

BLACK NURSES STRUGGLE FOR ADMISSION TO PROFESSIONAL SCHOOLS: FOUR RETIRED NURSES LOOK BACK

Georgia Burnette, RN, MSN, MS Ed.

This article traces the personal history of four women in journey to enter the nursing profession during a time when most schools were all white and closed to Blacks. To understand these personal stories, the history of nursing and nursing education is provided first as context and broad overview. The narrative concludes with a reflection on why preserving and passing on this history is important not only for the nursing profession in general, but in particular for Black women entering or already in the profession.

African American nurses have three strikes against us. We're Black, female, and work in a profession still striving for equality and respect within the medical community. It has been a battle all the way, but fortunately things are moving in the right direction. To understand my story and that of my nursing colleagues, a brief history of nursing and nursing education is required. Understanding how the nursing profession moved from segregation to desegregation likely is new information to the predominantly social work readership of *Reflections*.

A Brief History of Nursing and Nursing Education

The history of nursing usually begins with the story of Florence Nightingale and her assistants during the Crimean War. But women of all cultures have nursed the sick from time immemorial. Nursing was simply another aspect of family life. If, by chance, one became particularly adept at the task, word of these skills became known throughout the community and that person was called upon in special circumstances.

When I attended nursing school during the 1950s, the history and struggles of Black nurses were accorded a few pages in most texts, if any at all. According to Althea Davis (1999) in her book, *Early Black American Leaders in Nursing*: "Nursing history as presented in the past taught only selected aspects of nursing history while excluding Black nursing leaders and Black nurses'

experience, as evidenced in nursing history texts. On rare occasions, these texts included fleeting attention to or inaccurate information about Black nurses. But nurse historians and historians have begun to fill the void" (p. vii.). Over time, as values changed and legislation was enacted, nursing texts began to include a broader and more enlightened scope of information about the Black nurse and her struggle for acceptance into the larger professional medical community. Nevertheless, the history of Black nurses cannot be told in isolation, since cultural values of the time heavily impacted the struggle.

Care of the sick. Nursing during the early eighteenth and nineteenth centuries was simply the care of the sick by family members or by slaves in the South. Some religious orders assumed that burden as their calling, specifically the Sisters of Mercy who had charge of Illinois' first hospital in 1849 (Frank, 1953). By and large, however, before the turn of the 20th century "nurses," both Black and White, were untrained. Their care consisted of comfort measures, poultices, wraps of heat and cold, and the compounding of herbs and potions to help their patients.

Few Blacks and many poor Whites could ill afford a physician at the time of birth, hence the extensive use of midwives, especially throughout the southern states. Midwives subsequently attained a modicum of prestige that lasted well into the twentieth century,

when obstetricians began to improve childbirth practices.

We credit Florence Nightingale with the beginning of modern nursing, in that she advocated an organized system for the training of nurses. Hospitals rose to the occasion, and the hospital training system was born. But as the schools proliferated, few accepted Black students. Responding to this dilemma, Black educators, "colored women's clubs," and several prominent philanthropic organizations worked together to establish Black nursing schools in the eastern and southern United States.

A national survey commissioned by the Rockefeller Foundation in 1925 examined the admission policies of nursing schools throughout the country regarding Black students. The resulting report simply documented what was already well known. Of the American Nurses Association's list of 1696 accredited schools, 1588 schools did not admit Black students. The majority of the schools accepting minority students were in the South, and nineteen had a bed capacity of fifty beds or less. Twenty-five of those schools admitting Black students were connected with hospitals for Black patients or had a (segregated) department or wing for Black patients maintained by city institutions (Davis, 1999).

Professional organizations. As a profession grows and matures, it seeks to upgrade the educational standards of its schools, improve working conditions, and provide continuing education for its practitioners. Professional organizations have traditionally provided these services; thus, at the turn of the century, four major associations were formed to serve the several specialty groups that had emerged: (a) The American Nurses Association, established in 1896; (b) The National League for Nursing, established in 1893; (c) The Red Cross Nursing Service, established in 1905 as a branch of the

American Red Cross; and (d) the National Organization for Public Health Nursing, established in 1912. These organizations sought to foster high standards of nursing practice, develop educational standards for nurses, and improve the health care of the general public.

The National Organization for Public Health Nursing was the only organization to accept Black nurses since membership could be gained by directly joining the national body. Other associations required state membership as a condition of participation, but Black nurses were denied membership in the majority of states' associations until after World War II (Davis, 1999). Finding closed doors in most areas of society, the road to professionalism was especially difficult for Black nurses. According to Kalisch and Kalisch (1995): "Advancement for the Black nurse came slowly, because she was a member of an emerging group that had not been fully recognized on a merit basis by other groups; professionally, she was part of an emerging group whose worth to society also had not been fully recognized" (p. 389). With few alternatives remaining, Black nurses formed their own professional organization in 1908, The National Association of Colored Graduate Nurses (NACGN), to advance the standards of their nurses, break down discrimination in the profession, and develop leadership within the ranks. It was not until 1951 that NACGN was dissolved and membership for Black nurses was granted in the American Nurses Association.

Wartime advancements. Discrimination against Black nurses also existed within the armed forces. Yet, paradoxically, war and the need for nurses in the military eventually opened the doors for Black nurses. According to Hine (1989): "It is an extreme irony that nursing's fortune is so often connected to war. Florence Nightingale's experiences in the Crimean War, the appalling casualties during

the American Civil War, the death and destruction of World War I all influenced the emergence and development of nurse training and practice. In the wake of these episodes of massive carnage, nursing reaped increased status and greater public esteem" (p. 162).

