



# Duke University School of Nursing



PROMISE AND  
PROGRESS



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1931-1971

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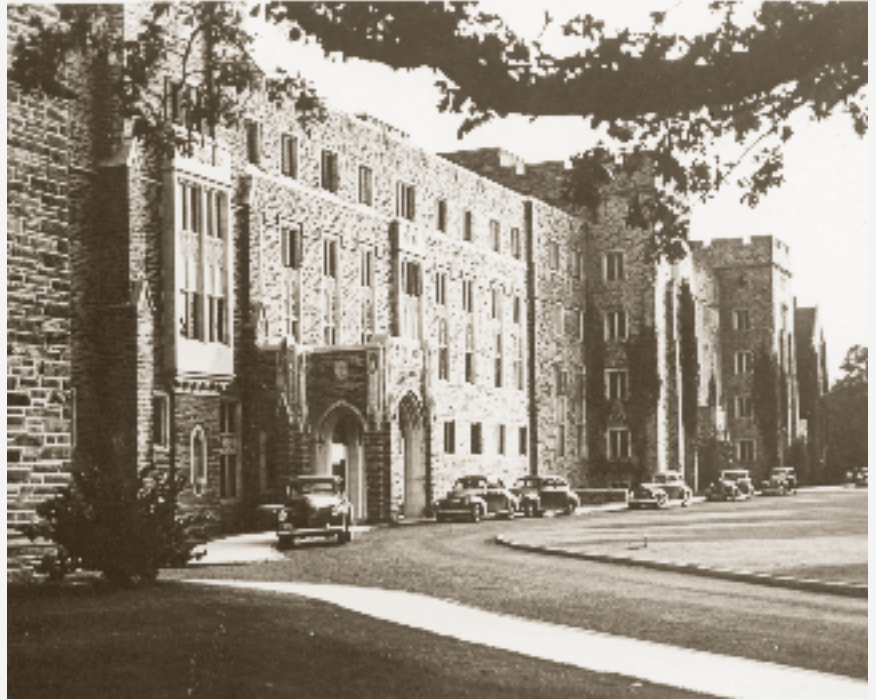
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*Because of the nature of this account, there may be some unintentional inaccuracies. While every effort has been made to confirm the veracity of the information contained in this historical summary, the possibility of errors and omissions does exist. We apologize in advance, and invite contributions of any additional information that will add to the factual record of the early years of Duke University School of Nursing.*

## ACKNOWLEDGEMENTS

This record of the first forty years of the Duke University School of Nursing is not the result of one author's efforts. Rather, it is the end product of varied contributions from a number of individuals and groups, without whom this history could not have been compiled. Thanks must go to:

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## *Foreword*

In writing this preface, I am reminded of an admonition from my childhood: “What goes around, comes around.” While parents may use this phrase as a warning to their children against negative behavior, for our purposes here it can alternatively be interpreted as a promise.

Duke University School of Nursing began in 1931 as part of a transformational vision for creating a nationally known center for higher education, medicine, and medical care in a North Carolina town, which at that time was better known for its tobacco than for its scholarly accomplishments. What you will find within this volume is the story of the early steps whereby that transformational vision became reality. Soon after its inception, Duke University School of Nursing began breaking new ground in the field of nursing education and in the preparation of highly qualified nurses.

What history shows is that our School has never been tempted to allow inertia to deter its progress. Again and again, Duke University School of Nursing has been called to re-invent itself with new curricula, new programs, and new practices. Transformation keeps coming around.

In the years between 1931 and 1971, the School faced an economic depression, a world war, boom times, and a cultural revolution. Through it all, our leaders and students moved forward to develop and advance the practice of nursing in teaching, research, and clinical practice.

I hope you will enjoy this brief summary of the first forty years of our history. Rest assured that in the record of our second forty years (which will be covered in a subsequent publication), transformation will continue. Without it, Duke University School of Nursing would not be the visionary center of innovation that it is today.

A handwritten signature in black ink, reading "Catherine L. Gilliss". The signature is fluid and cursive, with the first name being the most prominent.

**Catherine L. Gilliss, DNSc, RN, FAAN**  
Dean, Duke University School of Nursing  
Helene Fuld Health Trust Professor of Nursing  
Vice Chancellor for Nursing Affairs, Duke University



1931-1971

## Benchmarks of Change and Progress

### *A Transformational Vision*

James Buchanan Duke's vision for creating a nationally recognized institution of higher learning in North Carolina began with the transformation of Trinity College into Duke University. One major element of this transformation was establishing a respected center for medical education, research, and care. In 1925, the year after he established the \$40 million endowment that created Duke University, Mr. Duke made an additional bequest of \$4 million to create Duke Hospital, the School of Medicine, and facilities for the education and training of nurses. The goal was to create the best medical center between Baltimore and New Orleans.

Wilburt Cornell Davison, MD, the founding dean of the School of Medicine, also had the responsibility of launching and recruiting leadership for the new School of Nursing. Dr. Davison was on the medical faculty at Johns Hopkins when William Preston Few, PhD, the president of Duke University, approached him

about helping to establish Duke's medical school. A telegram in January 1927 informed Dr. Davison that Duke had chosen him: "You have been elected. Delighted with prospect of working with you."

Having earned his medical degree at the Johns Hopkins University School of Medicine, Dr. Davison looked toward Baltimore for inspiration. He recruited faculty and designed curricula to model the schools of medicine and nursing after those at Johns Hopkins. Dr. Davison appointed Bessie Baker as dean of the School of Nursing and the top nurse at Duke Hospital. He recognized the need for the nursing school's dean to be a leader in treatment and teaching. He called the chief nurse "the most important person in any hospital" and conducted a nationwide search. "Everyone agreed that Duke should try to get Miss Bessie Baker, who had been chief nurse of Base Hospital 18, the Hopkins Unit at Bazoilles-sur-Meuse, while I was a patient there in 1917," Dr. Davison wrote.



In 1931, Duke nurses, faculty, and nursing students gathered for a group photo.

The School of Nursing was operationally a department within the School of Medicine, with Miss Baker reporting to Dr. Davison. The Executive Committee of the Schools of Nursing and Medicine and the Hospital included both deans, the hospital superintendent, the chairs of the basic science and clinical departments of the School of Medicine, and four medical or nursing faculty members who served in alphabetical rotation. Dr. Davison chaired this committee. Miss Baker also served on the Hospital Administrative Committee.

The Executive Committee of the School of Nursing had the nursing dean as chair and included the medical school dean, the hospital superintendent, and two nursing faculty members. It was responsible for educational and conduct standards for nursing students and, minus the faculty members, for School finances. A nursing Student Work Committee of the two faculty members plus supervising nurses from the Hospital decided when students were ready to progress within their programs.

Miss Baker arrived in Durham in 1930 and had recruited the first students to enroll in Duke's new three-year nursing diploma program by 1931. Miss Baker's official title at the Hospital is unclear; various sources refer to her as chief nurse, hospital liaison, and director of nursing service. Whatever her title, her responsibilities included leading the nursing education enterprise and the delivery of nursing care.

In the first few years of operation, enrollment in the School of Nursing was small and selective. The faculty held students to high standards. Dr. Davison noted that Duke chose "pupil nurses" in line with the selection of students in the Duke Woman's College. The first class of twenty-four students enrolled in the new diploma program on January 2, 1931. A notice placed on the bulletin board at the School of Medicine read, "The student nurses have arrived. Do not feed or annoy them. Be gentle and entertain them."



