, medical dietetics and cookery, general therapeutics, office work and case talking, district nursing, special surgical nursing, missionary work, Bible study.¹⁴²

Practical Studies

Besides the theoretical courses, there were practical courses taught throughout the program. They were distributed within the first three years of the program.

¹⁴⁰ Yarosh, "The Early Battle Creek Nursing School," 9. Kellogg, 1922, 41 - 42.

¹⁴¹ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 154; *Yearbook 1896*, 121.

¹⁴² Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 155.

First year – during this first year of practical work domestic work was the first thing that pupils needed to learn. Besides this there was some bathroom work as well as general and surgical nursing.

Second Year – during the second year the following type of work was included: bathroom work, General nursing, Surgical nursing, Fever nursing, Obstetrical nursing, Manual Swedish and Massage department.

Third Year – Manual Swedish Movements and Massage department, Mechanical Swedish Movements, Test Breakfasts and Lavages, Medical Office Work, Electrical Department, Anthropometry, Assistants in Gymnasium Work, Outside Nursing, General and Surgical nursing, Bathroom work and Missionary work in the field. All nurses were expected to answer to any emergency wherever and whenever needed.¹⁴³

Summarizing the quality of the training in the school of nursing and in the Sanitarium, Kathryn Luella Jensen Nelson mentions several special advantages for the students who obtained and finished their education in this particular school.

- 1.This school is connected with the largest sanitarium in the world, which afforded opportunities for practical observation not found elsewhere.
- 2.One of the finest hospitals in United States, which is constantly filled with patients, is connected with the institution, and affords exceptional opportunities for becoming familiar with surgical nursing after the most successful methods.

¹⁴³ Yearbook 1896, 120-121.

3.The methods, appliances and facilities which were utilized far surpass in extent what can be found anywhere else, affording a better opportunity for gaining familiarity with scientific methods than any other school.

4.Students in this school have an opportunity to acquire a practical knowledge of much that is taught only theoretically in other schools or is omitted altogether.

5.Permanent employment was given to those who prove themselves competent and worthy of employment.

Talking about the nurses that graduated from the School of Nursing in Battle Creek Dr. Kellogg wrote: “Every nurse who has enjoyed the advantages of a course of training in this Institution, and has made good use of the opportunities offered, is ready to go out into the great suffering world with extraordinary abilities, to help and to lift where burdens are heaviest...”¹⁴⁴

About the quality of the nurses who graduated Dr. Kellogg wrote: “In a recent letter received from a prominent surgeon in one of the largest surgical clinics in the world, great interest was expressed in the special methods in which Battle Creek nurses are trained.” He continues: “I recently received a request from U.S. Government for the names and addresses of our graduates, these being desired especially for the unique constriction work which the Government is prepared to undertake on a large scale.”¹⁴⁵

Spiritual Training

Spiritual training and restoration were important concepts of the school. From their first days in the program the faculty impressed the mission of the school upon the

¹⁴⁴ Caroline A. Supe, *The San Script* (Battle Creek, MI: Battle Creek Sanitarium, 1918), 17.

¹⁴⁵ Ibid.

minds of students. They also taught their students that their function as student nurses did not end with the care of the sick but included the teaching and practice of the gospel of health. The training of nurses to meet the spiritual needs of the patients harmonized with Ellen G. White's belief that spiritual restoration was as important as physical restoration.¹⁴⁶ Kate Lindsay reflected the same ideas regarding spirituality. In an 1891 graduation address, she stated:

The nurse should remember that each sickroom is a field for missionary efforts. The consolation of religion is never so precious as when one is sick and suffering, and when perhaps the things of this life are slipping away. No one else is so closely allied for the time to the sufferer as the nurse. The minister and the doctor may make periodic calls, but they cannot stand in such close, confidential relations to the patient as the nurse. Remember, each of you that your mission is to do well to your fellows, to heal the sick, and to alleviate suffering. In this way you will be following directly in the footsteps of the Master, as He went about on earth. Even the "cup of cold water" of which He spoke may be taken very literally as a means of blessing to others, for what is more gratefully appreciated by one burning with fever? I now leave you with the hope that the instruction received in the two years just passed will be of great service to you in all your future labors. May each one of you, wherever your work may lie, be imbued with the true missionary spirit in laboring for the uplifting of humanity.¹⁴⁷

Bible study was an integral part of the curriculum and continued through the entire course. It was designed to enlarge the spiritual life of the student and to deepen their experience – to teach them how to work for others. Every day at noon, except Sabbath, was set apart for religious service. Department meetings were held semiweekly. These meetings were found to be very interesting and profitable. Once a week leaders, superintendents, physicians on the general missionary committee came together. These meetings were a blessing to everybody since they had first-hand information of the real

¹⁴⁶ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 207-208.

¹⁴⁷ Ibid., 208.

condition of the whole establishment. They could feel the spiritual pulse of the establishment and make plans.¹⁴⁸

In addition to Bible classes, all students were required to carry out local and home missionary work. They divided the students into groups and each group had an impoverished district in the city assigned to them to meet the needs of the people. Some of the elderly people just wanted company so the group would spend some time to talk with them.”¹⁴⁹

Besides the religion class and missionary work, the school required the students to attend daily prayer sessions at the sanitarium, which occurred twice a day. The Sanitarium and nursing program upheld respect for the Sabbath day (Saturday). Sabbath services were held weekly at the Sanitarium chapel and after church there was a Sabbath school in a large gymnasium. The Sabbath school numbered nearly 400 people of whom about one fourth were patients.¹⁵⁰ The sanitarium required the management, nursing staff, and students to be on duty only half a day on Saturdays. Students and staff gave only essential care to patients. There were no classes, surgeries, or special procedures scheduled on Sabbath. The sanitarium also gave consideration to those who observed Sunday; on that day, the only class that they held was a Bible class.¹⁵¹

¹⁴⁸ Yearbook 1896, 122.

