ORIGINAL ARTICLE

Resilience of nursing students during World War II

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Abstract

Aim: This study aimed to describe the experiences of a unique cohort of students and United States Cadet Nurse Corps cadets at the University of Cincinnati College of Nursing and Health between 1943 and 1946. How the experiences fostered resilience in the students to provide nursing service during World War II is also discussed.

Methods: Historical research methods to include oral histories of seven graduates and archival research were used. Both primary and secondary data sources informed the broader historical context.

Results: The one-time, 3-year accelerated nursing degree program created unique experiences for the students. Two themes, lack of cadet status recognition and lack of knowledge regarding faculty concerns, were identified. The lack of these factors shed light on what was present for this cohort that fostered resilience in the students to provide nursing service during the war. The cohort experienced a strong sense of community and confidence instilled by a supportive faculty within a rigorous yet, predictable and structured program.

Conclusions: Findings can be used to assist faculty in preparing today’s student nurses for disaster nursing. To foster resilience, students’ disaster nursing experiences need to be organized and structured, and involve a supportive faculty. Nursing programs can provide these experiences to students through disaster simulation or authentic, organized disaster relief when available. Positive relationships with faculty and peers also build a sense of community that expands from one’s program cohort to the broader nursing and societal community.

Key words: disaster nursing, resilience, student nurses, United States Cadet Nurse Corps

INTRODUCTION

Disaster is often referred to as an “overwhelming disruption of the community” that may be naturally occurring or man-made (Cusack, Arbon, & Ranse, 2010, p. 193). Recent literature notes the integral role of nurses because the effectiveness of health care’s disaster response is dependent on the surge capacity of the nursing workforce (Goodwin Veenema et al., 2016; National Advisory Council on Nurse Education and Practice [NACNEP], 2009). Despite the increase in frequency and intensity of disasters over the past decade, “efforts to prepare and mobilize nurses for disaster preparedness and response have been episodic and difficult to sustain” (Goodwin Veenema et al., 2016, p. 188).

Recently, a coalition of Veteran’s Organizations including the Veterans Health Administration and U.S. Department of Veterans Affairs, initiated a call to action to identify challenges and determine first steps to improve the practice of disaster nursing (Goodwin Veenema, et al., 2016). Faculty and students have been identified as untapped resources during disaster response and have demonstrated a willingness to be involved in some capacity (Cusack et al., 2010; NACNEP, 2009; Schmidt et al., 2011). Historically, student nurses have met community needs during natural and man-made disasters, such as pandemics and wars. Therefore, studying nurses and nursing students’ response during past disasters may assist the profession to improve the practice of disaster nursing today.

Keeling (2010) recounted the amazing response of the nursing workforce during World War I and the influenza...
pandemic in the early 1900s. During this period, student nurses were instrumental in providing the “bulk of care [in hospitals], working under the supervision of the few graduate nurses who had not gone off to war” (Keeling, 2010, p. 108). World War II (WWII) illustrates another time in history when student nurses assisted meeting the nursing service needs in hospitals. The purpose of this paper is to describe the experiences of a unique cohort of nursing students during WWII, and discuss how their experiences fostered resilience to provide nursing service during the war. Findings from this study can be used to assist faculty to prepare today’s nursing students to provide nursing care during a disaster.