### BESSIE BAKER

Duke University School of Nursing's  
First Dean, 1931-1938

Bessie Baker, BS, RN, was a graduate of the Johns Hopkins School of Nursing and Columbia University. She served as the assistant director of Hopkins's nursing school, as director of nursing at Charles T. Miller Hospital in St. Paul, Minnesota, and also as assistant professor of nursing at the University of Minnesota prior to her appointment at Duke.

She accepted the position at Duke in 1930, and served as the School of Nursing's first dean until 1938. Dr. Davison later reflected that Miss Baker's dynamic personality and forceful character helped ensure the success of the School from its earliest days. She made plans for the School, recruited its first students, and served as a liaison between Duke Hospital and Duke University.





“We began with three months of classes, then we started studying nursing arts. Our instructor would demonstrate procedures, then we’d do them. After three months of nursing arts, we started on the wards, where we had the responsibility of getting experience doing the various procedures with patients.” —Rose Wehunt Hampton, Class of 1936

The School’s first students had one instructor who taught nearly all their courses: Ann Henshaw Gardiner, MS, RN, assistant professor of nursing education. Miss Gardiner served as educational director at Baylor School of Nursing in Texas, Flushing Hospital School of Nursing in New York, and Stanford University School of Nursing in California prior to coming to Duke University in 1930.

“I made up the whole curriculum and printed the first catalog,” Miss Gardiner later recalled. She taught fifteen to eighteen subjects a year, including anatomy, chemistry, history of nursing, pharmacology, physiology, and sociology. “I wanted the student to know what I thought she ought to know in preparation for her life’s work,” wrote Miss Gardiner. “I know some students were afraid of me but would die for me now. As they grew older, they realized what I was trying to do.”

Miss Gardiner’s students reported that in the classroom, “sloppy thinking and impulsive conclusions were simply not tolerated.” Miss Gardiner advocated total nursing care with attention to the emotional needs of patients, as well as physical maladies, in an era before the concept was widely accepted.





Bessie Baker wrote personally to every individual who was accepted as a student in the School's first class.

After two-and-a-half years of study, the first fourteen nurses graduated in June 1933. Meanwhile, the curriculum, the prerequisites for admission, and student life were all evolving quickly at the fledgling School. School bulletins beginning in 1931 list the entrance requirements as “intelligence, character, and graduation from an acceptable high school.” By the late 1930s, the School of Nursing required one year of college work for admission to the nursing program. From its beginning through 1944, the annual tuition at the School of Nursing remained at \$100. During the same period, enrollment grew from fifty-seven to 275 students and the faculty from two to nineteen.

Miss Gardiner supervised the implementation of the evolving curriculum during the School's first decade. A nursing instructor taught students basic nursing procedures in the Nursing Arts Laboratory in the basement of the Hospital. The physician faculty at Duke conducted most of the clinical classroom teaching in the diploma program, while the head nurses on the wards provided a significant portion of the students' clinical supervision and taught nursing aspects of clinical treatments. A head nurse had to be present the first three times a student performed a new procedure on a patient. Once her ability was verified, the nursing student could perform that procedure for patients independently. Special faculty were employed to teach nursing students English and psychology.

During these years, the nursing students spent long days working in the clinical units of the Hospital and going to classes. Second-year students worked evening and night nursing shifts, supervised by a Registered Nurse. It was common for the student's day to begin at 7 a.m. and to end as late as 11 p.m. Students could not leave campus during the week except to attend church. They could conduct personal activities only during designated times.

## ANN HENSHAW GARDINER, MS, RN

Assistant Professor of Nursing  
Education, 1930-1941

Often seen as ahead of her time, Ann Henshaw Gardiner told her colleagues and students in 1933 that there was evidence that smoking caused lung cancer. It took thirty-one more years for the Surgeon General to publish a report on smoking and health in 1964. At a time when homosexuality was a taboo subject, she suggested that her students read *Well of Loneliness*, an early novel that sympathetically depicted the social isolation of a lesbian couple. She always wanted to be sensitive to the problems of minority groups, feeling this understanding made for a better nurse and a better human being.

Ona Cates Street, Class of 1936, recalled of Miss Gardiner: “Never belittling the wife/mother role, she was an advocate of equal rights and responsibilities for women. Miss Gardiner had no patience with the facile sentimentalities often attached to ‘caring’ professions, knowing that they obscured more profound values. If we secretly fantasized ourselves into an angel-of-mercy attitude, we were jolted to earth with reminders such as the need to communicate with our patients on many levels to provide them with a feeling of security. She warned that the healing course of bodies would be adversely affected by inattention to emotional needs, a pioneering advocacy of total treatment.”

An aerial photo of Duke Hospital in its early years.

## *Duke Hospital*



Launched at the beginning of the Great Depression, Duke Hospital was small and its resources strained. Although the total bed capacity upon opening on July 21, 1930, was 416, only 100 beds were staffed; at the end of the first day of operations, the patient census was seventeen. According to Miss Gardiner, hospital supplies were not plentiful and were delivered in “an irregular fashion.” After the staff made the beds on the Hospital’s opening day, the entire reserve linen supply was twenty-four sheets and 144 pneumonia jackets, a therapeutic measure against a prevalent disease of the day.

From the very beginning, nurses played the major role in caring for the patients and keeping the administrative system running well. Most staff nurses were diploma-prepared. They came from across the nation and from large, respected hospitals such as Stanford and Johns Hopkins. Nurses’ responsibilities included sterilizing needles, syringes, instruments, and other equipment; mixing drugs; placing the food on the trays and serving it to patients; supervising the maids; and performing any other duties necessary for the care of the patient. The nurse also assisted the physician and was there to carry out patient-care orders.



Two days prior to the opening of the Hospital, the staff of Duke University Schools of Medicine and Nursing and Duke Hospital posed in front of the new facility for a photograph. Four of the thirty-three individuals in the photo were nurses: Bessie Baker, BS, RN; Marion Frances Batchelder, RN; Nancy Lindsay Lawlor, RN; and Augusta Laxton, BS, RN.

Though they were still learning, the nursing students provided significant patient-care services to the Hospital. As a result, their room and board, uniform, and textbook costs were subsidized, and their tuition remained low. These students were expected to handle food and cleaning responsibilities in addition to direct patient care skills; they were taught how to dust, make beds (both empty and occupied), and care for glassware.

Graduate registered nurses earned about \$55 per month in 1934; by 1945 the graduate nurses earned \$90 per month. Each nurse worked from forty-eight to fifty-six hours per week during these years, resulting in a living wage of about \$1.15 to \$1.78 per hour.

Nurses, orderlies, and maids worked closely together and coordinated efforts. Head nurses assigned maids and orderlies to the wards. By 1941, the maids and orderlies worked in the Housekeeping Department headed by Mrs. Mercer, who was a graduate nurse. The maids and orderlies bore responsibility for certain tasks on designated wards each day. Housekeeping also assumed the responsibility for cleaning discharged patients' units—unless the freshmen nursing students needed the cleaning duty to fulfill their requirements for specific ward-related training goals.