¹⁴⁹ Schwarz, *John Harvey Kellogg*, 99. Sometimes they would sing a song or read some cheerful literature. An unidentified student stated that she found these tasks extremely satisfying, which confirmed the scripture saying “It is more blessed to give than to receive”. Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 209.

¹⁵⁰ Yearbook 1896, 123.

¹⁵¹ Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 209-210.

The sanitarium board also addressed spirituality in the biweekly meetings that students were expected to attend. During these meetings, portions of the time were spent in prayer, testimony, and Bible study during which the students were encouraged to share personal experiences related to both the physical and spiritual care of their patients. Spiritual restoration was a very important component of the nursing curriculum.¹⁵² Each student was allowed a yearly vacation of two weeks, at such time as shall be agreed upon with the managers.¹⁵³

Further Development of the School

Until 1885 the school of nursing and Battle Creek College worked together, sharing physical facilities. However, both schools had their own administration. In 1901 the General Conference of Seventh-day Adventists moved Battle Creek College to Berrien Springs, Michigan, and the school was renamed Emmanuel Missionary College, (currently Andrews University). The General Conference sold the Battle Creek College property in 1903 to the Battle Creek Sanitarium, which opened a new Battle Creek College, but now under the administration of Dr. John Harvey Kellogg. This new institution had no connection with the General Conference of Seventh-day Adventists nor with its predecessor other than keeping the property. The nursing program continued

¹⁵² Ibid., 210; "Investigation of the Battle Creek Sanitarium: Report of the Committee of Fifteen," Manuscript 014290, 1906, Center for Adventist Research, Andrews University, Battle Creek, Mich, 43.

¹⁵³ Walton and Jensen-Nelson, *Historical Sketches of the Medical Work of the Seventh-day Adventists from 1866 to 1896*, 153.

under the control of the Sanitarium until 1927, when it became a part of the new Battle Creek College.¹⁵⁴

Summary

The first school of nursing in the Seventh-day Adventist Church was established in Battle Creek in 1883. Three other key developments that significantly impacted the establishment of the school of nursing were the development of health reform, health institutions, and the establishment of an educational system. The first school of nursing was closely connected to the Battle Creek Sanitarium. Dr. Lindsey and Dr. Kellogg were two leading figures throughout the developmental process. The length of the training grew from three months for the first semester to six months thereafter, and very soon to two years. The training consisted of practical and theoretical parts. Besides the need for a school of nursing to adequately care for the sick, this school also highly valued a missionary outlook.

¹⁵⁴ Abbott, "A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White," 200; Reye, Battle Creek College. 635-636; Duff Stoltz, "Battle Creek Sanitarium," *Ellen G. White Encyclopedia*, (2013), 638-640.

CHAPTER 4

THE PURPOSE FOR ESTABLISHING THE SCHOOL OF NURSING WITHIN THE SEVENTH-DAY ADVENTIST CHURCH

The history of the development of schools of nursing in the United States provides insights into the purposes for establishing educational institutions for nurses. The purpose was multileveled consisting of desire to gain better skills to treat, cure, help and relate to the patients, to serve as assistants to the physicians in care and surgery, and to encourage women to pursue such careers.

Within the context of the calling and the mission of the Seventh-day Adventist movement, from the very beginning, organizing a school of nursing had added a different and special purpose. The most important purpose, besides the first three mentioned above, was to train nurses who would become missionaries.¹ As a result of the later emphasis, counsel was given about the character of nurses and the first Seventh-day Adventist school for nurses tried to keep these high ideals.

¹ “In every sanitarium established preparation must be made to train young men and young women to be medical missionaries.” Abbott, “A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White,” 207. “The nurses in the institution are to be fitted up to go out as medical missionary evangelists, uniting the ministry of the word with their ministry of physical healing.” Schwarz and Greenleaf, *Light Bearers to the Remnant*, 200; Brian E. Strayer, “Lindsay, Katherine 'Kate',” *Ellen G. White Encyclopedia*, (2013), 451.

Counsel for the Selection of Future Nurses

As the School of Nursing began in 1884, many young people were eager to go to Battle Creek and obtain their education. During this time, Ellen White offered special counsel for this situation. The following quotations reflect the essence of those messages:

Great care should be taken in the selection of young people to connect with our sanitariums as nurses. We cannot afford to accept everyone who is ready to come. No one is to be accepted merely to favor relatives or acquaintances. Great injury is done to our medical institutions when there are with them those who do not understand what it means service to God.²

Earnest, devoted young people also will be needed to enter the work as nurses. This young man and women will increase in capability as they use conscientiously the knowledge they gain, and they will become better and better qualified to be the Lords helping hands. They may become successful missionaries pointing souls to the Lamb of God who can save soul and body.³

Finally: “The leading men in our conferences are requested to send their most prominent young men and women to the Battle Creek Sanitarium to be educated and trained as nurses.”⁴

The character of each person who wanted to enroll in the school for nurses was carefully evaluated. Even though Ellen White was not directly involved in the process of the organization of the school, she received many messages from God about the character of the persons that should become nurses.

² White, Words of Instruction to Responsible Men, Letter 105, 1899.

³ Ellen G. White, “To Every Man His Work,” Manuscript 71, 1903, Center for Adventist Research, Andrews University, Berrien Springs, MI.

⁴ Ellen G. White, “Counsels Relating to Certain Phases of Our Medical Work,” Diary B-94, 1907, Center for Adventist Research, Andrews University, Berrien Springs, MI.

The Character and Profile of a Nurse

After establishing the School of Nursing, God has been frequently sending guidelines through Ellen White regarding the character and the profile of the future nurses. The present study will focus on the most important points ones and they are grouped into category of the spiritual and non-spiritual characteristics.

