Propriety Meets Necessity:
Female Nursing in the Civil War

by Hunter Vermeer

The Civil War saw the creation of domestic relief and nursing organizations pioneered largely by women. Thousands of women, Union and Confederate, would join the effort for their respective sides through work at hospitals across the country. Initially, the efforts of women were organized at a grassroots level without direct government involvement. Even at this early stage, the Northern effort showed more centralization through the Women’s Central Association of Relief, which would later be incorporated in the federal United States’ Sanitary Commission. Due to the Southern focus on states’ rights and fear of large government, similar central organization was absent, and Southern women’s efforts remained independent for much of the war. While the organization and structure of their service had significant differences, nurses across both countries shared common traits. Both regions experienced considerable push-back to women’s entry into this new field and role, as noted in multiple primary accounts. Women in both camps also shared similar motivations for their work such as patriotism, religion, a sense of duty, or a desire for adventure. African-American women, slave and free, also served as nurses throughout the war. Slave women constituted a large percentage of the laborers in Confederate hospitals, sent to work there by their owners. In the North, free African-American women worked from the start as nurses to help the effort. After the Emancipation Proclamation, some former slave women joined the Union army, working courageously to lend aid. Summarily, Union and Confederate nursing experiences were similar in three distinct ways: an initial lack of preparation created a demand that women could meet, concerns about the propriety of female nursing led women to defend nursing within the context of antebellum gender ideologies, and the inclusion of a large presence of African-American women in nursing operations.

On the eve of the Civil War, both sides were woefully unprepared. Very few Americans could anticipate the tragedy that would define their lives for the next four years. Historian Drew Gilpin Faust, in her study on the effects of the Civil War on Southern women, notes that in the Confederacy “many... anticipated that the Union would not contest southern secession” and expected a bloodless departure.1 Fannie Beers, a matron of the Confederate Army of the Tennessee, recalled years later in her memoirs that "it was then supposed that the affair would be settled in ninety days."2 Expectations of a quick war influenced Southern leadership

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2. Terminology for North and South can be slightly problematic. In Union writings, matron can be used both as a “catch-all” term for laundresses, cooks, and nurses, as well as specifically referring to female administrators of a hospital ward. In the confederacy, the term matron was the popular title of nurses, with the latter being more generic. For the purposes of this paper, matron refers to Union hospital women placed in command of other nurses within the USSC, while the term nurse relates to both union and confederate women hospital workers. Quote from Fannie Beers, Memories: A
as well. One former senator from South Carolina, James Chestnut, famously and publicly “promised that he would drink all the blood spilled” from the coming war.\textsuperscript{3} Similarly in the North, both the populace and leadership could not understand the scale of the war that loomed ahead of them.\textsuperscript{4} In April 1861, as Fort Sumter surrendered to Confederate forces in what would be recognized as the first battle of the Civil War, there existed not a single general military hospital in the entire United States of America. The largest rugged “post hospital” at Fort Leavenworth, Kansas contained a mere forty-one beds.\textsuperscript{5} The sheer scale of human loss that both the Union and Confederacy would face quickly brought an end to any delusions concerning the cost of secession. On top of outfitting and feeding hundreds of thousands of troops, leaders scrambled to provide adequate care for the growing number of wounded. In this area, women were presented with a new opportunity to participate in the war effort. Within weeks of Fort Sumter, Canadian Sarah Emma Edmonds traveled to Washington D.C. as an enlisted Union “field nurse.” In those early days, the United States Sanitary Commission had not yet been created to organize Union hospital efforts. As a result, Edmonds encountered “thousands of sick men to be taken care of” suffering severely “from want of proper nourishment.” In order to procure more suitable food for the men under her care, Edmonds and the chaplain’s wife, one “Mrs. B,” decided to “appeal to the sympathies of the ladies of Washington and Georgetown” by “begging” it from those willing to lend aid.\textsuperscript{6}

Due to a lack of preparation, the sick at Washington D.C.’s overwhelmed hospital were receiving inadequate care. Edmonds and Mrs. B used that deficit as an opportunity to provide relief themselves, through the generosity of other women within the city. In the South, a lack of preparation created similar results. Confederate nurse Constance Cary of Virginia recalled that “the younger girls had been regarded as superfluities in hospital service, but on Monday two of us found a couple of rooms where fifteen wounded men lay upon pallets around the floor, and, on offering our services to the surgeons in charge, were proud to have them accepted.”\textsuperscript{7} Faced with a large number of wounded men, Constance Cary was able to take on a new role within the Virginia hospital that had before been barred to her and her fellow women.