### *A New Name*

After Bessie Baker's retirement in 1938, the School underwent a brief period of diminished status on campus. The School was renamed The Duke Hospital School of Nursing—the first of several times that the University, its hospital, and the School of Medicine would wrestle with the School's proper role and purpose. Should the School train nurses almost exclusively for Duke Hospital, or was there a broader role? What was the appropriate leadership and oversight structure for the School? What relationship should exist between nursing education and nursing service?

Margaret Pinkerton, MA, BS, RN, was recruited from the University of Virginia to replace Miss Baker as dean of the School of Nursing and director of nursing service. She began her new position on October 1, 1939.

“Miss Margaret I. Pinkerton came to us...to be the dean of our School of Nursing in October 1939. She came to us... following a year when we were without a leader or anyone to look to. Our School was in a chaotic state.”

—*Alumnae Notes*, June 1941



As expected of any new leader, Miss Pinkerton recruited new talent to her staff. Mary Walker Randolph, a graduate of Los Angeles General Hospital School of Nursing, became the new instructor of science in 1941. Marian Wenrich, MA, BN, a graduate of Yale University School of Nursing, filled the position of instructor and supervisor of obstetrics and gynecology. Catherine Van Blarcom, BS, served as the medical supervisor.

Miss Randolph and Miss Brix did more actual teaching on the wards in the Hospital than in the classroom. They believed that students would learn much more and remember the material better if they were in contact with the patients on the ward—a pedagogy ahead of its time and today fully supported by a well-developed literature on adult learning.

Dean Pinkerton combined the philosophies of a teaching hospital and a university in her leadership of the School. The students, head nurses, supervisors, and physicians all participated in the two-hour weekly ward conferences, at which physicians discussed disease etiology, symptoms, and methods of diagnosis. Other topics included anatomy and physiology, nursing care, dietary problems, social problems, and pharmacology. One patient would be chosen for discussion, culminating in the presentation of a case summary at the end of the week. A statement in the June 1941 *Alumnae Notes* emphasized Miss Pinkerton's vision to combine academic and clinical education: "Next year we hope to include a definite number of hours of ward teaching in the curriculum, thus lessening the actual number of hours spent in the classroom."



### MARGARET I. PINKERTON, MA, BS, RN

Dean and Director of Nursing Service,  
1939-1946

After earning her BS in Nursing Education from Columbia University in 1933, Margaret Pinkerton studied at the University of Chicago, where she completed her master's degree. Her clinical and academic work histories qualified her for her new position at Duke. She had held a nursing superintendent position at Barnes Hospital in St. Louis and prior to that had served as an instructor in nursing arts at the Washington University School of Nursing, also in St. Louis.

The June 1941 edition of *Alumnae Notes*, published by the Duke Nurses Alumnae Association, described her arrival thus: "Miss Margaret I. Pinkerton came to us... to be the dean of our School of Nursing in October 1939. Our School was in a sort of chaotic state. Naturally, her task was a tremendous one, one which required ability; and she had that. Then we had to have faith in that ability—but faith in the ability of any leader is of slight service unless it be united with faith in her justice. And in her justice, not once has she failed us."





Duke Nurse Cadet Corps students, circa 1945.

## *World War II*



On April 30, 1941, the United States Public Health Service (USPHS) suggested that schools of nursing at Duke and elsewhere increase their enrollment to train more nurses for military, health, and civilian service. Though the United States had thus far remained officially neutral in World War II, it was providing aid and resources to the United Kingdom and other Allied powers. The School complied and increased the size of the classes. Instead of the usual fifty-eight students, October 2, 1941, saw eighty-four new students admitted.

On December 7 of that year, Japan attacked Pearl Harbor, and the United States formally entered the war. Classes of fifty-four to 121 students enrolled in the School every nine months throughout the war. The USPHS assumed part of the cost of this war program. In 1943, due to the accelerated program and the admission of a class every nine months, the entrance requirements temporarily changed to one-half year of college credit, which included at least three semester hours of general college chemistry. After three years in the School, a student earned the diploma in nursing.

Beginning in 1941, nursing students who had completed the entire diploma program were allowed to add another year of combined university studies to upgrade their diploma to the Bachelor of Science in Nursing degree. To comply with the united war effort and prepare as many nursing students as possible for admission, Duke also offered a three-month pre-nursing course covering college chemistry, biology, mathematics, and English.

By the time the new decade began, nurses and nurse faculty were regaining stature at Duke, as reflected in another name change. The September 1941 *Alumnae Association Bulletin* announced that the title of Duke University School





A Duke nursing student ready for duty at Duke Hospital, circa 1942.



Members of the Cadet Nurse Corps dressed for travel.

of Nursing had been restored, and the writer said, “It means that our curriculum, having suffered a severe blow, has been rebuilt solidly and thoroughly, and that we now have a program of which we can truly be proud.”

In 1941, the same year that the School resumed using the name Duke University School of Nursing, Dr. Davison recognized but left unresolved the unique complications and often conflicting roles faced by the leadership of the School. “In our School, the dean of the school also is the director of the nursing service. At some schools the two positions are separate. The dean is responsible for the instruction, and the director of nursing service is responsible for the care of the patients, but the responsibilities sometimes clash,” wrote Dr. Davison. The relationship between the academic and service sides of nursing at Duke—and the inherent tension—would continue to shape the programs and decisions made by the School of Nursing and the Hospital for decades.

During World War II, many graduate nurses went abroad to support U.S. and Allied troops, leaving the care of Duke Hospital patients in the hands of nursing students and far fewer graduate nurses. At the same time that the war pulled graduate nurses away, the Hospital’s patient census increased, thus shifting a great deal of the responsibility for patient care to nursing students. From 1942 to 1943, for instance, the number of graduate nurses working in the Hospital plummeted from 110 to 45. At the same time, the number of nursing students increased from 189 to 238, then up again to 275 in 1944. Nursing students’ wartime responsibilities at Duke Hospital created a built-in internship.



Duke Nurse Cadet Corps nurses  
in uniform, circa 1947.

## *Postwar Changes in Nursing Education*

During the war, many graduates went directly into military service. Following the war, many graduate nurses found other work opportunities and did not return to Duke Hospital. Nursing students continued to fill the gap. After the war, student enrollment also dropped.

The Cadet Corps program had enabled many students who would not otherwise have been able to afford an education to study nursing at Duke. With the withdrawal of the government's financial support for tuition, the School needed more scholarships for students. The W.A. Kellogg Foundation awarded the School ten \$100 scholarships to support students for one year of study; the American Legion Auxiliary provided a \$750 scholarship gift to the School in 1948.

Nationally, the number of schools of nursing at colleges and universities increased during the 1940s, and by the end of World War II, 138 schools were awarding baccalaureate degrees to nurses. Nursing educators began to draw clearer distinctions among nursing service, preparation for nursing service, and preparation to educate nurses. As time passed, the distinctions deepened.





Both staff and students took their meals at the Hospital cafeteria.

Reflecting this trend, in 1944 Duke began granting forty hours of credit for the nursing diploma toward a bachelor's degree granted through the Woman's College of Duke University. At the same time, Duke created new opportunities for those who intended to teach the profession. A Division of Nursing Education within the University's Department of Education was established in December 1944 with Helen Nahm, PhD, MS, RN, as the program head. The Division offered advanced programs for qualified graduate nurses, leading to a Bachelor of Science in Nursing Education degree and a Master of Education degree with a major in nursing education. The primary objective of these degree programs was to prepare students for teaching and supervisory nursing positions. The programs included study at the School of Nursing and Duke Hospital.