Spiritual Profile of Nurses

According to Ellen White, nurses were expected to possess certain spiritual traits. These traits were connected to the specific role the Seventh-day Adventist nurses were expected to have as missionaries to the world around them.

Converted

This trait was foundational. All other spiritual traits were built on the fact that the nurse in the Seventh-day Adventist Church institutions was to be a converted person. The following quotation makes this very clear.

No one of all the parties can do as much for the sick one as a truly converted nurse and physician. Action of purity and refinement in looks and words, and above all the sweet words of prayer, though few yet in sincere, will be sure anchor to the suffering ones. Of all man the physician should be the most eagerness and sincere, full of faith and the Holy Spirit and then he can accomplish more than minister in the pulpit.⁵

Firm in Faith

The faith referred to here is not just any Christian faith but an Adventist one that had a strong emphasis on ethics and humbleness.

Those who are admitted as nurses should be firm in the faith. No trifling ones, no persons of superficial character are to be taken in for one light, frivolous mind may be

⁵ White, Katie Lindsey, Letter L-113, 1899.

used by Satan to do mischief, which few can anticipate. Such ones misrepresent the high standard of righteousness. There are those who are easily influenced by them, and together, by their foolish talking, their loud laughing, their love of amusements, they injure the reputation of the institution.⁶

Connected to God

Maintaining relationship with God was another important trait. The following quotation stresses a mediatory role of the nurse on behalf of the patients entrusted to her care that emanates out of this relationship with God: “Nurses, if you have a living connection with God, you can in confidence present the sick before Him. He will comfort and bless the suffering ones, molding and fashioning the mind, inspiring it with faith, hope and courage.”⁷

Christ – Like

Seventh-day Adventist nurses, along with the doctors, were expected to help their patients realize that their needs are not limited just to the physical but also include the spiritual. The best way to achieve this is for nurses and doctors to live Christ-like lives every day so that the patients desire to be like Christ.⁸

Dr. Kellogg states concerning medical missionary work:

⁶ White, Diary B-94, 1907.

⁷ Ibid.

⁸ “To our sanitariums all classes of the sick will come, and by our physicians and nurses they are to be led to realize that they need spiritual help as well as physical restoration. And in no better way they can learn of Christ life than by seeing it revealed in the lives of His followers.” Ellen G. White, “The Parable of the Two Sons,” Manuscript D7-127, 1899, Center for Adventist Research, Andrews University, Berrien Springs, MI. “Every worker should now consecrate himself to the work of God, and carry out in his daily life the principles of the word of God.” White, Diary B-94, 1907.

How shall the Lord's work be done? How can we gain access to souls buried in midnight darkness? Prejudice must be met; corrupt religion is hard to deal with. The very best ways and means of work must be prayerfully considered. There is a way in which many doors will be opened to the missionary. Let him become intelligent in the care of the sick, as a nurse, or how to treat disease, as a physician, and if he is imbued with the spirit of Christ, what a field of usefulness is opened before him.⁹

Prayerful

Prayerful nurse was a very important trait because it communicates and admits the limitations of medicine, even the kind practiced in the Seventh-day Adventist Church institutions. In addition, she places the emphasis on God, who is not limited to any limitations of physical world and is able to heal any disease.¹⁰

Non-Spiritual Qualifications for Nurses

The following qualifications are also related to the spiritual ones, but are more inclusive and apply to religious or non-religious persons. However, these traits became even more meaningful when practiced by a converted Christian.

Wise

Ellen White received many messages from God that emphasized the medical staff's need for wisdom. Perhaps this leads to the crucial fact that all those who are wise,

⁹ J. H. Kellog, "Needs and Opportunities for Medical Missionary Work," *The Medical Missionary Extra* (1893): 1.

¹⁰ "The Lord desires to make every physician and every nurse a minister of healing. Seek to give to the sick the highest kind of knowledge by bringing to their understanding the lessons of the word of truth. Pray with them and for them. Thus while you bringing them back to life and help by ministering to their needs, you may win them to Christ to be partakers of the life that is eternal." William C. White, *A Call to Medical Evangelism and Health Education: Being Selections from the Writings of Ellen G. White* (Nampa, CA: Pacific Coast Conferences of Seventh-day Adventists, 1933), 27.

according to the Bible, are those who are aware of their limitations. Thus, this trait is also related to the requirement of being in a strong relationship with God.¹¹

Patient

Some patients in medical institutions were burdened with difficult sicknesses and it is therefore crucial for nurses and doctors dealing with such patients to be patient because of the severe physical and mental burdens many have. This trait is not limited to such difficult cases and is needed when dealing with any patient. “As our nurses minister patiently to those who are sick in body and soul, let them ask God to work for the suffering ones. That they may be led to know Christ, and let them believe that their prayers will be answered”¹²

¹¹ The Lord wants wise men and women acting in the capacity of nurses, to comfort and help the sick and suffering. Through the ministration of these nurses, those who have here foretaken no interest in religious things will be led to ask: “What must I do to be saved?” The sick will be led to Christ by the patient attention of nurses, to anticipate their wants, and who bow in prayer and ask the great medical missionary to look with compassion upon the sufferer... Physician and nurses should ever be kind, cheerful, putting away all gloom and sadness. Let faith grasp the hand of Christ for his healing touch.” White, Diary B-94, 1907; White, *A Call to Medical Evangelism and Health Education*, 17. The Lord wants wise men and women acting in the capacity of nurses to comfort and help the sick and suffering.... There are many lines of work to be carried forward by the missionary nurse. There are openings for well-trained nurses to go among families and seek to awaken an interest in the truth. In almost every community there are large numbers who do not attend any religious service. If they are reached by the gospel, it must be carried to their homes. Often the relief of their physical needs is the only avenue by which they can be approached. As missionary nurses care for the sick and relieve the distress of the poor, they will find many opportunities to pray with them, to read to them from God’s Word, to speak of the Savior. They can pray with and for the helpless ones who have not strength of will to control the appetites that passion has degraded. They can bring a ray of hope into the lives of the defeated and disheartened. Their unselfish love, manifested in acts of disinterested kindness, will make it easier for these suffering ones to believe in the love of Christ. Ellen G. White, “The Missionary Nurse in the Home,” *The Review and Herald* (1912): 126.

