

11-2017

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Recommended Citation

Smith, Keely (2017) "Unassuming Heroines: The Catholic Sister Nurses Who Transcended Cultural Boundaries During the Civil War," *Armstrong Undergraduate Journal of History*: Vol. 7 : Iss. 2 , Article 5.

DOI: 10.20429/aujh.2017.070205

Available at: <https://digitalcommons.georgiasouthern.edu/aujh/vol7/iss2/5>

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Unassuming Heroines:

The Catholic Sister Nurses Who Transcended Cultural Boundaries during the Civil War

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A typical day for a Catholic sister nurse during the Civil War would have begun around 4:00 AM in a room with up to fifteen fellow Sisters of Charity, as they were often called, for a candlelit breakfast before embarking on the day's many duties. After that, they might be seen tirelessly supervising wards, dressing wounds, caring for those with contagious diseases, distributing medicine, preparing corpses for burial, tending to the kitchen or the laundry, cleaning the hospital, or of course providing for the spiritual wellbeing of the patients.¹ They eagerly completed tasks that few other women would ever want or agree to do with no complaints and few demands. Although the Sisters of Charity were to an extent a societal anomaly as they acted and served in manners unanticipated of women and Catholics at the time, their diligence was particularly well received by surgeons, patients, and many other hospital workers. They overcame limited expectations of women, broke through class barriers, and

¹ The Sisters of Charity and the Sisters of Mercy are titles for various groups of Roman Catholic religious orders dedicated to serving the poor, sick, and downtrodden. In their service, the communities function in similar ways; the differentiation in name relates to the choice of each organization's respective founder. St. Vincent de Paul founded the Daughters of Charity (later unified with and is now synonymous to the Sisters of Charity) in 1633 in France, and Catherine McAuley founded the Sisters of Mercy in 1831 in Ireland. For more background information, see Susan E. Dinan, *Women and Poor Relief in Seventeenth-Century France: The Early History of the Daughters of Charity* (Burlington, VT: Ashgate Publishing, 2006), 25; Mary Beth Fraser Connolly, *Women of Faith: The Chicago Sisters of Mercy and the Evolution of a Religious Community* (New York: Fordham University Press, 2014), 1; Kate Cumming, *Kate: The Journal of a Confederate Nurse*, ed. Richard Barksdale Harwell (Baton Rouge: Louisiana State University Press, 1959), 94.; John Hill Brinton, *Personal Memoirs of John H. Brinton, Major and Surgeon U.S.V., 1861-1865* (New York: Neale Pub. Co, 1914), 44-45; Sister Mary Denis Maher, *To Bind Up the Wounds: Catholic Sister Nurses in the U.S. Civil War* (New York: Greenwood Press, 1989), 37, 109.

undercut anti-Catholic prejudice throughout the North and the South as they served their God and patients. Through their immense dedication to divinely ordained service in Civil War hospitals, Catholic sister nurses were able to transcend gender, class, and religious and cultural boundaries in a manner that garnered respect, admiration, and acceptance.

Although female nurses were uncommon and generally unaccepted until they became a necessity during the Civil War, Catholic sister nurses worked in hospitals under a preexisting system in Europe and America that excluded them from gender-related societal expectations. According to Barbara Duffey in “The Florence Nightingale of the Southern Army,” “Women nurses were frowned upon early in the war because it was thought that nursing young male soldiers might compromise the delicate and modest natures of young women.”² This was particularly true in the South, which did not allow employed female nurses until August of 1861 when the Confederate Congress passed legislation that allowed for “the employment, when deemed necessary, of nurses and cooks, other than enlisted men, or volunteers” in the Confederate Army to “better provide for the sick and wounded of the army in hospitals.”³ The Catholic sister nurses were unpaid volunteers rather than employed nurses, but their service was no less well known or highly regarded despite the significant prejudice against female nurses. The Sisters of Mercy started hospitals and were requested to offer their nursing services, even in the South, decades before the Civil War. For example, the Charity Hospital in New Orleans requested the control of the Sisters of Charity in 1834. The nursing sisters also opened the Richmond Infirmary in 1838 and worked at the Maryland Hospital in Baltimore from 1834 to

² Barbara Duffey, “The Nurse, Ella K. Newsom Trader: ‘The Florence Nightingale of the Southern Army,’” in *Valor and Lace: The Roles of Confederate Women 1861-1865*, ed. Mauriel Phillips Joslyn (Murfreesboro, TN: Southern Heritage Press, 1996), 94.