\textsuperscript{3}"Record of Personal Experience and Adventure during Four Years of War" (Philadelphia: Press of J.B. Lippincott Company, 1888).
\textsuperscript{4}Drew Gilpin Faust, \textit{Mothers of Invention}, 13.
\textsuperscript{5}The Civil War would see loss of human life at a rate previously unheard of in American combat. Through 4 years of fighting, roughly 620,000 Americans (Union & Confederate) would die as a result of the Civil War. More men died at the Battle of Gettysburg (51,112) than had perished in the Revolutionary War, the War of 1812, and the Mexican War combined. The unprecedented casualty rate of the Civil War surprised and horrified both the Union & the Confederacy. Numerous attempts to catalog American war casualties (in particular the Civil War) have been made in the past century and a half. The preceding numbers are drawn primarily from the following resources: \textit{Historical Statistics of the United States} (Washington: GPO, 1975) pt. 2, p. 1140, series Y 879-882; Goellnitz, Jenny. "Statistics on the Civil War and Medicine." OSU \textit{eHistory} https://ehistory.osu.edu/exhibitions/cwsurgeon/cwsurgeon/statistics; “Civil War Casualties” American Battlefield Trust https://www.battlefields.org/learn/articles/civil-war-casualties; Faust, Drew Gilpin. "‘Numbers on Top of Numbers’: Counting the Civil War Dead." \textit{The Journal of Military History} 70, no. 4 (October 2006): 995-1009.
\textsuperscript{7}Quoted in Jane Schultz, \textit{Women at the Front: Hospital Workers in Civil War America}, (Chapel Hill: University of North Carolina Press, 2004), 17.
female workers. Across the country, women were given similar opportunities to meet the demands of war by working in hospitals, and many answered the call in a courageous fashion.

Perhaps it is not surprising that both Union and Confederate women were so quick to respond to the need for nurses facing both nations. The concept of the professional female nurse, while commonplace to modern readers, was an exciting new innovation at the time of the Civil War. Florence Nightingale set the precedent for professional female nursing in her widely read work Notes on Nursing, detailing Nightingale’s work in the Crimean War of 1853-1856. Drew Gilpin Faust notes “manpower shortages, escalating casualty rates, and patriotic ambitions... pushed women toward work with the sick and wounded.” This push was “encouraged by the innovative and much admired role Florence Nightingale had played” in the Crimean War. The general unpreparedness that characterized both sides created the need, and Nightingale’s popular record of her nursing work “first published in the United States in 1860, established a conceptual legitimation for female nursing.”

The example set by Nightingale is quickly evident in the sheer volume of references found within the journals and diaries of Civil War nurses. Southerner Kate Cumming asked mere days before the fall of Fort Sumter “is the noble example of Miss Nightingale to pass for nothing? I trust not. What one woman has done, another may do.” Within weeks of that bold statement Cumming would turn her words into actions by enlisting as a nurse for the Confederacy. Toward the end of her own service for the Union, Emma Edmonds noted the connection between Civil War nurses and Nightingale. Edmonds reflected that the brave work of Union nurses would “engrave their names upon the hearts of the soldiers, as the name of Florence Nightingale is engraved upon the hearts of her countrymen.”

However, not all considered the connection between American women and the British heroine to be a positive one. In May 1862, a writer for Southern Monthly, while praising the work of Nightingale herself, questioned the suitability of her example for Southern women. Nightingale’s “heroic spirit, we should all aspire to,” yet her “deeds were such as few are fitted to perform.” The writer urged women toward providing clothing and food in place of nursing, as “such services can be performed without a doubt of propriety.” The question of propriety would surround nursing for the entirety of the war as it came into conflict with traditional gender ideals.