¹² Ellen G. White, Manuscript D7-127, 1899, Center for Adventist Research, Andrews University, Berrien Springs, MI.

Cheerful and Happy

During times of illness, patients are often very pessimistic and may become hopeless. Therefore, it is crucial for them to be surrounded and taken care of by a cheerful and happy staff. This cheerfulness and happiness is even more genuine when it is found in converted nurses.¹³

Educated and Hard-Working Person

This trait is always important but especially at the beginning of the nursing program. It was important for nurses to fulfill their daily duties and to have a willingness to learn and widen their horizons. These traits would improve the work of a nurse and provide them with self-confidence in their work with sick people.¹⁴

Health Reform Follower

Health reform was a foundational component of the Seventh-day Adventist philosophy of healing. Besides others factors, it was concerned with the root problems,

¹³ Those who care for the sick should not go about with, condoling with those who are suffering. Cheer them with words of comfort, hope, and joyfulness. Tell them that in Jesus they have a greater Physician than anyone connected to the Sanitarium. Let them understand that you who give them treatment are only finite beings, but that you have a living connection with God, and are there help them to co-operate with Him in combating the disease. Show that God filled your heart with sympathy and tenderness for every suffering individual who is here. Ellen G. White, "We Give Thanks to God," Manuscript 102, 1901, Center for Adventist Research, Andrews University, Berrien Springs, MI, 3.

¹⁴ Every day the nurses are to be taught in regarding to their line of work. They should learn how to walk and how to talk with Jesus, coming close to Him, as He comes close to them. Let the helpers in the institution fully understand that in their daily work they are gaining an education more valuable than anything, which they could gain merely in a schoolroom. A practical training is worth far more than theoretical knowledge. Ellen G. White to St. Helena Sanitarium Workers, 1902, Letter 169, 1902, Center for Adventist Research, Andrews University, Berrien Springs, MI, 13.

which included a patient's diet. The most convincing way to promote this philosophy was by having the medical staff observe these principles in their own life.¹⁵

After presenting these two sets of traits this study turns to the question: "What is the ministry of a nurse within the Seventh-day Adventist Church?" Ellen White's thoughts on the ministry of a nurse will be the basis for the next section.

The Ministry of Nurses - Missionaries for Christ

Besides the emphasis on spiritual and non-spiritual profile for the prospective nurses there was another feature that was needed within the overall understanding of the educational system within the Seventh-day Adventist Church every nurse is considered to be a missionary for Christ.

Ministers

As was mentioned above, the main purpose for the establishment of educational institutions for nurses was to train missionaries for health ministry. Eventually, they were to lead their patients to a fuller knowledge of Jesus Christ. The ultimate goal was imagined to be the salvation of souls through the ministry of a nurse.¹⁶

¹⁵ Let the patients see nurses that are cheerful and bright, not nurses who, because they are overworked are discouraged and downhearted. The workers are to practice the principles of health reform in all that they do, - standing, walking, breathing, eating, and dressing. They are to cultivate the voice, keeping it pleasant and sympathetic. No word of discouragement is to be heard. The workers are to strive day by day to reveal a character after the divine similitude. If they give themselves to Christ, He will subdue all in their nature that is harsh or overbearing or dictatorial. If they constantly cherish a sense of His presence, they will act politely and courteously to all with whom they are brought in contact. Ellen G. White, Manuscript 102, 1901, Center for Adventist Research, Andrews University, Berrien Springs, MI; Ellen G. White to Friends at the Health Retreat, 1884, Letter F-003, 1884, Center for Adventist Research, Andrews University, Berrien Springs, MI, 2-4.

¹⁶ The Lord desires to make every physician and every nurse a minister of healing. Seek to give to the sick the highest kind of knowledge by bringing to their understanding the lessons of the word of truth. Pray with them and for them. Thus while you bring them back to life and help by ministering to their physical needs, you may win them to Christ to be partakers of the life that is eternal. Ellen G.

Testimony Through Life Example

Ellen White received messages that stressed the missiological purpose of the Seventh-day Adventist Church medical institutions. The nurses should not initially and constantly talk about specific the Seventh-day Adventist Church beliefs unless the patient wants to hear them. Rather, they should live and act in such a way that the patient sees them in their words, behavior, and their care towards them. the Seventh-day Adventist nurses should not place any pressure upon the patient to hear the Adventist message but rather they should be a testimony for the Seventh-day Adventist message.¹⁷

Witness for Christ

Similar to the previous trait, nurses should be witnesses for Christ.

The Nurses employed in our institutions should clearly understand that they are to be representatives of the saving truths of the gospel. Realize that they labor together with God; they are to do all in their power to pay the debt they own to Christ. Let them remember that the patient will carry with them to their homes the knowledge of God they gain in the institution.¹⁸

White, "The Work of the St. Helena Sanitarium," Manuscript 169, 1902, Center for Adventist Research, Andrews University, Berrien Springs, MI.

¹⁷ The nurses and workers are not to go to the patients saying we believe in the third angel message. That is not their work unless the patient desires to hear. Act so that the patients will see that Seventh – Day Adventists are good people who have common sense. Act so that they will feel that the institution is a restful place. Patient may be asked to attend our meeting, and there they will hear the truth, knowing at the same time that it is not pressed upon them. Then when they leave the Sanitarium and hear people saying, I do not want to go there to be made Seventh day Adventist they will tell them that the workers at the sanitariums press the truth upon no one. Ellen G. White, "The Privilege of Ministry," Manuscript 57, 1912, Center for Adventist Research, Andrews University, Berrien Springs, MI.