From 1939 through 1946, 302 nurses graduated from the School of Nursing. The Erwin Road dormitory for nurses was constructed in 1943 with Duke and the Federal Works Administration each contributing \$63,650 toward the cost. As the School of Nursing continued to focus on training nurses for service, Florence K. Wilson, MA, RN, became its dean on October 1, 1946.

**HELEN NAHM, PHD, MS, RN**  
Director of Nursing Education,  
1944-1949

Born in Missouri in 1901, Helen Nahm attended the University of Missouri, receiving the diploma in Nursing in 1924. She earned a Master of Science degree in psychology from the University of Minnesota in 1929, and her PhD in educational psychology and general education in 1946.

Dr. Nahm served as principal of the School of Nursing at the University of Missouri and then came to Duke University in 1944 as the director of nursing education. Dr. Nahm impacted the curriculum and pedagogy at Duke before moving on to the newly formed National League for Nursing Education (NLNE) in New York. Through her work with the NLNE, Dr. Nahm pioneered efforts toward accrediting nursing programs.





## *Toward More Diverse Education for Nurses*

As a result of the Baby Boom population growth that followed World War II, the need for and use of health care facilities grew. Women retreated from the labor force after the war, and the pool of potential nurses was limited; a nursing shortage developed. The need was so great that from 1947 to 1950 the School sponsored the Red Cross Volunteer Nurse's Aide Corps, teaching Duke Woman's College students to assist in caring for patients.

To alleviate the shortage, a new category of nurse was instituted: the Licensed Practical Nurse, or LPN, who assumed a more limited scope of responsibilities and could be educated in a shorter period of time. LPN training was usually accomplished in one year. LPN students were instructed in how to assist Registered Nurses, formerly known as graduate nurses.



In the 1950s scissors were issued to nursing students, who had their names engraved on the scissors and wore them at the back of their uniforms.



#### FLORENCE K. WILSON, MA, RN

Dean and Director of Nursing Service,  
1946-1954

The Duke University School of Nursing faculty and administration agreed with the growing sentiment within the National League for Nursing Education that extended periods of education were not essential for all bedside nurses. In 1948, Durham City Schools, the North Carolina Department of Vocational Education, and Duke Hospital collaborated to establish a Practical Nurse School at Hillside High School, a segregated school for black students. Student practical nurses gained clinical experience at Duke Hospital, and the Hospital would hire those who passed a state licensing exam, placing them under the supervision of Registered Nurses. An informational pamphlet from the era was titled "Program of The Durham School of Practical Nursing for Negroes."

Duke University continued to deny admission to black students until 1966, when a federal law mandated non-discriminatory admission standards for any school or university that received federal funding.

Florence K. Wilson earned her bachelor's degree from the University of Michigan, her master's degree from Western Reserve University, and her nursing education credentials from the City Hospital School of Nursing in New York City. She served as a general staff nurse at the famed Henry Street Nursing Services in New York. Thereafter, she served as medical supervisor and instructor at Lakeside Hospital at Western Reserve University in Cleveland, Ohio, and at the School of Nursing at the University of Nebraska. From 1938 to 1943, Miss Wilson was director of the School of Nursing and the Nursing Service at Syracuse Memorial Hospital in Syracuse, New York, and later an associate professor of nursing education.

Miss Wilson retired from her position as dean on November 6, 1954. Upon her death on May 6, 1960, the alumnae resolved to begin a scholarship in her name, writing, "We loved her humaneness, her charming wit, her ability to give wise counsel, her drive for work, her fairness, her courage to speak what she believed, and her steadfast faith in the undeveloped potential of the Duke University School of Nursing."





The library was a popular place for studying.

## *Duke Teaches More Nursing Specialties*

Meanwhile, the programs and courses offered within the School of Nursing became increasingly specialized to reflect new demands on the nursing profession to meet the complex needs of patients.

In 1948, the School integrated Public Health Nursing into the curriculum through the loan of Lillian Gardner from the North Carolina Board of Health for a period of three months. Miss Gardner taught the course in community health for students in nursing education and assisted the faculty by orienting them to the field of Public Health Nursing. In the fall of 1949, Lucy Massey, a public health nurse, joined the faculty. She made suggestions for the inclusion of more instruction and experience in public health nursing. She also recommended visits to health care agencies so that the faculty and staff would have more knowledge and understanding of public health issues.

A nine-month clinical course in operating room management was initiated in 1948, with twelve registered nurse students enrolling during its first two years and receiving fourteen semester hours of credit toward the Bachelor of Science in Nursing Education (BSNEd) degree.

Under the direction of Thelma Ingles, MA, RN, an advanced program in medical-surgical nursing within the BSNEd program began in September 1950. As a professor and chair of the Department of Medical-Surgical Nursing at Duke from 1949 to 1962, Miss Ingles directed the BSNEd program until it ended in 1955. Her leadership was crucial in establishing the national and international reputation of Duke's nursing education programs, including the nation's first clinical master's program.






Duke Hospital ward

Miss Ingles's ideas for nursing education and clinical practice were often ahead of her time, identifying her as a leader nationally and internationally. These ideas were sometimes viewed as too revolutionary by the nursing associations and other schools of nursing, but championed by some Duke faculty members who believed nurses should be able to provide advanced clinical care and recognize the signs of disease within a sophisticated understanding of human physiology. Miss Ingles and other faculty members worked with Eugene A. Stead Jr., MD, chair of the Department of Medicine, to develop a proposal for a clinical master's program.

In addition to the master's clinical specialist program in medical-surgical nursing, a new master's-level psychiatric nursing program started on February 1, 1950, under the direction of Miss Louise Moser. Funds were provided by the federal Mental Hygiene Division of the Public Health Service. The School of Nursing offered five other courses in clinical specialties to graduate nurses during the 1950 summer session and held a second institute on improvement of nursing service the same year.

These new degree programs necessitated better educational preparation for instructors and, as a step towards this, many of the nursing staff members of the Hospital and School took courses in nursing education and became eligible for faculty rank. By 1950, there were nineteen faculty members, many prepared with bachelor's degrees in nursing education. The student body at the School of Nursing numbered 141.



The training for nursing students of the 1940s included ward duty at Duke Hospital.

## *Duke Develops a BSN Curriculum*

In the early 1950s, national trends in nursing created the demand for a basic professional program in nursing at the collegiate level. The Curriculum Committee of the School of Nursing planned a new four-year program integrating general and professional education to lead to a Bachelor of Science in Nursing (BSN) degree. In 1953, while maintaining its diploma program, the School launched its new BSN program.

According to admissions materials, the new BSN was designed “to offer educational opportunities which will enable the student to attain maximal growth toward his personal and professional goals. A broad approach to nursing focuses on individualized care that is adapted to the unique personality, health state, and potential of the patient. Thus a graduate is expected to function competently as a beginning professional nurse, either in institutions and agencies or as a private practitioner.”

In Fall 1953, most students were admitted by transfer from other colleges into the new BSN program as freshmen or sophomores. Some diploma-prepared graduate nurses from the Hospital also enrolled. BSN students took many nursing courses alongside diploma students. Instead of the traditional nursing arts and procedures course, they took a new sophomore course called Fundamentals of Nursing, which included physiology, disease symptoms, and pathology, with their usual medical and nursing interventions. For juniors and seniors, clinical courses focused on holistic, patient-centered care. The new program initially required that students perform a three-month summer

internship in a clinical area of their choosing after receiving their bachelor's degree. With the establishment of this generic BSN program, the School of Nursing became an autonomous unit in the new Division of Health Affairs within the University structure, but the dean of the School of Nursing still reported to the dean of the School of Medicine.