At the start of the Civil War, gender ideology was a complex issue that women had to carefully navigate. Much scholarship has been done concerning gender relations in Antebellum America. Barbara Welter proposes the concept of a “True Woman” to define women’s roles. True womanhood was built on the “four cardinal virtues—piety, purity, submissiveness and domesticity.” In this way, a woman’s religious and moral influence could be kept in her proper sphere, the home. Barbara Cutter, however, has criticized the concept

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8 Drew Gilpin Faust, Mothers of Invention, 92.
10 S. Emma E. Edmonds, Nurse and Spy, 370.
of true womanhood as being too narrow. Cutter re-defined antebellum gender ideology as “Redemptive Womanhood.” Cutter argues that women did not remain confined to the domestic sphere; rather, Antebellum women used their “special moral, religious, and nurturing nature to redeem others.”\textsuperscript{13} The difference here is one between prescribed gender roles and the reality of how women actually operated.\textsuperscript{14} There was certainly pressure on women to meet the standards of true womanhood, including domesticity. However, women consistently found avenues to expand their sphere of influence into public life, citing the same moral values that true womanhood employed. During the Civil War, the complex collection of gender ideologies that characterized antebellum America would become a central theme for women who became nurses.

Female nurses throughout the Civil War were forced to use antebellum gender expectations in order to defend their work. Many voices echoed the \textit{Southern Monthly} in questioning whether women should really involve themselves as nurses. Nursing constitutes a close proximity with men and violence, as such many found it untenable that women should venture so far away from the moral and physical safety of the home. Faced with such concerns, women seeking nursing positions had to overcome both external and, more significantly, internal reservations. Confederate nurse Kate Cumming notes in her journal the pressure exerted on nurses from others, as well as her own private hesitation. Cummings wrote that her “friends have advised us to go home, as they say it is not considered respectable” to go into a hospital as a nurse. Initially, under the weight of her friends' advice, Cummings “wavered about the propriety of it” only overcoming her fears by recalling “the suffering I had witnessed, and the relief I had given.”\textsuperscript{15} Years later, the question of propriety would again face Cummings who testified, “There is scarcely a day passes that I do not hear some derogatory remarks about the ladies who are in the hospitals.” However, her resolve strengthened from her years of service, Cummings fired back “as far as my judgment goes, a lady who feels that her modesty would be compromised by going into a hospital, and ministering to the wants of her suffering countrymen, who have braved all in her defense, could not rightly lay claim to a very large share of that excellent virtue — modesty.”\textsuperscript{16} Cummings turned the tables on her critics, claiming the moral high ground against detractors by claiming that modesty can be found in serving the men injured in their defense. In this way, Cumming took the gender ideology of women as moral beings and turned it into the motivation for her efforts in a way that echoes the ideals of true womanhood. Alongside

\textsuperscript{14} Much of the gender ideology that formed in the 19\textsuperscript{th} century developed as a result of the Second Great Awakening and Protestant revivals in the first few decades of the 1800's. Women's claim to a special spiritual & moral position in the church and community was widely recognized in American society, and in many cases gave women an avenue for public influence. Many leaders for women's rights, abolition, and temperance had strong religious backgrounds and employed spiritual rhetoric within their arguments. For a more comprehensive discussion of how religion influenced 19\textsuperscript{th} century women, see Tiffany Wayne, \textit{Women's Roles in Nineteenth-Century America} (Westport, Connecticut: Greenwood Press, 1968), 49-70.
\textsuperscript{16} Ibid., 121.
moral obligations, other women would be motivated by their traditional roles within the family unit.

Many women were motivated to become nurses as a part of their domestic obligations and saw the soldiers as fathers, brothers, sons, and uncles. By expanding the “family” to include the nation and its armies, women on both sides were able to grow their domestic sphere. This motivated women to care for soldiers, as well as justify their actions in a manner that could be understood within the gender ideology of their time. Writing about her involvement with the United States Sanitary Commission after the war, Jane Hoge concluded “the right of women to the sphere which includes housekeeping, cooking, and nursing has never been disputed. The proper administration of these three departments makes the internal arrangements of a hospital complete.”