¹⁸ Ellen G. White, Manuscript D-127, 1889, Center for Adventist Research, Andrews University, Berrien Springs, MI.

The following is one of White's multiple warnings that medical work will be the only venue for the Seventh-day Adventist mission: "I wish to tell you that soon there will be no work done in ministerial lines but medical missionary work."¹⁹

The Seventh-day Adventist Church possesses a decent number of medical institutions of various levels in this country. Ellen White wrote:

The Lord has brought us into possession of our health institutions that we may learn to bring to the sick, in the most attractive way, truths of heavenly origin. We must never lose the sight of the fact that these institutions are instrumentalities in the hands of God for bringing the light of truth to those who are in darkness.²⁰

"Our object in the establishing sanitariums is to encourage the sick and suffering to look to God and live. Those who are afflicted should be pointed to the Man of Calvary, who take away the sin of the world."²¹

Again, Ellen White wrote: "I wish to tell you that soon there will be no work done in ministerial lines but medical missionary work."²² With this message in mind, it becomes very clear that the role of a nurse is crucial and important. According to the ideal characteristics for a nurse it can be deduced that special attention should be placed on nurses today.

¹⁹ "General Conference Bulletin," MS H-30, 1901, Center for Adventist Research, Andrews University, Berrien Springs, MI, 204.

²⁰ Ellen G. White, "Words to Ministers," Manuscript 127 1902, Center for Adventist Research, Andrews University, Berrien Springs, MI.

²¹ Ellen G. White, "God, Who at Sundry Times...", Manuscript 105, 1901, Center for Adventist Research, Andrews University, Berrien Springs, MI, 6.

²² MS H-30, 1901.

Even today nurses in Seventh-day Adventist institutions should personally be followers of Christ. According to Ellen White: “Christ did more healing than preaching in His ministry. Both healing and teaching were linked closely together.”²³ Every medical worker should be aware of the importance of these two activities, healing and teaching, and implement them into their everyday ministry within hospital setting.

Summary

Ellen White shared significant guidelines concerning the character of nurses who would be trained and work in Seventh-day Adventist institutions. Two key sets of qualifications made up the profiles of nurses: spiritual values (converted, firm in faith, connected to God, Christ-like, and prayerful) and non-spiritual ideals (wise, patient, cheerful and happy, educated and hard-working). In the Seventh-day Adventist school of nursing every nurse was considered and expected to considered themselves as a missionary for Christ.

²³ Ellen G. White, *Testimonies for the Church*, 9 vols. (Battle Creek: Review and Herald, 1948), 4: 72; White, Manuscript D-127, 1889; Robinson, *The Story of Our Health Message*, 205.

CHAPTER 5

SUMMARY AND CONCLUSION

The present research studied the establishment of the first school of nursing in the United States and arrived to the conclusion that this process was affected by many other developments. This laid a foundation for the further study of the development of the first school of nursing within the Seventh-day Adventist Church since links between these two developments are noticeable at various levels.

The first idea to organize a school of nursing was seen in the initiative of Pastor Theodor Fliedner who organized an order of deaconesses in Germany, Europe. After some time he realized that educating these young women could improve the art of nursing. It was several years later that, Nightingale, England's heroine and organizer of the first school of nursing at St. Thomas Hospital, visited Fliedner's school and learned many new things that helped fulfill her dreams. The school of nursing Nightingale organized became a model for many subsequent schools of nursing around the world.

The most obvious circumstances in England, as well as in the United States, which impacted the birth of schools of nursing were medical and technical progress, the development of hospitals, social changes and the emancipation of women. The Civil War in the United States resulting in many wounded people who needed constant medical care was one of the most significant ones. This reality made some of the key people from the leadership realize that the lack of educated nurses was a huge problem and was translated

in significant loss of human lives. There were several attempts by Dr. Valentine Seamar, Dr. Joseph Warrington, Dr. Susan Dimock, and Dr. Marie E. Zarkewska to establish a school for the education of the nurses before the first one was finally organized. The first organized school for nurses, the Bellevue school, started on May 1, 1873. The main persons in its organizational process were Louisa Lee Schuyler, Joseph Hobson, William Osborn, Linda Richards, and Helen Bowden. The Bellevue School of Nursing was founded on the same methods that Nightingale used in her curriculum at the St. Thomas Hospital School for Nurses. The first curriculum at the Bellevue School of Nursing was two year long and consisted of several lectures and six to eight hours of practical work at the hospital each day. The program was lengthened to three years several years later. When the School opened there were no books about nursing in the United States. For some time, the school used the materials published in England notably *Notes on Nursing* that Nightingale had written. The first textbook on nursing in the United States was *The Manual of Nursing*, published in 1878. The Bellevue School of Nursing was in close relationship with the Bellevue Hospital. The School developed several levels in its nursing program during the first years after its organization: general nurses, head nurses or superintendent, and lecturer.

After graduation from the Bellevue School of Nursing, nurses were required to keep the superintendent informed of where they were employed and to bring in testimonials of their work. Those nurses working away from New York had to report every six months. They all received a pin, which was the trademark of the Bellevue School of Nursing.

The development of the first school of nursing in the Seventh-day Adventist Church was intertwined with other reforms such as the reform of health habits and lifestyle among church members. Ellen White, whom Seventh-day Adventists consider to have the prophetic gift, gave several messages to the leaders of the Adventist movement to establish its first health institution, the Western Health Reform Institute, later renamed the Battle Creek Sanitarium.