For Fall 1953, the cost for one semester of the BSN degree program was \$540: \$175 for tuition, a \$75 general fee, \$80 for room rent, \$200 for board, and \$10 for laundry.

According to the 1954 North Carolina Board of Nurse Registration and Nursing Education accreditation materials, "the purpose of the school of nursing is to select qualified students and to provide a series of varied experiences which enable them to develop the ability to give nursing care based on needs of society and which also contribute to their development as individuals and as citizens of a democratic society."

On January 1, 1955, Ann M. Jacobansky, EdM, RN, became dean of the School. She had previously served as assistant professor of nursing education and the director of undergraduate nursing instruction. Dr. Davison, dean of the medical school, appointed her without consulting the School of Nursing faculty, and made it a condition of her appointment to wear a nursing uniform, something her predecessor had not done.

As dean, Miss Jacobansky emphasized the importance of funding scholarships, which the School awarded based upon merit alone, not financial need. In a 1958 memo, she wrote:

The scholarships are intended to encourage, as students, young women who give the promise of becoming leaders in the field of nursing. As potential leaders, they should possess character, personality, intellectual integrity, vitality, and imagination. As students, they should possess scholastic ability of a creative sort and minds that can digest and use knowledge which they acquire.

By 1959, the School offered five scholarships for \$800, three for \$400, and one for \$200, many of them renewable for multiple years.

The School of Nursing stopped admitting students to the diploma program in 1957 in favor of the new generic BSN program. The last class of diploma program students graduated in 1959.

Miss Jacobansky built a strong faculty comprising nationally known nursing educators and rising stars in the profession. Nursing faculty now clinically supervised nursing students as well as instructing them in the classroom and began to serve on University committees, including the Academic Council. In a further sign of Miss Jacobansky's success at strengthening the relationship with the University and the Hospital, students in the School began to fully participate in campus activities and were allowed to join sororities in 1964.



#### ANN M. JACOBANSKY, EDM, RN

Dean, 1955-1967

Interim Dean, 1970-1971

A native of McKeesport, Pennsylvania, Ann M. Jacobansky earned her nursing diploma at the Shadyside Hospital School of Nursing in Pittsburgh, then went on to earn her BS and EdM degrees from the University of Pittsburgh. She served overseas in the Army Nurse Corps from 1943 to 1945, and for five years as clinical instructor and educational director at the Presbyterian Hospital School of Nursing at Pittsburgh.

After the end of her tenure as dean on August 31, 1967, Miss Jacobansky remained on the faculty of the School of Nursing; she served as acting dean from February 1, 1970 through June 30, 1971.





Wilma Minniear discusses patient care with nursing student Suzanne Wilhoit and Susan Campbell, RN, head nurse on the Minot ward of Duke Hospital.

## *A Pioneering and Controversial Master's Program*



Among the major accomplishments of Miss Jacobansky's tenure was the approval and implementation of the Master of Science in Nursing degree, the nation's first clinical master's program for nurses. A \$238,000 grant from the Rockefeller Foundation helped fund the initial program development.

Building upon the School's reputation for educating nursing leaders, the program won approval from Duke's trustees, and its first six students enrolled in 1957. Thelma Ingles, MA, RN, the chair of the Department of Medical-Surgical Nursing, led the development of the clinical master's program. For the 1958-59 academic year, the School added a graduate clinical specialist program in maternal and infant health, chaired by Miss Dorothy Grant. The one-year master's program required thirty units of nursing courses; twelve units in supporting liberal arts; a thesis; six-week clinical rotations in neurology, cardiology, gastroenterology, and pulmonology; and two additional elective services.

At a time when nurses pursued graduate study only to teach, supervise, or become administrators, the clinical master's program was controversial. The National League for Nursing initially declined to accredit the program and also commented that it found Miss Ingles inadequately prepared to direct it, as her only formal preparation in nursing was at the diploma level. In response, she took a leave and enrolled in the recommended courses at the University of California.

Miss Ingles traveled to top-level schools of nursing across the country, giving presentations and making the case in favor of the clinical specialist course of study. Other schools of nursing soon began to launch similar programs, using Duke's curriculum as a model. Early graduates had difficulty finding clinical positions, and many joined college faculties. Yet Duke's program eventually won accreditation, and graduates began to find work as clinical specialists.

In a further pioneering effort to expand the clinical roles of nurses, Miss Ingles worked with Ruby Wilson, EdD'69, RN, FAAN, who was then an assistant professor at the School, to institute the Hanes Project in 1961-62, a primary nursing practicum for sixteen new graduates of the BSN program. This was the first primary nursing project in the country. Department of Medicine Chairman Eugene Stead encouraged the new initiative.

The BSN graduates wanted to "practice clinical nursing as they had been taught and not as they had observed it being practiced by RNs on the hospital units," Dr. Wilson said. Under her guidance, the students in the Hanes Project took responsibility for implementing an innovative model of care delivery in which nurses provided continuity of care to a set of thirty-five patients in a private medical clinical unit.

During the year that the Hanes Project ran, Dr. Wilson and the graduate nurses tested a variety of approaches to patient care, adopting those that proved successful. Each patient on the ward was admitted to a nurse as well as a physician, and their needs were assessed by both. Nursing and medical orders were written side by side on the same page to improve communication to all caregivers. The patient-nurse-physician relationship was the focal point of the project, and soon staff physicians were asking to have their patients admitted to Hanes.

After continuing refinements within the generic baccalaureate curriculum, a major change in curriculum grew out of the deliberations in the 1960s to emphasize health maintenance and a community focus instead of illness and hospital care.

Multiple University-wide reports, including the Booz-Allen & Hamilton Report of 1961 and the Fifth Decade study, supported the emphasis on and growth in graduate education at Duke. Encouraged by this, Virginia Stone, PhD, RN, FAAN, developed and implemented the first-ever master's program in gerontological nursing in 1965. Dr. Stone was proud that the American Nurses Association had recognized geriatric nursing as a specialized practice, and she was particularly proud of the master's program, which she believed would have a lasting influence. "That has been a real joy, and the fulfillment is in what the students who graduated from that program have done," she said.

## THELMA INGLES, MA, RN

Professor and Chair of the Department of Medical-Surgical Nursing, 1949-1962

Born in Redfield, South Dakota, Thelma Ingles received a bachelor's degree in English literature from University of California at Los Angeles in 1931 before pursuing nursing at the Massachusetts General Hospital School of Nursing. Her master's degree in English was awarded by the Western Reserve University in 1942. Her postgraduate study included a year at the University of California at Berkeley, with a focus on public health nursing and sociology. She also spent a year at Duke, where she received a United States Public Health Service grant to study the role of the nurse in the clinic.