Louisa May Alcott, on her first day as a Union nurse, noted a young boy who confessed “you are real motherly, ma’am.” The rest of that day, Alcott worked “hoping that I looked ‘motherly’ to them... and the suffering round me made me long to comfort every one.” Alcott noticed the role that she was filling for the soldiers and worked to adequately fulfill that role. In her diary, Confederate nurse Kate Cumming noted “‘home, sweet home,’ is the dearest spot on earth to [the injured soldiers], since they are deprived of its comforts. Mother, wife, and sister seem to be sweeter to them than any words in the English language.”

Certainly, soldiers themselves longed for home, and female nurses were determined to meet that need by doing their best to fill the empty space left by absent mothers, daughters, sisters, and wives. Nurses themselves did not see their role as a radical departure from what was prescribed, but as a natural extension of the already existent domestic roles. The feminine concept of domesticity served to inspire women toward the hospital by expanding their sphere to include the nation and its soldiers. For these women, it was important to be actively involved in the war to alleviate suffering wherever they could. By transporting some semblance of home and family into hospitals, women were able to provide care for the wounded on both a physical and spiritual basis.

Through unprecedentedly close contact with the battlefield, female nursing in the Civil War allowed women to work as a redeeming force in a traditionally male setting. Nurses sought to improve the conditions of those they treated and, in general, the hospitals in which they were working. Working as Union matron of the Georgetown hospital outside Washington, Hannah Ropes had one such experience. Upon her discovery of a “dark hole... in the cellar, said to be for any patient the steward chooses to incarcerate therein,” Ropes resolved to act. She encountered initial opposition and apathy from Dr. Ottman, one of the hospital’s leading surgeons, as well as from the hospital chaplain. Therefore Ropes, accompanied by some nurses, took the quick journey to Washington to find assistance. In Washington, both the Surgeon General and the Assistant Surgeon General proved to be completely unconcerned with her case. However, not someone quick to give up, she appealed to a higher authority: the Secretary of War, Edwin Stanton. There, Ropes succeeded in

winning an audience with the attentive Stanton and returned to her hospital accompanied by the Provost Marshall “to take away our ogre, the steward.”\(^{20}\) Using her unique position within the hospital, Ropes allowed her convictions and personal sense of morality to redeem an aspect of the hospital she viewed as wrong. By appealing to the authorities that could implement change, she managed to accomplish her goal within the confines of the system she was a part of. Ropes’ actions were not a radical departure from her societal role, but rather an extension of the redemptive power antebellum America attributed to femininity. In part, it was this belief in the morality of women that allowed nurses to succeed in hospitals despite their critics. Working within the hospital system, female nurses maintained propriety in order to influence and redeem the very system in which they participated.

In the Union, the efforts of the United States Sanitary Commission exemplified the battle between propriety and necessity that faced all female nurses. In contrast to the Union, the Confederacy had no single institution to match the United States Sanitary Commission. In her study of women’s participation in Civil War hospital work, historian Jane Schultz determined that, for the South, “where states’ rights had constituted an integral part of prewar politics, state relief organizations and individuals took the lead in caring for soldiers.”\(^{21}\) On the other hand, the Union quickly recognized the value of central authority. With an influx of applicants following the Battle of Fort Sumter, the Surgeon General R. C. Wood appointed the famous reformer Dorothea Dix to organize the Office of Army Nurses and supervise hiring nurses. It is important to remember, as historian Jane Schultz points out, that “in reality, few surgeons or sanitary commissioners ever acknowledged Dix’s authority and her power was ineffectual” from the start. In October 1863, as surgeons were given official authority to hire female attendants in response to the growing numbers of wounded, Dix’s authority completely dissolved.\(^{22}\) The historic value of Dix is not found in the level of influence she carried when it came to female nurses, but in the guidelines she created for applicants, which were accepted by the Sanitary Commission and which reveal an extreme awareness of female propriety. Dix’s criteria called for women aged thirty-five to fifty years, and included “neatness, order, sobriety and industry.” Applicants were also expected to present two letters verifying their “morality, integrity, seriousness, and capacity for care of the sick.” For those applicants that were accepted, Dix restricted their fashion to a strict dress code, “without ornaments of any sort.”\(^{23}\) These steps were intended to discourage applicants from frivolous behavior. Dix, understanding the controversy that female nursing generated, attempted to limit the chances of any scandal. Female nurses were expected to act in adherence to Dix’s rules for proper behavior; otherwise they would strengthen their critics’ arguments. The existence and severity of Dix’s system reveals the pressure placed on female nurses and is a clear example of the struggle to maintain propriety in their new role. Unfortunately, of the more than three thousand women accepted as nurses under Dix’s