Another important step in this process was the understanding of the importance of gaining a good education in various disciplines, especially in the field of health and medicine. Dr. John Harvey Kellogg and Dr. Catherine “Kate” Lindsay were the key persons in the development of a school of nursing in the Seventh-day Adventist Church.

Dr. Lindsay’s work was crucial since she was directly involved in the process of organizing the School of Nursing, and after the School was opened she was the carrier of the whole idea and a key teacher at the school. Dr. Kellogg, as the main physician at the Battle Creek Sanitarium, did some of the teaching and was closely connected to the work of the school for nurses.

The School opened in April 1883 and the first term was three months long. However, it was soon extended to six months, and later to two, three and finally to five year. A very important connection to remember, as observed in Chapter 3, is that both Dr. Lindsay and Dr. Kellogg were closely associated to the first organized school of nursing in the United States, the Bellevue School in New York. They were able to observe some of the organizational principles of the School and go back multiple times for certain interviews and consultations when the Seventh-day Adventist Church recognized the need to organize a its own school of nursing.

Yet, the health and nursing principles, which were followed in secular schools of nursing, were different from those at the School of Nursing in Battle Creek. Even though the need for educated nurses in the United States was the first reason for the establishment of a school of nursing, the reasons for starting such a school in the Seventh-day Adventist Church reveal certain different goals. An important goal for both schools was to help the people to regain their health and be able to continue their everyday activities. However, the Seventh-day Adventist School of Nursing placed considerable emphasis on teaching the patients how to live healthier lives and ultimately the main point was to lead them to the Main Physician, Jesus Christ. The first Seventh-day Adventist school of nursing highly appreciated every aspect of the education for nurses: physical, mental, spiritual and academic. Even though Dr. Lindsay and Dr. Kellogg learned and incorporated some principles and methods from the School of Nursing at Bellevue, Dr. Lindsay's curriculum and lectures indicate that she used many of the principles that Ellen White suggested.

The messages Ellen G. White gave also indicate that the School of Nursing had a strong missiological component. In other words, they understood that God wanted the School of Nursing to become an institution, which would not only teach young people how to heal different kinds of diseases in the best possible way, but, in addition, nurses should always be aware of the fact that their patients, along with physical healing, also need ultimate healing and peace with God.

The last part of the present study is a summary of many pieces of advice Ellen White gave on the profile of nurses. Some of the most important ones are: to be a converted person, strong in faith, Christ-like, have a real connection with God, prayerful,

but also cheerful, wise, and ready to learn. Possessing all these qualities helped in the process of building a strong and healthy school where students were thought to work not just to meet the academic standards and healing of a body but to achieve the highest purpose imbedded in the school for nurses – the healing and saving of body and soul.

Conclusion

Even though Ellen White never gave any specific instruction regarding the establishment of a school of nursing, as it was the case with the organization of the first Health Reform Sanitarium later renamed to Battle Creek Sanitarium, the unfolding of events in regards to the development of the school of nursing leads to the conclusion that God led Dr. Lindsay and Dr. Kellogg as they noticed the need to have such a school.

There are many similarities and some differences in the developmental processes between the Bellevue School of Nursing and the Training School for Nurses founded by the Seventh-day Adventist Church. The major points of similarity between them are: (1) the initiators of both of these developments were passionate individuals, (2) they readily did sacrificial work for the cause, and (3) they were ready to learn and broaden their knowledge.

The differences between the two schools pertain to the final goal of their service. First, Seventh-day Adventists tend to look at their school of nursing as another means to extend their missionary work to the world. That would involve considerable emphasis on the spiritual healing of the patients. In contrast, spiritual healing was not a priority for the first school of nursing organized in the United States but rather emphasized restoring the physical health of their patients. Second, the Seventh-day Adventist school of nursing set for itself the ideal of practicing natural healing methods with no use or very limited use of

drugs. On the other hand, the Bellevue School of Nursing followed and used pharmaceutical advancement including extensive use of drugs.

Schools of nursing in the United States and in the Seventh-day Adventist Church were organized in the second half of the nineteenth century. Both of them have had lasting effects on the history of the medical profession in the United States and within the Seventh-day Adventist Church.

APPENDIX A

TABLE OF DEVELOPMENT

Table 1: Developmental Process of the School of Nursing in the Seventh-Day Adventist Church Compared to School of Nursing in the United States

	• School of nursing in United States	• School of nursing in Seventh-day Adventist church
• Factors which led to the organization of the school of nursing	<ul style="list-style-type: none"> • Medical progress • Social changes • Technical progress • Development of the Hospitals • Emancipation of women • Civil War • Lack of educated nurses 	<ul style="list-style-type: none"> • Development of Health Reform • Development of Health Institution-Hospitals • Development of Educational system. • Mission to the world • Physical exhaustion, sickness and death of some of the Seventh-day Adventist church leaders • Lack of educated nurses
• Background and history of the first schools organized in United States	<ul style="list-style-type: none"> • There were several earlier attempts to organize school for nurses: (1) Dr. Valentine Seaman of New York Hospital in 1798, (2) Dr. Joseph Warrington in 1839 under the auspices of the Nurse Society of Philadelphia, (3) Dr. Marie E. Zakrzewska established an improved system of nurse's training at the New England Hospital for Women and Children at Roxbury, Massachusetts In 1862, (4) The New England Hospital for Women and Children in Boston Massachusetts, under the direction of Dr. Susan Dimock, inaugurated the first permanent training school for nurses in 1872. Each one of these schools came a step closer to the opening of the first school of nursing in New York City. 	<ul style="list-style-type: none"> • The first school to educate people due to importance of health was the School of Hygiene opened in 1877 by Dr. Kellogg. This school was the forerunner of the School of nursing. Duration of the course was 20 weeks.
• Initiator of the opening	<ul style="list-style-type: none"> • Women who returned home after serving as nurses during the Civil War (1861-1865). 	<ul style="list-style-type: none"> • Physicians (nurse) who worked at the first organized Seventh-day Adventist Hospital.