BACKGROUND EXPLAINING THE UNIQUENESS OF THIS COHORT

United States Cadet Nurse Corps

The Nurse Training Act of 1943 provided Federal grants to institutions for the training of nurses and established the U.S. Cadet Nurse Corps (USCNC) nurse-training program to alleviate the deficiency of available nurses (U.S. Public Health Service, 1950). In order to receive Federal aid, participating schools had to accelerate program length. Traditionally, hospital-based diploma schools offered programs that were 36 consecutive months in length and university baccalaureate degree programs were four to five academic years in length. The cadet nurse programs ranged in length from 24 to 36 months depending on the requirements of each state’s Board of Nursing. This accelerated timeline created a rigorous program of study. After just a few months of training, three student nurses were expected to be able to replace two staff nurses for many hospital activities (U.S. Public Health Service, 1950). In the final 6 months of the program, a Senior Cadet had completed classes, yet continued to provide faculty-supervised nursing service in a Federal or non-Federal hospital equivalent to that of a full-time staff nurse (U.S. Public Health Service, 1950). As Senior Cadets, the students received continued supervised clinical training, yet also helped alleviate the nursing shortage by providing a viable and consistent patient care workforce for hospitals during the war. Despite the rigorous conditions of the programs, the USCNC was successful in increasing nursing service to address the workforce shortage.

The USCNC enrolled 169,443 student nurses in 1,125 of the 1,300 nursing schools in the U.S. and of those, approximately 73% of the cadets graduated (U.S Public Health Service, 1950). The USCNC increased the nursing workforce by 124,065 nurses during its brief 2 years (U.S. Public Health Service, 1950). Admission to the USCNC was discontinued at the end of WWII on October 15, 1945. The USCNC serves as an exemplar of utilizing student nurses during a disaster. Students who enrolled in the USCNC received a complete scholarship and monthly stipend, and in return, provided needed nursing services as students and pledged to remain in essential civilian or military nursing service after graduation for the duration of the war.

Some of the success of the USCNC has been attributed to its recruitment campaign. The USCNC was highly advertised via newspaper and magazine articles, posters, radio announcements, movie theatre previews, billboards, and speeches to recruit young women to nursing. The recruitment campaign also promised cadets an honorable status as a nurse for their country. Authors and sisters, Thelma Robinson and Paulie Perry, were cadets and shared the story of the USCNC from a perspective involving unveiling respect, honor, and recognition (Robinson & Perry, 2001; Robinson, 2009). Cadets were recognized through a specially designed military-style dress uniform; student uniform patch and nursing pin; publicized induction ceremonies and anniversary celebrations; a specialized newsletter, Cadet Nurse Corps News; and reduced public transportation rates when dressed in uniform. Countless stories of prideful moments as a cadet fill the pages of Robinson’s and Perry’s books and match the recruitment campaign promises (Robinson & Perry, 2001; Robinson, 2009).

Uniqueness of the University of Cincinnati School of Nursing and Health

In response to the WWII nursing shortage, the University of Cincinnati College of Nursing and Health (UCCNH) shortened their baccalaureate nursing degree program before the USCNC was established. In February 1943, the nursing faculty proposed to the Board of Trustees a consecutive 3-year/36-month baccalaureate nursing degree program to replace their traditional four-academic year baccalaureate program (University of Cincinnati Board of Trustees Minutes, Cincinnati, OH, January 1942–December 1944). The proposal referenced the wartime needs and requested the “organized class work” be completed in the first 24 months in order to allow the seniors to complete their final year within Army hospitals. The proposal was approved so the class entering in August 1943 would complete the program in 36 consecutive months. The students learned that the degree program would be accelerated when they arrived on campus.

It is important to point out that the UCCNH nursing program was not an USCNC-approved school in August.
1943; the university did not apply for cadet status until November of 1943 (University of Cincinnati Board of Trustees Minutes, Cincinnati, OH, January 1942–December 1944). Once the USCNC program at UCCNH was approved in January 1944, the option to join the cadet nursing program was presented to some of the students who enrolled in August 1943. Whether or not students joined the USCNC, every student who enrolled in the UCCNH nursing program in August 1943 completed the 3-year accelerated degree program.