Miss Ingles also served as assistant superintendent at the Boston Nursery for Blind Children, instructor at Burbank Hospital of Massachusetts, and clinical and head nurse in Cleveland, Ohio. During the 1940s, Miss Ingles served as a faculty member at the University of Virginia and the Admiral Bristol Hospital in Istanbul, Turkey. During her time as a member of the field staff of the Rockefeller Foundation from 1962 to 1973, Miss Ingles served as a consultant for health clinics, small organizations, and educational programs in Colombia, Brazil, Thailand, Ghana, and other countries. During the 1970s, prior to her retirement, Miss Ingles would serve as a consultant for the Peace Corps and Project HOPE, traveling to fifty-two countries during her career.

Miss Ingles published numerous articles, including case studies and autobiographical narratives, in *The American Journal of Nursing*, *Nursing Outlook*, and the *American Journal of Medical Education*.

In 1973, the School of Nursing honored Miss Ingles by establishing the Thelma Ingles Scholarly Papers Award, presented annually through the Beta Epsilon chapter of Sigma Theta Tau International Nursing Honor Society.



Dean Ann Jacobansky with students  
Nancy Walker, Anne Davis, and Cynthia Renight

## *New and Continuing Administrative Challenges*

The 1960s was a decade in which tensions persisted in the governance of the School of Nursing, as its faculty and administration felt pulled between the vice provost for professional schools and the vice provost for health affairs (who was also the dean of the School of Medicine and a professor of neurosurgery). The 1963 accreditation report from the North Carolina Board of Nurse Registration and Nursing Education pointed out that the School of Nursing officially reported to the vice provost for health affairs, and this placed the School of Nursing under the School of Medicine, essentially rendering the program a department. The report cautioned that this “traditionalism” could stifle progress.

In the midst of this challenging time, Myrtle Irene Brown, PhD, RN, FAAN, was appointed by the vice provost for health affairs as the new dean for the School of Nursing in 1967. Her responsibilities included both nursing education in the School and nursing service in the Hospital; her title for the latter position was director of patient care, Medical Center. This was the second attempt to unify nursing service and nursing education. From February to July 1970, Dr. Brown took a medical leave of absence for illness, and Miss Jacobansky returned as acting dean of the School of Nursing and remained in that post until June 30, 1971.





Students often used their dorm rooms for impromptu gatherings.

## Confronting Racial Issues

Dr. Brown led the School of Nursing during a period when activist Duke students were demanding an end to racial segregation and discrimination. On November 13, 1967, School of Nursing students joined others from across the campus for a sit-in at Duke University President Douglas Knight's office in the Allen Building. The students demanded that student groups such as fraternities and sororities stop using University funds to patronize segregated facilities in Durham. Further, the Student Faculty Administration Committee issued a statement on November 27, 1967, declining to include groups that discriminated on the basis of race from recruiting on campus.

At the School of Nursing, Donna Allen Harris enrolled in Fall 1967, becoming the School's first black student. Although she had initially wanted to attend nursing school at the historically black Fisk University, Duke offered her a full scholarship, and she ultimately made the decision to accept the offer. Mrs. Harris did not recall any overt racism or being excluded from any areas or participation on campus. She was grateful for her fellow nursing students: "The thing that I think saved me was the friendships that were established with the students in Hanes House.... It was that the social aspect of it was so much different from high school, and that was my solace. And we were all of one aim. I mean, we all wanted to be nurses.... I remember the reliance on my friends, that's what I remember."



MYRTLE IRENE BROWN, PHD, RN, FAAN

Dean and Director of Patient Care, 1967-1970

Myrtle Irene Brown served Duke as professor of nursing, director of patient care, and dean of the School of Nursing from 1967 to 1970 and went on to become a professor of nursing at the University of South Carolina.

The first of the School's deans to be doctorally prepared, Dr. Brown conducted research for the American Nurses' Foundation and the Bureau of State Services, Department of Health, Education, and Welfare. She authored *Changing Maternity Care Patterns in Migrant Puerto Ricans* (1961), *Nursing Care of the Aged: An Annotated Bibliography for Nurses* (1967), *Working with Older People: A Guide to Practice* (1969/1971), and contributed to *Nursing Research Conference* (1970). The Alpha Xi Chapter of Sigma Theta Tau International Nursing Honor Society (Columbia, South Carolina) created the Myrtle Irene Brown Award for Excellence in Nursing Research in her honor.



Capping ceremony,  
circa 1940s-1950s



Four members of the class of 1971 pose  
prior to their capping ceremony.

## *Harriet Cook Carter Lecture Series*



Harriet Cook Carter

The Duke University School of Nursing Class of 1963 proposed the idea of an Annual Lecture Series as a means of giving recognition to nursing as an academic discipline and as a profession within society. The lectureship was originally funded by a gift from the Class of 1963 and has continued through the years through the support of alumni, students, and friends of the Duke University School of Nursing and the Duke University Nursing Service.

In 1968, the series was renamed in honor of Harriet Cook Carter. Mrs. Carter was a compassionate and creative nurse who endeared herself to Duke University and to Durham through her widespread activities in the community. She was an honorary member of the Alumni Association of the Duke University School of Nursing, cofounder of the Woman's Auxiliary of Duke University Medical Center, and an active member of the Board of the Salvation Army and other civic groups.









Dorm life included time for both study and socializing.

1931-1971

## Highlights of Student Life

### *Housing for Nursing Students*

The original Duke Endowment had called for the construction of a “Nurses’ Home,” a residence for nurses that was traditionally adjacent to a hospital—a convenience for those working late and rising early. At the time of the gift, the common approach to the education of nurses was the hospital-based apprenticeship model that awarded a diploma.

Prior to the construction of the Nurses’ Home, Duke’s first nursing students lived on the old Trinity College campus, dubbed “East Campus.” Buses were used to transport the nursing students and graduate nurses from East Campus to the new West Campus, where the Hospital was located. The buses were famous for breaking down somewhere along the two-mile Campus Drive that ran between the two campuses. One late evening, as the students were headed home after the first Christmas party held at the new hospital, the bus stopped in front of the home of University President William Preston Few and would not start again.

The nursing students left the bus and walked a mile home, singing holiday carols. Later President Few thanked them for their midnight serenade.

The construction of the Nurses’ Home, so named in Mr. Duke’s 1925 bequest, was completed in 1932, with accommodations for 226. Because the Nurses’ Home did not contain social spaces, students congregated in the small reception area, sitting on the staircase to the second floor for morning Bible reading, prayer, or uniform inspection before reporting to the hospital units. Miss Baker, Miss Gardiner, and Miss Pinkerton lived at the Nurses’ Home, doing room checks of the students at night. A house mother supervised during the day.

Upon the death of Miss Baker in 1943, the Nurses’ Home was renamed Baker House in her honor.

Students sunbathed on the Hanes House roof.



## Hanes House

On September 1, 1952, the Elizabeth P. Hanes House for Nurses opened. Nursing students living in Hanes House formed a close bond. As the only females living on Duke's West Campus until the 1970s, they were actively involved in the social scene with undergraduates as well as with medical and other graduate students who lived across the street from the Hanes House in the Graduate Center Dormitory. In the 1959 School of Nursing alumnae newsletter, one alumna wrote, "At Hanes House our living rooms and parlors were filled with happy greetings, smiling faces, and a buzz of chit-chat."

In the first-floor living room of Hanes House, students hosted weekend and holiday social events and elegant teas, using sterling silverware and English china, often while a student played the grand piano. Faculty chaperoned parties in nearby cabins, and students hiked and picnicked in Duke Forest.