<ul style="list-style-type: none"> • Life and Background of the persons who established the school 	<ul style="list-style-type: none"> • Louisa Lee Schuyler was born on October 26, 1837, died on October 10, 1926 • She was the great-granddaughter of two well-known person Gen. Philip Schuyler and Alexander Hamilton. • Since Louisa was from upper class she received a valuable education at her home from early childhood until she left home to serve in Civil War. Usually girls and the young ladies received their education by home teachers. • She was amazed with the work of Nightingale and many others who served in various charitable work. • Schuyler became a leader in charitable work. • Left her home with the age of 24 when the Civil War begun and was appointed as the corresponding secretary in the Woman's Central Association of Relief in New York City. • Her work for WCAR was to coordinate the efforts of the volunteers on the home front, including distribution of millions of dollars of supplies, and providing training materials. • When Civil war ended Schuyler returned home and her physician advised her to travel to Europe for a long rest to recover from her hard work during the Civil War. • When she returned to America in 1871 she was advised that she must live in quiet. She obeyed this order by keeping the promise given long ago to Dr. Parker. She made a visit to Westchester County Poorhouse then the 4th largest of these institutions in New York State. After this visit she decided to make some new 	<ul style="list-style-type: none"> • Catherine “Kate” Lindsay was born on September 11, 1842 in Wisconsin died 1923 • She was descendent of David Livingston, her maternal grandmother was Janet Livingston, a cousin of David Livingston, the great African missionary and explorer. Parents Thomas and Katherine Lindsay were farmers emigrated from Scotland. • Education – Kate gain her first education from a traveling teacher. Kate got her elementary education in a log cabin village school located four miles far from home. She had a huge urge for reading and studying. • Read many journals and was so amazed with work of Nightingale • Left her home at the age of 25. • Went to Western Health Reform Institute to learn and work as nurse. • Took a course at Water Cure Institute in New Jersey at Dr. Trall school. • Believed that organized class-work was vital method in the process of educating the nurses. • Returned to Battle Creek to work on her dream to organize a school for nurses. • Went to Ann Arbor to finish her M.D. degree • Made visits to Bellevue Hospital to interview and observe the methods of operation in their school and hospital. • Had several helpers in the process of the organization of the school. The closes one was Dr. Kellogg but beside him none of the other helpers nor Kate was neither wealthy, well known or had some high position in social structure. • Never married. After she spent some years in Africa helping to establish medical work there she returned and lived alone in Colorado.
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	<p>improvements in nursing system.</p> <ul style="list-style-type: none"> • Together with her team of ladies she visited the hospitals, planned and organized the work. She even traveled to other hospitals to observe their work and methods on the education of the nurses. • In 1873 she organized the New York State Charities Aid Association and in the following year established the first training school in the United States for the education of the nurses. The school was in close connection with Bellevue Hospital. • The women she chose as her team had social position, authority, and were wealthy. But at the same time, they had earnest desire to use these assets for the welfare of others less fortunate than themselves. • Louisa never married and lived with her sister Georgina for most of her adult life. 	
• Advertisement of the new school	• Public invitation through advertisements in the New York newspapers.	• Public invitation through church paper – Review and Sabbath Herald
• Application requirements for admission	<ul style="list-style-type: none"> • Good health, willing to obey • If possible educated • Chosen from the upper level of the society, not from made or servants class. • Willing to remain in school and learn the art of nursing for two years. 	<ul style="list-style-type: none"> • Good health • Fair intelligence and education • Must be able to give first-class recommendations by church where they belong • Must be willing to remain in school from one to three years.
• Number of applicants of the first year of operation	• Nineteen applied, six were accepted.	• Two ladies applied, both accepted.
• Age of the applicants	• Applicants were required to be 25 of age.	• Not specified – students encouraged to be older than 18 but not too old.
• Location of the School	• Bellevue Hospital, New York	• Battle Creek Sanitarium, Michigan
• Name of the school	• The Training School for Nurses	• Medical Missionary Training School for Nurses
• Opening date	• 1 May 1873	• April 1883

<ul style="list-style-type: none"> • Staff in charge of the school 	<ul style="list-style-type: none"> • Miss Helen Bowdin – superintendent • Mrs. Husband – matron of the nursing home • Mrs. William H. Osborn – chairman of the Hospital Committee. • Committee of the Training School: Louisa Schuyler, Mrs. Joseph Hobson, Mrs. Griffin and others 	<ul style="list-style-type: none"> • Kate Lindsay – lecturer in classroom and instructor by bedside, at the same time she was the physician working with women and children. • Dr. John Kellogg – occasionally gave lectures and organized work in Sanitarium.
<ul style="list-style-type: none"> • Length of the first nursing course 	<ul style="list-style-type: none"> • Two years 	<ul style="list-style-type: none"> • Three months
<ul style="list-style-type: none"> • First curriculum 	<ul style="list-style-type: none"> • Nurses were given the instruction on the art of nursing, social science, and the biological sciences as applied to nursing. 	<ul style="list-style-type: none"> • 100 lectures + few hours of practical work every day
<ul style="list-style-type: none"> • First Year 	<ul style="list-style-type: none"> • Nurses received: • Boarding and lodging at the home for students. • Were paid \$10 a month for the clothing and personal expenses. • When the first year expired, they were promoted to positions, and they got increase in salary. 	<ul style="list-style-type: none"> • Nurses received: • Books, uniform, room, instructions. • After the first year they received a small salary.
<ul style="list-style-type: none"> • Classes 	<ul style="list-style-type: none"> • Taught by bedside, just occasionally organized classroom teaching • Mrs. Schuyler did not teach any class 	<ul style="list-style-type: none"> • Classes taught in classroom and bedside • Dr. Lindsay was the main lecturer in the school and hospital.
<ul style="list-style-type: none"> • Lecturers 	<ul style="list-style-type: none"> • Main Lecturer: Miss Hellen Bowden who was the superintendent of the first group of students. • Sometime after the school was open several physicians were asked to teach some of the classes to students. First physician to lecture to students was Dr. Frank Hamilton. • Under Miss Delano’s supervision, instruction passed largely from the bedside into classroom. 	<ul style="list-style-type: none"> • Main Lecturer: Dr. Kate Lindsay who give the class lectures and worked with the students on the bedside in Hospital. • Occasional lecturer: Dr. Kellogg, Dr. W. H. Maxson, and Dr. Anna Steward. • Mary Foy – later superintendent of the school.
<ul style="list-style-type: none"> • Books 	<ul style="list-style-type: none"> • When the school opened there was not any book about the nursing in USA. “The Manual of Nursing,” was the first book in United States published on February 13, 	<ul style="list-style-type: none"> • Even though some books on nursing already existed, Dr. Kate Lindsay wrote her own book titled: “The Sanitarium Medical Missionary School for the Nursing Students.”