Only 10% of approved accelerated programs were university-based, but some of these provided a diploma rather than a baccalaureate degree (Robinson & Perry, 2001). Just 7 months after beginning the accelerated baccalaureate degree program, the UCCNH faculty urged the Board of Trustees to approve reverting the plan of study back to the four-academic year plan before the war was over (University of Cincinnati Board of Trustees Minutes, Cincinnati, OH, January 1942–December 1944). The only documented reason for this request was that faculty believed the average high school graduate was not mature enough to carry out the responsibilities of the accelerated degree program or the responsibilities of the graduate nurse after program completion. The faculty must have been referring to the role of the degreed graduate nurse because they also proposed to re-offer their 3-year diploma option—which they had eliminated in 1938—as an alternative to maintain an approved USCNC program. The faculty’s request was granted and as of the fall semester in 1944, the consecutive 3-year accelerated degree program was no longer an option. Therefore, the cohort who began their studies in August 1943 and graduated in 1946 was the only graduating class from UCCNH who received their baccalaureate nursing degree after completion of the 3-year accelerated program. These facts make the experiences of this 3-year cohort at UCCNH unique.

METHODS

Historical research utilizing oral histories and archival research served as the study method. The University of North Carolina Wilmington’s Institutional Review Board approved the study. Participants from UCCNH’s 1946 graduating class were recruited by telephone. Ten of the 60 three-year accelerated program graduates were successfully contacted. Of the 10 graduates, one declined to participate, two were unable to participate due to illness, and seven were willing to participate. Informed consent included permission to use the participant’s real name in dissemination of the study results unless the participant verbalized the request for anonymity during the interview. Following informed consent, face-to-face interviews were conducted and audio-recorded. None of the participants verbalized the request for anonymity. The interviews took place in the participants’ residences due to their advanced age. Participants ranged in age from 86 to 89 years at the time of the interviews in 2013. Seven oral histories were completed. Participants requested structured interview questions to complete the oral histories to aid their memories. The interviews were transcribed by professional transcriptionists to ensure accuracy of the primary source document, thus enhancing the rigor of the study. The audio-recordings and transcripts were reviewed and analyzed by the author using the study aims to guide and frame the analysis.

Archival research was completed by reviewing the USCNC nurse-training program federal documents at the National Archives and Records Administration in College Park, Maryland and specifically, the UCCNH accelerated baccalaureate nursing degree program at the Carl Blegen Library, University of Cincinnati and the Wedbush Centre of the University of Cincinnati College of Nursing in Cincinnati, Ohio. Primary data sources, including board of trustees’ and various committees’ minutes, photographs, letters, annual reports, student records, and commencement bulletins, to name a few, were analyzed. Secondary data sources, including historical and contemporary professional journal articles and related books, enhanced, validated, and confirmed the findings. Both primary and secondary data sources were used to capture the broader historical context.

Genuineness, authenticity, and significance of the data were determined through careful collection and inspection. Genuineness indicates validity or whether the document is real and authenticity indicates the reliability or truthfulness of the content in the document (Glass, 1998; Lewenson, 2003). The author, as the sole data collector, maintained control over determining which data to include. Balancing conflict and controlling bias were accomplished through journaling, disclosing thoughts and feelings with other nurse researchers, and frequently reviewing the research questions and purpose. Analysis of data was facilitated by identifying themes and continuously reorganizing data into a synthesized narrative. Appropriate use of data and ethical considerations were considered in the creation of the narrative.

RESULTS

The findings reveal the unique experiences of the 1946 UCCNH accelerated baccalaureate nursing degree grad-
The 1946 cadets of UCCNH’s 3-year accelerated baccalaureate degree program did not experience the honorable status and recognition as promised in the recruitment campaign and shared by other cadets across the country. These students did not adorn the USCNC patch on their student nursing uniforms nor did they commonly wear the military-style cadet uniform. However, this cohort was differentiated with a different uniform. The students entering in 1943 had blue check fabric for their student uniform rather than the usual black check fabric worn by previous students because of the shortage of wartime goods. Their uniform and designation was obviously different but not as a cadet.

The graduates did not know who was or was not a cadet. Betty Mae Robinson assumed all the 3-year students were cadets, and Mary Monteith had no idea anyone was a cadet. When the graduates were specifically asked about relationships with cadet versus non-cadet classmates, similar answers were received: “there was no issue made over cadet nurses,” “there was no difference,” and “we didn’t know who was or wasn’t a cadet.” Dee Stephens went as far as to suggest not even mentioning the USCNC when telling their story.