³ Duffey, “The Nurse, Ella K. Newsom Trader,” 94; *The Statues at Large of the Provisional Government of the Confederate States of America*, February 8, 1861-February 18, 1862, ed. James M. Matthews (Richmond: R. M. Smith, Printer to Congress: 1864), CHAX. XXIX, <http://docsouth.unc.edu/imls/19conf/19conf.html#p186>.

1840.⁴ Catholic sisters were providing nursing services well before other nonaffiliated female nurses were deemed necessary and were unhindered by societal norms that barred most women from assisting those in need.

Catholic sisters have served in nursing positions since the Middle Ages, and were particularly known for their valiant medical efforts in the Crimean War.⁵ Their reputation for serving faithfully under the leadership of Florence Nightingale made them valuable commodities in the hospitals during the Civil War before female nurses became widespread. For example, when Brigadier General John F. Rathbone of Albany, New York wrote to Bishop John McCloskey on June 1, 1861, he requested the assistance of sister nurses and commented, “The superiority of the Sisters of Charity as nurses is known wherever the names of Florence Nightingale and the Sisters who accompanied her to the Crimea have been repeated, and these soldiers [. . .] would feel encouraged by their kindness and care.”⁶ The sisters who served in Crimea were even used as examples in the *Richmond Dispatch* on May 16, 1861, when a woman from Drakesville, North Carolina advised Southern nurses, “May I suggest, through the columns of the Dispatch, to Southern women, in view of the events, which God in his great mercy avert, to study Florence Nightingale’s ‘Notes on Nursing’ The warmest enthusiasm, or even the most devoted love, will not make a good and efficient nurse, without strong common sense and practical knowledge. And who so fitted to teach on this subject as the woman who had charge of the hospitals in the Crimea, and who possesses a wonderfully strong, shrewd and practical mind?”⁷

⁴ Maher, *To Bind Up the Wounds*, 35.

⁵ *Ibid.*, 31-32, 71.

⁶ Brigadier General John F. Rathbone to Bishop John McCloskey, June 1, 1861, in *To Bind Up the Wounds*, 71.

⁷ “Correspondence of the Richmond Dispatch. To the Women of the South,” *Richmond Dispatch*, May 16, 1861, *The Daily Dispatch*.

Although some Sisters of Charity served through teaching and therefore did not have specific medical training, their heroic reputation and dedicated obedience rendered them top choices for medical assistance from the beginning of the Civil War.

Diaries, letters, and records concerning the sister nurses do not typically discuss the transcendence of gender norms that took place when nuns served as nurses before and during the early years of the Civil War. In fact, their promise of celibacy and lifetime dedication to service allowed them to work unhindered by a fear of disrupting the delicacy and purity that were so highly regarded in eligible or married women in the South. As nuns were sheltered and separated socially, and to a certain extent culturally, by the influence of their orders, the Sisters of Charity were far enough removed from feminine societal expectations and class structure that social limitations involving hospital work were not problematic. Although the Catholic sisters did not find themselves confined by society's feminine role requirements, however, they still avoided social disharmony by remaining within the feminine spheres of domesticity and servitude. Just as the sphere of domesticity suggested for all women, Catholic nuns served as teachers, formed sisterhoods with a mission for volunteering, and acted piously.⁸ Most visible in the hospital setting, the Sisters of Charity also remained obedient to the demands of male authority figures, such as the surgeons.⁹ The submissiveness they showed and their proven reputation for skilled hospital labor allowed them to achieve respect from the surgeons and many others in the hospital setting despite their variance from societal norms. The Sisters of Charity successfully transcended feminine social boundaries by working in hospitals before it was considered acceptable for women, practicing celibacy, and remaining closed off from society unrelated to service, yet their dedication to the feminine spheres of domesticity and submission kept them

⁸ Maher, *To Bind Up the Wounds*, 20-21.

⁹ *Ibid.*, 19.

from extending too far outside accepted cultural norms. In this way, they were able to gently and gradually change conceptions of women in medicine and of Catholicism through respect rather than through an abrupt challenge to cultural values.