	1878, used for many years as the textbook.	
• Connection to the Hospital	• Close connection with the Bellevue Hospital.	• Close connection with the Battle Creek Sanitarium.
• First and second years curriculum	• Anatomy, physiology and digestion, obstetrics, bedside manipulation, bacteriology, circulation, respiration, digestion, care of women and children.	• General courses + hydrotherapy, calisthenics, Swedish gymnastics, massage, and electricity, dietetics, medical dietetics, cookery, and diets for the sick.
• Practical learning	• Students were taught how to cook different kinds of meals and drinks for suitable for patients with various illnesses.	• Students were expected to work in the kitchen and learn to prepare the food for patients.
• Lodging of the students	• Students lived in a special home equipped just for student nurses outside from the Hospital where they worked.	• Students lived outside of the Hospital. At the beginning, at homes of Seventh-day Adventist church members. Later they build a dorm for students.
• Working hours	<ul style="list-style-type: none"> • At the beginning after students received sufficient instructions to do simple nursing procedures. They would begin to go to the wards for four to six hours each week. • After sometime they were working every day between 6-8 hours. 	<ul style="list-style-type: none"> • Sunday – Friday, 6-8 six hours a day at the Hospital. • Monday – Thursday they had several evening classes and they took care of their laundry. • Saturday (Sabbath), worship at the Sanitarium chapel, afterward worked 4 hours at the Hospital.
• Physical condition of the students	<ul style="list-style-type: none"> • Paid considerable attention on the moral and physical condition of every student. • Every day they walked three time to hospital and back. 	<ul style="list-style-type: none"> • Students were expected to be in good physical condition • To exercise on the fresh air every day.
• Diet for the students	• Students had a regular diet.	• Students were expected to be vegetarians.
• Broadening of the program	<ul style="list-style-type: none"> • The probationary period for new pupils was three months at the beginning. • The regular program was 2 years. • At the turn of the century, nursing course was extended from one to three years. 	<ul style="list-style-type: none"> • On November 1883 program was lengthened from three to six months. • The program was extended to two years in 1884.
• Five-year course	• Was never developed.	• In 1888 – Medical Missionary school for nurses was opened.
• Levels of nursing	<ul style="list-style-type: none"> • General nurses • Head nurses in wards • Lecturers • Superintendents 	<ul style="list-style-type: none"> • General nurses • Surgical nurses • Obstetrical nurses • Superintendence of visiting nurses
• Profile for future nurse	• Spiritual characteristics: The members of the committee wished that nurses be	• Spiritual characteristics: converted, firm in faith, connected with God, Christ like, prayerful...

	<p>religious but did not required to belong to any specific religion.</p> <ul style="list-style-type: none"> • Non-spiritual traits: understanding of the art of ventilation, making accurate observation and report to the physician of the state of the secretions, expectoration, pulse, skin, appetite, temperature of the body, sleep, breathing, condition of wounds... 	<ul style="list-style-type: none"> • Non-spiritual traits: wise, patient, cheerful and happy, educated, hardworking, trustworthy...
<ul style="list-style-type: none"> • Life and work of the nurses after graduation 	<ul style="list-style-type: none"> • Graduates were required to keep the superintendent informed where they are employed and to bring testimonials to be recorded. • If not complying with these regulations their names were erased from the Register and were not recommended for employment. • Nurses from New York had to report every six months. 	<ul style="list-style-type: none"> • For more that 15 years Battle Creek Sanitarium was the largest and the only hospital within the Seventh-day Adventist church. Graduates usually remained to work in Sanitarium where they were in close connection with Dr. Lindsay and Dr. Kellogg. • Nurses who decided to become missionary nurses spent some time working in some mission field in Chicago or elsewhere and were required to report after some time.
<ul style="list-style-type: none"> • Innovations 	<ul style="list-style-type: none"> • System of medical records. Mrs. Linda Richards innovated written records of every patient. 	<ul style="list-style-type: none"> • Every student needed to have his/her own mission field where he/she was required to work several hours every week.
<ul style="list-style-type: none"> • Differences in organization 	<ul style="list-style-type: none"> • Founded on the methods used by Nightingale and other hospitals who operated at that time • Used drugs in their healing methods • Strive to improve the standards in order to get the permission to work in as many wards as they could • Believed in the new medical discoveries and methods • Nurses trained to achieve their highest potential – to become: head nurses, instructors at hospitals, lecturers, book writers... 	<ul style="list-style-type: none"> • Founded on biblical principles and some of the methods that other hospitals used • Drug-free healing methods • Education how to leave healthier • Mission was to always point to the Master Healer – Jesus. • Nurses trained to be medical missionaries – to unite teaching of the Gospel with healing.

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