\(^{22}\) Ibid., 15.
\(^{23}\) Dorothea Dix, Circular No. 8, July 14, 1862, Circular and Circular Letters, Union Surgeon General’s Office, National Archives and Record Administration.
supervision, few if any were African-American. While no less a part of either nations hospital work, the labor of African-Americans would remain overlooked for years afterword.

In both the Union and the Confederacy, the large-scale involvement of African-American women in hospital work is inarguable. However, their work is often overlooked or forgotten due to the difficult nature of the research, specifically the lack of available resources. Many challenges exist in uncovering these women's stories. On an individual level, many (especially slaves in the South) were illiterate and, therefore, were less likely to leave any kind of record. Institutional record keeping concerning black efforts also leaves something to be desired. As historian Jane Schultz argues, general “estimates” of the number of women involved with hospital work, both white and black, “have always been too low.” When trying to determine the number of women who participated in Civil War hospitals, historians must consider all available evidence.

Perhaps the most commonly cited number for female nurses active during the Civil War is the figure provided by the United States Record and Pension Division’s count of 21,208. This number was created through an effort to tally up the women involved with hospitals and reward their efforts with pension funds a few decades following the Civil War. However, this number is severely limited in scope. It does not take into account the number of women who served as volunteers, nor any Confederate women. The only women included within the Record and Pension Division’s findings would be paid Union women, hardly an all-encompassing count. The U.S. Record and Pension Division’s findings conclude that 2,096 (roughly 10 percent) of Union hospital female workers were African-American. The Pension records also reveal a predictable distribution across job classifications. While constituting 36 percent of cooks and 14 percent of all laundresses listed, black women made up only 6 percent of nurses and 7 percent of matrons. Thus, African-Americans were distributed away from more prestigious positions and given roles deemed more acceptable by white leadership. Of the 420 black nurses recorded, 281 of those were contract nurses.

Contract nurses were hired on the spot to fill demand, rather than undergoing any type of formal application process. This “suggests blacks without institutional connections could find on-site hospital work” as nurses more easily than through traditional routes that became blocked due to racial discrimination. African-American women’s reliance on contract nursing as a path to acquire formal nursing positions is again indicative of the struggle women faced in overcoming concerns of propriety. These women had to move beyond societal notions of both gender and race and were often only successful when circumstances generated an opportunity for them to serve. Further, the reality of black nurses’ involvement likely surpasses the given data. In her memoirs, escaped slave Susie King Taylor notes that she “was enrolled as company laundress, but... did very little of it.” While designated as a laundress, in actuality Taylor served in a variety of roles necessitated by wartime, including

24 Ibid., 19-21.
25 Carded Service Records of Union Hospital Attendants, Matrons, and Nurses, 1861-65, Record Group 94, National Archives and Record Administration
the care of the injured. Ann Stokes, another escaped slave, worked alongside other African-American women aboard the U.S.S. Red Rover hospital ship. In 1890, Stokes became the first woman to receive a pension from the Navy for her service as an enlisted nurse during the war. As the course of the war developed, many formerly enslaved women such as King and Stokes joined the Union army in a variety of roles such as laundresses, cooks, or nurses. While facing discrimination, black women verifiably participated within Union hospitals throughout the Civil War, lending aid to the efforts that would eventually lead to freedom. In the South, their heroic efforts were matched, if not surpassed, by the efforts of slave workers involved with Confederate hospital systems.