As the need for female nurses became increasingly evident with the prolongation of the Civil War and an increased number began to volunteer or gain employment in hospitals, the sister nurses generally remained removed from the inter-hospital class structure that emerged and dictated responsibilities and duties. According to historian Jane E. Schultz, “The institutional havoc created by the appointment-and in some cases simply the arrival-of women from so many quarters was rivaled only by the indiscriminate categorization of their services.”¹⁰ Hospital workers’ roles were based on a clear hierarchical divide driven by socioeconomic status and race. This structure was especially clear in the North where hospitals were more institutionalized and women were less accustomed to settings with interracial labor.¹¹ An upper or middle class woman serving as a northern nurse (often selected by Superintendent of Nurses Dorothea Dix) or a southern matron would often be given a supervisory position in which she would not be expected to partake “in gritty medical procedures performed on the often severely wounded or desperately ill soldiers, or even in activities such as wound dressing or bathing or the dispensing of medicines.”¹² Instead, nurses were typically asked to serve meals, attend to the needs of the patients, distribute clothing, and write letters to soldiers’ loved ones. Chosen convalescent soldiers were often in charge of helping surgeons deal with wounds, and black and working-class women were assigned tasks involving “contact with the bodily functions of strangers” in addition

¹⁰ Jane E. Schultz, “The Inhospitable Hospital: Gender and Professionalism in Civil War Medicine,” *Signs* 17, no. 2 (Winter 1992): 369.

¹¹ Jane E. Schultz, *Women at the Front: Hospital Workers in Civil War America* (Chapel Hill: University of North Carolina Press, 2004), 4.

¹² Elizabeth D. Leonard, “Civil War Nurse, Civil War Nursing: Rebecca Usher of Maine,” in *Major Problems in the Civil War and Reconstruction*, ed. Michael Perman (Boston: Houghton Mifflin Company, 1998), 258.

to cooking and laundering.¹³ Glenna R. Schroeder-Lein in *The Encyclopedia of Civil War Medicine*, however, places the Catholic nuns in their own subset within the hospitals. They were given the respect and leadership roles of the high class nurses yet were no less willing to dress wounds, work in pest houses with the most contagious patients, chop wood, and do chamber work and laundry, which were chores typically reserved for lower class women.¹⁴ Their divine motivation and diligence in assisting those in need placed them above worldly class distinctions that evolved in hospitals during this period and allowed them to transcend class boundaries that typically governed the hospitals.

In addition to their highly skilled reputation from the Crimean War, the devoted servitude and obedience of the Sisters of Charity rendered them top choices of surgeons. They worked tirelessly to align themselves with the “Rules and Constitutions” of the Sisters of Mercy, originally transcribed in 1841 but passed down among the sisters for generations, which ordered them to “see that the rules of the hospitals are strictly observed by patients as well as visitors,” dutifully serve the contagious, and tend to the corporal and spiritual needs of the patients. Furthermore, it stated that “all familiarity with the patients, with the doctors, and with outsiders in general, [were] to be avoided, and in their ministrations they [were to] avoid all useless conversation.”¹⁵ The strict rules by which they lived and worked encouraged them to be obedient servants who asked for little in return. The surgeons held this quality in high regard, which is evident in the way one surgeon, John Brinton, valued the service of the Sisters of Charity. He complained of the pettiness of the nurses chosen by Dorothea Dix when he exclaimed in his

¹³ Ibid., 258, 261.

¹⁴ Glenna R. Schroeder-Lein, *The Encyclopedia of Civil War Medicine* (New York: Routledge, 2015), 342; Schultz, *Women at the Front*, 37; Michael F. Fitzpatrick, “The Mercy Brigade,” *Civil War Times Illustrated* 36, no. 5 (October 1997): 34.

¹⁵ *New Catholic Encyclopedia*, s.v. “Sisters of Mercy,” accessed April 15, 2017, <http://www.encyclopedia.com/religion/encyclopedias-almanacs-transcripts-and-maps/sisters-mercy>; Sisters of Mercy, *Rules and constitutions [of the] Religious Sisters of Mercy* (Philadelphia: H. L. Kilner, 1890), 152-154.

memoir, "Can you fancy half a dozen or a dozen old hags, for *that* is what they were [. . .] surrounding a bewildered army surgeon, each one clamoring for her little wants?" and soon replaced them with an order of teaching nuns who "in a short time [. . .] adapted themselves admirably to their new duties" and only required one room for fourteen or fifteen of them.¹⁶ Understandably threatened by the high esteem with which the surgeons held the Sisters of Charity, Dorothea Dix harbored significant prejudice against the Catholic sisters, chastised their attire, and alluded that they were unsatisfactory for the patients.¹⁷