The only indication in the student nursing records of cadet status was the labeling of the final clinical rotation as “Senior Cadet Period.” Some students who requested placement in other hospitals for their Senior Cadet experience were denied due to the shortage of nurses at Cincinnati General Hospital. Additionally, there was no acknowledgement of their cadet status on their 1946 commencement bulletin. The war ended and the USCNC had been dissolved by the time they graduated in 1946, thus diminishing the importance. Several of the participants spoke about never hearing anything regarding the USCNC after graduation.

As noted in Table 1, three of the graduates joined the USCNC for patriotic reasons, one for the financial support, two because they planned to work anyway, and one did not know about the opportunity. These graduates also regarded the rigorous conditions of their education and training, the scarcity of nurses and hospital resources, and the rules and regulations imposed on them to be expected because, as Betty Shewalter stated, “there was a war going on.” Betty Shewalter also noted that “there weren’t many [nurses]; they’d all gone off to the service, and we did all the nursing.” The wartime and shortage of nurses influenced their student experiences but they persevered to become nurses.

The graduates remember a strong sense of community among the “blue check” classmates. The intensity of the program and tight time and space spent together fostered special bonds and relationships among students. Fritzi Sigel described the bonding this way: “We developed a camaraderie that went on for years...I think it was because we were under such pressure being 3-year instead of 4-year [students].” Betty Shewalter expressed similar rationale for the bonding between classmates: “I think we all got along very well together; we were all in the same boat, that’s for sure.” They formed an identity as a cohort of accelerated degree graduates well-prepared for their nursing role.

Not aware of the faculty’s request
These seven graduates did not know they were entering an accelerated program until they arrived on campus. None of those interviewed knew anything about the faculty’s request to return to a 4-year baccalaureate degree program until the interview. Only one of these seven graduates, Betty Mae Robinson, noted a time near the end of the program when there was a question on the faculty's request to return to a 4-year program. The other graduates were aware of the accelerated nature of their program and the possibility of a return to a 4-year program, but they were not aware of the specific request made by the faculty.
| Name when enrolled at UCCNH | Reason for choosing to earn a nursing degree | Reason for joining USCNC | Faculty evaluation of the student | Positions held in their professional nursing career |
|-----------------------------|---------------------------------------------|--------------------------|---------------------------------|--------------------------------------------------|
| Esther Browne               | • Enrolled to live the college life although never aspired to be a nurse. | • Because her program of study was “already settled and it was a 3-year program.” • Wanted to promise her service during the war because it was her “duty” to both country and family. | • Provided nursing care with a “reassuring manner.” | • Staff nurse until she married. • Volunteered creating and conducting surveys for different healthcare organizations. |
| Miriam Ginsberg            | • Wanted to be a nurse like her mother. | Family members had military service experiences. • Her mother returned to nursing practice during the war. • “Planned to [work] anyway” so it was “no problem.” • No intention to join the military. | • Competence in nursing principles and leadership potential. | • Staff nurse. • Instructor in diploma program. • Occupational health nurse. • Joined military during Korean War and made a career in the military. • Obtained two Master’s degrees: Nursing and Biostatistics. • Head chief of an Army research program. • Retired from Army as Lieutenant Colonel. |
| Mary Monteith              | • Followed in sisters’ footsteps to become a degreed nurse. • Completed 1 year of college courses at another school before enrolling at UCCNH. | • She did not join. • Until contacted, did not know about the USCNC. | • Excellence in intelligent observation, poise, and competence. • “Definitely head nurse and supervisory material.” | • Staff nurse. • Clinic nurse. • Obtained certification as a teacher and taught health education in a public school. |
| Betty Mae Robinson         | • Wanted to be useful for “the war was on, and you had to do something.” | Her brother became missing-in-action 1 month after she enrolled, which encouraged her to join USCNC. | • Good bedside manner and excellent patient care. | • Operating room staff nurse; head nurse within 2 years. • Earned a Master’s degree in nursing. • Surgical supervisor where she also taught nursing students. • Public health nurse. |
| Betty Shewalter            | • Wanted a college degree like her sisters. • Chose nursing instead of teaching. | Felt she “should do [her] part” in the war. Her sister served in the Women’s Army Corps. | • Good bedside care, consistent improvement, and sincere interest in nursing. | • Staff nurse with various patient populations in both civilian and military hospitals. • Public health nurse. • Nurse in student health clinic. • Navy nurse during the Korean War. |