Trying to estimate an accurate number of female nurses working under the Confederacy is confounded by the amount of records lost, as well as the decentralized and informal structure that nursing took in the Confederacy. Procuring any over-arching estimate of African-American women involved in Confederate hospitals similar to the number provided by the Union records given by the U.S. Record and Pension Division proves difficult. However, a few resources survive to inform us of black participation in southern hospitals. Perhaps the strongest surviving evidence can be found within the well-kept records of Confederate Surgeon-General Samuel H. Stout who supervised hospitals attached to the Army of Tennessee. In 1986, historian Clarence Mohr published a study of Georgia’s slave population and their experiences during the Civil War. Extremely comprehensive, Mohr’s survey touches on hospital work, primarily drawing from the papers left by Samuel H. Stout. The statistical analysis conducted by Mohr shows that within nineteen Georgia hospitals in 1863, slave labor accounted for 46 percent of all workers. From the two hospitals broken down by gender, Mohr calculates that black females accounted for 23 percent and 28 percent respectively. Unsurprisingly, the black women involved in these two hospitals were completely missing from leadership positions. While in the Union hospitals, black women rarely found leadership roles such as matron positions; it appears likely that even that small chance was completely missing from formal Confederate hospital structures. Similar to women’s experience in the North, many black Confederate women often found their tasks exceeding the requirements of their base positions. For example, Confederate nurse Kate Cumming remarks in her diary that her fellow white nurse Mrs. Williamson was attended by a “negro girl” when she became struck with Typhoid fever. Due to the close care of the slave girl, Mrs. Williamson would make a full recovery.

Often, Confederate leadership encouraged the presence of black labor, both male and female. Surgeon-General Samuel H. Stout encouraged Confederate citizens to “let us have the

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31 Ibid., 134-135.
labor of your negroes, and we will strengthen the army” in response to growing labor shortages. The presence of slaves in hospital work became synonymous with patriotism; every slave laborer lent to the hospital represented a white soldier that could be returned to the army. Wealthier white citizens of the Confederacy responded to the medical need by interning many of their slaves in hospitals, receiving pay themselves for their slaves’ services. As a result, slave labor remained a consistent part of the Confederate hospitals. For example, Ella Newsom left a life of comfort to take up work with the Confederate Army of Tennessee. When she decided to enlist as a nurse, Newsom brought many of her personal slaves with her to help as hospital workers and hired dozens more slaves as the army moved locations and needed more laborers. Some historians go so far as to propose that black workers operated “in far greater numbers than white women in Confederate hospitals” likely as a direct result of loaned-out slave labor. Despite the lack of firm, over-arching records, there is considerable evidence showing the vital role that slaves, including women, played within Confederate hospitals. The efforts of black women in both the North and the South played a vital role for the war efforts of both regions.

The Civil War offered a variety of challenges as well as opportunities to women. The sheer scale of bloodshed caught the entirety of the nation off-guard. The Civil War was a new form of violence, a hint toward the totality of war that would come with the twentieth century’s World Wars. Often referred to as a war of brothers and fathers, the Civil War was equally a struggle for sisters and daughters; wives and mothers. While many women found a variety of ways to involve themselves in the conflict (or were unwillingly forced into it), the institution of nursing is notable due to the amount of controversy it stirred at the time. In the precarious world of gender ideals that was antebellum America, any break from tradition had to be carefully navigated. Women used their femininity to support their work as nurses, nearly as often as detractors cited their femininity as criticism. In the end, necessity dictated the formation of a new chapter for women in medicine, regardless of the nation’s readiness for such a dramatic move. War is a great facilitator of change. Clara Barton once noted that women had progressed “fifty years in the advance of the normal position” due to the war. The coming century would see women push even further into new and various fields, searching for an expansion of their sphere. The legacy of Civil War nurses lives today in the continuing efforts of American women.

33 Dr. S.H. Stout to Mrs. Isabel Harmon, 09/22/1863, Samuel H. Stout Papers, University of Texas. Quoted in Mohr, *Threshold of Freedom*, 130.