Hanes House included a Nursing Arts Lab, where new students learned and practiced procedures. New technology, including television monitors and other audiovisual equipment, enabled independent learning. The Nursing School Library in Hanes House was open late each evening, providing an alternative study space to the Medical School Library, which had been available to nursing students since the early 1930s. A gymnasium hosted table tennis, basketball, volleyball, and other exercise—and students sunbathed on the roof during the summer.

After Hanes House opened, the older dormitory on Erwin Road (now the renovated John Hope Franklin Center) became known as Hanes House Annex in June 1955, serving as additional residence space for nursing students and dietetic interns.

## ELIZABETH PECK HANES

Benefactor of Hanes House

Elizabeth Peck was born in Watkins Glen, New York. After attending a girls' school in Kentucky, Miss Peck entered nursing school and graduated from St. Luke's Hospital in New York City. While in training, she met Frederic M. Hanes, MD, and married him soon after graduation.

On January 14, 1930, Dr. Hanes became visiting professor at Duke in charge of neurology, and in 1933 he accepted the Florence McAlister Professorship of Medicine and chairmanship of the Department of Medicine at Duke. Upon moving to Durham, Dr. and Mrs. Hanes assumed an important role in the city's medical, cultural, and social circles, and Mrs. Hanes was active in charitable and philanthropic work.

At Duke, Mrs. Hanes decorated Baker House (which was then the Nurses' Home), various parts of the Hospital, and the West Campus Union. She felt that a university hospital should be beautiful, dignified, and charming rather than simply a functional place to minister to the ill and suffering. She donated the initial books to start the Nursing School Library and continued to contribute volumes throughout her lifetime.

Upon his death, Dr. Hanes willed his entire estate to Duke University; shortly afterward, in 1946, Mrs. Hanes donated funds that helped erect Hanes House, the new nursing student dormitory.



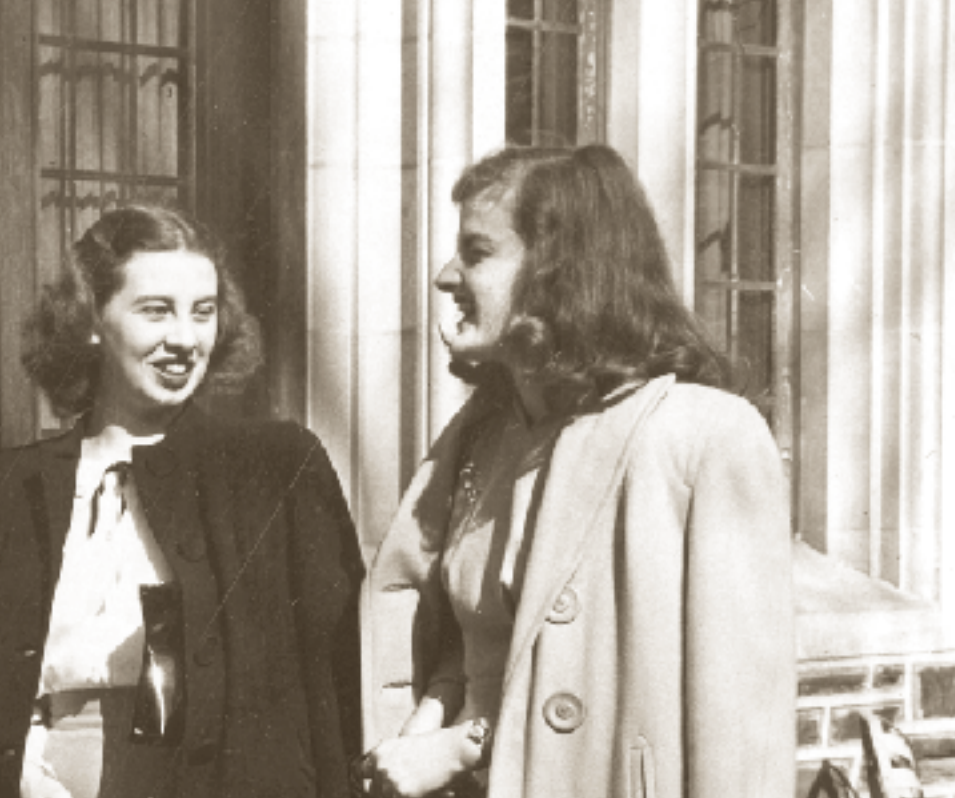
## *Student Government and the Honor System*

In 1940 the Nursing Student Government Association was organized to develop and govern student activities. An important division of the Association was the Honor Council, whose purpose was to “try infractions to the Student Government Association rules.” During the earliest years of the School, students abided by an honor code, which the students replaced with the Honor System in 1942.

The Honor System applied to all students and required that a “nurse shall act honorably in all relations of student, professional, and social life so long as she is under the jurisdiction of the School.” The student-staffed Honor Council, with a faculty advisor, was responsible for reviewing charges brought against students believed to have violated the Honor Code. Students signed an honor pledge not to give nor receive aid on examinations; many faculty found this so sufficient they felt no need to proctor tests.

The Honor System forbade lying, cheating, plagiarism, and stealing. The system required students to report all violations, and failing to do so was a violation as well. Violations resulted in trials before student peers, complete with witnesses for and against the accused.





“Upon entering the School of Nursing, you will automatically become a member of our Student Government Association, a very important factor in the life of each Duke student nurse. The organization is maintained by the students and controls most of the rules and regulations affecting the student body.”

—SGA president Marilyn Howe, 1963 student handbook

Social Standards were established to “maintain and elevate social and moral ethics of student conduct.” Violations included drinking alcohol in dorms, signing-out offenses, excessive displays of affection, and inappropriate dress. Any infractions went before the Judicial Board.

The Religious Activities Committee sponsored a weekly vespers service for patients, which was held in the Hospital’s amphitheater. Patients who wished to attend but were unable to walk were transported by wheelchair or stretcher to the service. James Cleland, ThD, dean of Duke Chapel, served as the chaplain, and was later named as the first honorary member of the Nursing Alumnae Association.



Measurements were taken of each student to ensure the proper fit for uniforms.

## *Uniforms, 1931-1971*

### **1931-1940**

The first students of Duke University School of Nursing in 1931 wore a long-sleeved, slate-blue uniform with white cuffs, apron, and tie. Students were instructed to keep a long string of safety pins pinned to the dress pocket, and to carry a bandage scissors inserted between the two back buttons of the apron. Originally, black shoes and stockings completed the ensemble. Miss Baker opted to have all students begin wearing white hose and shoes after two students in the class of 1934 developed severe athlete's foot, which was aggravated by the black stockings.

### **1940-1944**

The next iteration of the School of Nursing uniform was more fitted than the original version, but still featured long sleeves, white cuffs, and a long skirt. The uniforms, cuffs, and collars were heavily starched; according to house mother Dorothy Wilkinson, students frequently rubbed the collar's edge with soap to prevent chafing.

### **1945-1966**

By the mid-1940s, the uniform featured short sleeves, which aided in many of the clinical tasks the students performed. The uniform remained light blue with a white apron. The appropriate length for skirts was often in debate, with students filing petitions and conducting surveys to convince the faculty and administration to shorten skirts nearly every year. When wearing the uniform, students had to take special care to maintain a tidy appearance. Marjorie Goff, a member of the class of 1948, recalled, "... about the apron, when you

went to sit down, you never just sat down. You took the corners of the apron and folded it over in front of you and sat down so that your apron didn't get wrinkled. You sat down on the chambray dress, which didn't really matter, because it was going to be covered up anyway.”