Dorothea Dix's criticism should not only be attributed to her jealousy over the preferential treatment the Sisters of Charity received; there was also an underlying current of anti-Catholic sentiment prominent at the time that many of the Catholic sister nurses had to overcome. Prejudice against the Catholics rose exponentially during the 1840s and 1850s in response to the overwhelming increase in Irish immigration, which became clear among many of the laywomen in the hospitals during the Civil War. The institutionalized nursing structure that developed within northern hospitals in addition to the inflow of Catholic Irish immigrants made anti-papist prejudice particularly strong in the North. Like Dorothea Dix, many of the nurses' preexisting prejudices were matched by their jealousy of the immigrant nuns who were outshining them in the eyes of the surgeons. In response, they would insist "that the Catholic clergy were more interested in proselytizing than in healing and that nuns were merely the conduits for an impersonal series of rituals that finally neglected the soldier's spiritual well-being."¹⁸

¹⁶ Brinton, *Personal Memoirs of John H. Brinton*, 44-45.

¹⁷ Maher, *To Bind Up the Wounds*, 130.

¹⁸ Schultz, *Women at the Front*, 100-101.

The prejudices of some of the lay nurses, however, were not powerful enough to stop the Sisters of Charity from fulfilling their divinely ordained mission. As they proved their worth to surgeons, patients, and other nurses, they increasingly gained trust and respect for themselves and their religious practices. For example, at the termination of the war, Surgeon-General Isaac J. Hayes wrote to the superior of the Daughters of Charity at Satterlee Hospital, Philadelphia, “You have won my gratitude and the gratitude of every true soldier, and have confirmed me in the profound esteem which I have always entertained for your noble order.”¹⁹ Despite the prejudice from some nurses that the Sisters of Charity encountered, there were other nurses who also came to appreciate the dedication of the sister nurses. Susan Wallace, wife of Union General Lew Wallace, wrote in letter, “Nothing in our churches equals the devotion of these women. When Protestant Sisters [nurses] get tired they go home, but the Sisters of the Holy Cross live among the patients without thought of deserting infected places or avoiding contagion by flight.”²⁰ Well-known Confederate nurse Kate Cumming also held the sister nurses in high regard, especially when describing a hospital she where she had been sent: “When we arrived at the hospital, we were charmed with the cleanliness and neatness visible on every side. The Sisters of Charity have charge of the domestic part, and, as usual with them, everything is parfait. We were received very kindly by them.”²¹ Despite the anti-Catholic prejudice some Sisters of Charity might have faced, their devoted, faith-based service was essential in their gaining the respect of those around them.

Sisters of Charity have provided their services to heal the sick and tend to those in need for centuries, but they were not widely recognized for their missions until they became essential

¹⁹ Surgeon-General Isaac J. Hayes to Superior of the Daughters of Charity, in *To Bind Up the Wounds*, 126-127.

²⁰ Susan Wallace to mother, December 1861, in *To Bind up the Wounds*, 132.

²¹ Cumming, *Kate: The Journal of a Confederate Nurse*, 22.

components of Civil War hospitals. Volunteering in both the North and the South, these sister nurses unobtrusively transcended gender, class, and religious and cultural boundaries of the era in a way that garnered respect and admiration from many who came into contact with them. Through their age-old devoted and regulated healthcare services, one might even say that Catholic sister nurses were able to form a separate cultural identity that freed them from the limits placed on women and Catholics at the time. They were not expected to observe the requirements of feminine delicacy that initially stopped many women from serving as nurses or handling strange soldiers because of their precedence serving in hospitals and their promise of celibacy. Furthermore, they were unaffected by the class structure that evolved among female hospital workers because of their devout mission to serve in whatever capacity needed, whether it be in a supervisory role or a task in the chamber room. The religious prejudice typical of that era might have been present, but they continuously proved anti-papal preconceptions incorrect as they demonstrated their essentialness in the hospital workforce. Their mission-driven service and distance from the typical societal functions during the Civil War allowed the Sisters of Charity to cross cultural boundaries in such a way that no other group of women could or would attempt at the time. In this way, the sister nurses did not only serve the patients within the hospitals; they served fellow women and Catholics also seeking freedom and respect.

About the author

Keely Smith is a senior History, Spanish, and Global Studies major at Samford University in Birmingham, Alabama. She currently works for the Samford History Department's Oral History Program, and she hopes to be a colonial history and folklore professor.