Continued on next page.
whether she and her classmates would receive a degree or a diploma. A four-year student who enrolled in 1942 and also graduated in 1946, Mary Strassel, was also interviewed and remembers overhearing “heated discussions” between faculty members in the lounge next to her room regarding scheduling and coverage of classes. Although the faculty wanted to return to the 4-year degree program because of their perception of the immaturity and inability of the students to carry out responsibilities, these students did not sense the faculty’s concerns. Study participants felt supported and encouraged by the faculty. They shared that most faculty members instilled confidence in them. Dee Stephens noted that she “felt like [the faculty] cared” and Esther Browne noted that the “faculty did a good job of giving us confidence.”

Freda “Fritz” Sigel
- Fell in love with hospital atmosphere working as a volunteer.
- Enrolled at the age of 17 years.
- She needed the free tuition.
- Excellent student who was professional, capable, pleasant, and who held excellent understanding of nursing principles.
- Emergency room nurse.
- Staff nurse.
- Earned her credentials as a school nurse.
- School nurse and then supervisor of school nurses.

Doris “Dee” Stephens
- Her family wanted her to become a degreed nurse.
- She aspired to be an engineer like her brother.
- Because she assumed she would have to work after graduation during the war anyway.
- “Excellent student record” and was “especially able in giving good bedside care.”
- Suggested she should proceed with experience and academic work soon.
- Public health nurse.
- Instructor at a hospital nursing school (for diploma and practical nursing students).
- Hospital staff educator.
- Worked for Center for Disease Control.

Figure 1 Picture labeled “Class of 1946 3-year Class”. Participants: Mary Monteith (1st row, 8th from left); Betty Mae Robinson (2nd row, 1st from left); Esther Browne (3rd row, 1st from left); Freda “Fritz” Sigel (4th row, 3rd from left); Betty Shewalter (4th row, 4th from left); Miriam Ginsberg (4th row, 5th from left); and Doris “Dee” Stephens (4th row, 7th from left). Picture provided by the University of Cincinnati College of Nursing.

UCCNH, University of Cincinnati School of Nursing and Health; USCNC, US Cadet Nurse Corps.
Interestingly, the faculty evaluations of these graduates seem disconnected from their request and rationale to stop offering the accelerated degree program (Table 1). It is quite possible that the faculty’s request may have been premature and they may have underestimated the students’ resilience. None of the participants, when asked during the interview, could say with assurance why the faculty may have requested the change. Some speculated it was the hectic faculty schedule, while others assumed it was the hectic student schedule. The rush of content delivery and limited time in clinical training were consistently mentioned as disadvantages of the accelerated program. Mary Monteith expressed that she wanted “time to work with more patients; more time in the clinical area instead of rush, rush, rush throughout.” Several participants, including Fritzi Sigel, recalled requesting and being granted extra duty clinical assignments to obtain more patient care experience. The graduates described feeling rushed, tired, and exhausted. Betty Shewalter noted that “everything was a rush; it just seemed like you were on the run all the time.” Dee Stephens repeatedly noted that the students were “exhausted.”