In the late 1950s, when public health was included in the curriculum, students wore black skirts and white blouses to go out into the community. Jo Ann Dalton, a member of the Class of 1957, remembers often being mistaken for a bill collector. In addition, the students had a second uniform of navy blue with a white collar. These were worn for home visits. Students also had capes, which cost \$27.50 in 1963, to wear over their uniforms when they were out in the community.

In 1959, a custom-designed uniform for Duke University School of Nursing graduates was registered with the Nurses Uniform Company in Baltimore, Maryland. Skirt length continued to be an issue for the graduates of the School of Nursing, with many senior classes wanting to alter the standards before graduating. Students conducted surveys and petitioned the faculty, administration, and alumni to make the uniform “comfortable and attractive.”

### 1966-1971

In 1966 a new style of student uniform was introduced in Duke blue. This short-sleeved dress with a collar and small smocking on the bodice was considered to be a more adaptable uniform. In community health, a student would be identified by the white embroidered D.U. on her collar. For hospital use, she would add her cap, starched white bib, and apron. The dresses were washable, and the aprons required both laundering and starching. Capes were washed and starched periodically.

A starch paste was prepared and rubbed into the cotton cap, which then was attached to the side of the metal refrigerator located in the laundry room of Hanes House to dry. Students needed to select the refrigerator spot carefully, as rust spots on the refrigerator could transfer to the cap. Caps took three to four days to dry, depending on the weather.

In 1967, Dr. Brown approved uniforms that featured round-up collars, turned-up short sleeves, hidden right pocket, left upper pocket, concealed buttons below the waist, and mid-knee skirt length, but she acknowledged that “the uniform is very much out-of-date” and “a change is in order.” Eventually students requested permission to purchase off-the-rack uniforms from retail stores. In a 1969 response, Dr. Brown said that “in general, such store-bought uniforms are very badly made, fit poorly, and will not look well on our graduates,” and so both student and graduate uniforms continued to be custom-made by a uniform company.

After the first two male students were admitted to Duke University School of Nursing in 1966, it became necessary to address the issue of appropriate professional attire for them. When the two men began their clinical coursework in 1967, they were required to wear uniforms comprising a white jacket with buttons down the left side and front pockets, white trousers, a white belt, white socks, white shoes, and the Duke University School of Nursing patch on the left sleeve.





Student nurses gather for the capping ceremony, circa 1943.

## *Caps and Capping Ceremonies, 1931-1971*

The first capping ceremony conducted at Duke University School of Nursing to recognize the beginning of clinical training for students was held in June 1931. The general pattern of the cap of the Duke University School of Nursing was suggested by Louise Grant, the first nursing arts instructor, and Bessie Baker when the School opened in 1931. The shape of the cap was a modification of the shape of Miss Grant's cap from the University of Minnesota Hospital. At Miss Baker's insistence that the cap be washable, a white Indian Head material was selected. The cuff, approximately three-and-a-half inches wide, was of plain, double-thickness material. There are multiple stories of the origin of the four small tucks at the back of the cap. One version holds that the original sample from the Hospital linen room was deemed too plain, so the tucks were added. Others say the tucks were added at the suggestion of Ann Gardiner, first director of nursing education, while another story credits Miss Grant for the idea. Over the years, lore has developed that the four tucks symbolize the traits of truth, hope, faith, and charity.

Miss Jacobansky, in a letter to the University of Michigan School of Nursing in 1957, described the capping as "an informal ceremony which is associated with the big-little sister program. Students begin wearing their uniforms during the second year of the program, and the night before their semester formally begins, the students plan a short ceremony, at which time the big sisters present the caps to their little sisters."



Santa Filomena tapping ceremony, circa 1945.



## *Honoraries*

Santa Filomena was organized in 1944 as the Senior Honorary for the Duke University School of Nursing to recognize student achievement and promote leadership and high nursing standards. Between five and nine new members were chosen from the rising senior class each year by the current members of the honorary. The honorary conducted an annual candlelight tapping ceremony where the new members were publicly selected. At the ceremony, each new member received a small gold pin that depicted the Florence Nightingale lamp. To be eligible for membership, individuals needed to demonstrate leadership qualities and make contributions toward the betterment of the School of Nursing, as well as demonstrating superior nursing abilities and academic achievement.



In the 1971-1972 academic year, the School was granted a charter in Sigma Theta Tau, a national collegiate honor society for nursing. At the time, Duke was one of only two collegiate nursing schools in North Carolina to be granted a Sigma Theta Tau charter. One hundred students, faculty, and alumni were inducted to the Duke chapter of the honorary, Beta Epsilon, in its first year. Many of the faculty members transferred from constituent chapters of Sigma Theta Tau, and many alumni members of Santa Filomena, the nursing honorary that predated Sigma Theta Tau at Duke, were also inducted. According to the School's 1972-1973 undergraduate handbook, eligibility for membership in Sigma Theta Tau was based on scholastic achievement, leadership qualities, capacity for professional growth, and "desirable personal traits."

## Afterword

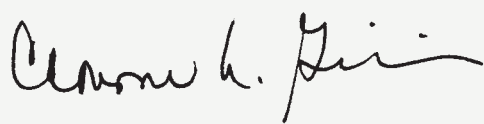
All substantive human enterprises are composed of both visionary and prosaic elements. The novelist not only creates characters and plot, but also sentences and paragraphs. The architect not only conceives an ambitious design for an impressive building, but also pays strict attention to specifying the correct mortar to bind the foundation into a stable base for what is to come. The confectioner not only envisions a delightful new candy, but also checks the quality of the ingredients.

So it is with Duke University School of Nursing. In this summary of the School's first forty years, the grand vision and the details of daily minutiae intertwine. The resulting picture of the School reflects the vitality and energy that have been present here from the very beginning, as well as the disciplined attention to detail and the exacting standards that undergirded the School during times of challenge.

Although this volume does not offer a critical analysis of the School's early decades, some foundational themes do emerge:

- From the beginning, Duke University School of Nursing has been highly integrated both with Duke University and with Duke Hospital/Duke University Medical Center. Along with unprecedented opportunities for innovation and creativity, the School's position at the nexus of education and practice has repeatedly posed questions of governance, the threat of paternalism, and challenges to leadership.
- Duke University School of Nursing has always attracted the most talented nursing professionals from the most highly respected institutions—not only as nursing faculty, but also as strong leaders with a visionary mission for the School.
- The School has always pursued knowledge in service to society. Solving real problems to improve patient care emerges as a consistent and compelling focus of this institution. Thanks to this, the hard-working and self-motivated nursing candidates who came to Duke University School of Nursing for their education graduated as capable professionals who have served in a wide range of significant nursing endeavors.

Of course, this is not the end of the story. These pages cover only the first four decades of the School, and the themes that surface from a review of the School's early years. The forty years from 1971 to the present have been fully as transformational for the School as its first decades, and filled with their own share of groundbreaking ideas and practical details. My hope is that you consider what you have found in this summary as both example and foretaste of the aspirations, adventures, and achievements that subsequent years are bringing to Duke University School of Nursing.



**Catherine L. Gilliss, DNSc, RN, FAAN**  
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Helene Fuld Health Trust Professor of Nursing  
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