Despite these memories, the graduates expressed feeling confident in their role as degree nurses by graduation. They all felt adequately prepared to assume the role of a graduate nurse; Betty Shewalter noted that they “got everything, but, boy it was difficult.” The program intensity along with faculty instruction and support helped to develop their confidence. The faculty’s displayed confidence in the students fostered the students’ resilience to make it to graduation. In addition, the structure of the program, although rigorous, was predictable and consistent. Five graduates recollected the daily routine of working in the hospital for approximately 4 hours each morning and evening, and attending classes at the university during the middle of the day. Fritzi Sigel provided a detailed description of the short amount of time they had to change clothes between class and clinical time, and how they walked “over a mile” on the “hilly” terrain between the hospital and university campus. Strict uniform inspections remained a daily morning routine, along with the strict rules regarding curfew, visitors, and vacation leave. The strict, yet consistent schedule and rules provided a structured student learning environment, instilled confidence, and helped build a strong sense of community among the students. Most of these graduates shared a sense of accomplishment and resilience because they not only survived, but thrived, and graduated from the program confident in their ability to provide nursing service.

DISCUSSION

The 3-year accelerated degree program at the UCCNH provides today’s nursing faculty with an example of program elements that foster resilience in nursing students. The UCCNH accelerated degree nursing students provided much needed nursing service in the local civilian hospital during the disruption created by the war. The students fulfilled a time-sensitive deficiency in the nursing workforce during the war.

More recent disasters also prompted the utilization of student nurses to assist in supplementing the nursing workforce. Schools of Nursing in Mississippi and Texas used student nurses to provide disaster relief following Hurricane Katrina and Hurricane Ike (Pattillo & O’Day, 2009; Richards, Novak, & Davis, 2009). In both situations, faculty replaced the students’ usual clinical experiences with disaster relief experiences. Structured, supervised experiences like these provide students a sense of value, importance, and increased confidence, which can enhance a student’s willingness to respond and resilience during a disaster (Chaffee, 2009). Providing students experiences with disaster response in a controlled and supervised situation provides students with authentic training. The accelerated degree program at UCCNH serves as an example of a rigorous, yet structured and supervised student experience to address nursing workforce shortages during WW II.

In an integrative review of the literature regarding healthcare providers’ willingness to work during a disaster, perception of individual effectiveness and importance were factors in deciding to work (Chaffee, 2009). Involving students in disaster response can build students’ effectiveness and sense of importance. The recruitment campaign for the USCNC successfully utilized the importance and value of the cadet and nurse during the war to recruit students to join. The approvals for extra duty clinical assignments and the refusal of Senior Cadet experiences outside of the local hospital demonstrated the importance and value of the nursing service the students provided during the war.

More specifically, the uniqueness of UCCNH’s accelerated degree cohort’s lack of USCNC recognition provides a more realistic example of how to foster students’ resilience during disaster response and possibly foster a willingness to respond, in the absence of outward recognition. The confidence instilled by the UCCNH faculty and the consistent expectations fostered a sense of community, resilience, and willingness to respond to the wartime shortage of nursing service among the graduates.
CONCLUSION

Developing resilience in student nurses to provide disaster nursing can assist them in integrating these qualities throughout their nursing careers. The post-career recollections of the study participants shed light on what nursing schools today could do to cultivate resilience. Although this cohort did not receive outward recognition regarding their cadet status, they displayed resilience to provide nursing service as students during the war. The faculty provided a positive culture despite concerns about the program. They instilled confidence in the nursing students through structured and supervised education and clinical experiences. The predictability of faculty expectations and support, as well as consistency of the program structure, facilitated an environment in which the students could learn, provide nursing care, and develop positive relationships. The environment created by the faculty fostered the students’ resilience.

To foster resilience in future nurses, students’ disaster nursing experiences need to be organized and structured, and involve supportive faculty. Nursing programs can provide similar predictable and supervised environments for students through disaster simulation or authentic, organized disaster relief experiences when available. Positive relationships with faculty and peers also build a sense of community, which expands from one’s program cohort to the broader nursing and societal community.

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AUTHOR CONTRIBUTIONS

The sole author contributed all the content of the manuscript.

DISCLOSURE

No conflicts of interest have been declared by the author. The author does not have an interest, financial or otherwise, that may have biased this research study.

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