Initially, all branches of the service rejected the direct admission of Black nurses. During WWI, a small number were accepted into the Army Nurse Corps through the Red Cross Nursing Service, but few were called to active duty. Those Black nurses were permitted to care only for Black soldiers, and their quarters and activities were as segregated as those of their patients. The Bolton Bill of 1943, also known as The Nurse Training Act, significantly expanded and improved the educational opportunities for Black nurses. Finally, in 1948, by President Truman's Executive Order, the armed forces began to desegregate. This paved the way for minorities to move into the ranks of the various services, ostensibly without bias and prejudice. Nevertheless, the admission policies of most nursing schools changed little or not at all, as they continued to discriminate against Blacks.

Personal Histories and Reflections from the 1950s Onward: The Stories of Four Nurses

Our own stories start in the 1950s. Our parents told us, "Go to school, get an education, depend only upon yourself." We listened and attempted to follow their advice. But the white world was not ready for us. These narratives illustrate the struggle by Black high school graduates as we sought entrance into the nursing profession. The stories describe experiences in Buffalo, New York; Flint, Michigan; Chicago, Illinois; and New York, New York. I begin with my own story, followed by those of my nursing friends and colleagues whom I interviewed for this article: Willye Tillman, Wilma Watts, and

Bronte Blenman Mostiller. They graciously have allowed me to retell their stories.

Georgia (Mackie) Burnette, RN, MSN. MS ED (Buffalo, New York)

I am an old Buffalonian, born, educated and residing in the Western New York state area for the past 70 years. There was a brief five-year "excursion" to Chicago during the early 1960s, but illness and death in my family brought me home again, and I've remained here happily amongst family, friends, and colleagues.

Following graduation from high school in 1946, I worked briefly at unskilled jobs, married in 1947, and shortly thereafter gave birth to a son, Dale. However, my goal of becoming a registered nurse surfaced again and I sought admission to three nursing schools within the city. At this time, to become a graduate nurse one was required to complete a three-year educational program at a hospital school of nursing. The graduate was then qualified to sit for the licensing examination leading to state registration. In several parts of the country, a few colleges offered a baccalaureate degree in nursing, but I certainly could not afford the tuition. The fact that I was married also became a deterrent, as I was soon to discover. At the time of inquiry to three or four schools of nursing, I might have been accepted into the County Hospital's program, but their policy excluded married applicants.

The remaining schools simply did not admit Black students. Their policy of rejection was common knowledge within the Black community. However, I was brave enough to speak to the admissions clerk in the school office of the hospital where I was employed as a nursing aide. I will NEVER forget her smile as she shook her head to indicate that I could not expect to be admitted to *their* school of nursing. Undaunted, I began to search for a school as close to Buffalo, New York, as possible.

Although I was married and mother of a four year old, my commitment to becoming a registered nurse did not falter. That my marriage was floundering badly only moved me to increase my efforts to locate a school. My parents were supportive and not only offered to cover my tuition, but also agreed to care for my son while I was in school. I soon discovered that the Lincoln Hospital School for Nurses in the Bronx in New York City was the nearest school to Buffalo to accept Black applicants. Founded in 1896, it was an all-Black school with tuition of \$278 including room and board for the three years. This was a princely sum of money at the time for a working class family in a blue-collar town. Also, I'd be required to relocate, and this was to be my first time away from home except for short vacations. Nevertheless, I applied and was accepted. I closed my flat and my parents assumed care of my son. I entered nursing school in New York City, September 1950.

The Bronx wasn't Manhattan, but for me, this was the big city! Yet I was to see little of the outside world due to the demanding curriculum. The classes in anatomy/physiology, microbiology, and chemistry were rigorous, and there was also a requirement to learn the hands-on aspect of nursing. We began our first practicum three months later, newly outfitted in blue and white uniforms and black stockings, providing basic care for patients in the adjacent hospital. A major problem for me, however, was being away from home. I missed my family and the transition from home to school and dormitory living proved difficult.

As the academic period drew to a close, but prior to capping ceremonies, I learned from my mother that a new collegiate program in nursing had begun at the University of Buffalo (now SUNY, Buffalo). Despite the fact that four years seemed a lifetime as compared to the twenty-eight months remaining in the current program, I never

hesitated. I returned home and shortly thereafter was accepted into the university's school of nursing, September 1951. *This was absolutely the very best decision I've made in my entire lifetime!*

Racial overtones still prevailed in Buffalo. Nevertheless, during student affiliations in the very hospitals that denied me admission, I was warmly welcomed as a University of Buffalo student! One overt act of racism did occur when I was denied an affiliation to a small community hospital located in a town north of Buffalo. I later learned that this lumber town had at one time been a seat of major Ku Klux Klan activity, hence their views on minorities (Lay, 1995). The affiliation was completed, however, in a similar hospital thirty miles away where everyone was friendly and helpful. *I truly enjoyed that experience.*

It appears, though, that some things do change over time. I've been a participant in the cardiac rehabilitation exercise program of the northtown's hospital for the past three years. As I related the story of discrimination to the young, white exercise physiologists and nurses, they shook their heads with surprise and disbelief. Yet today, few Black Americans live in this town, there are few minority employees in the hospital, and I am the lone African American patient in the cardiac rehabilitation program. Some things just take longer to change.

Upon completion of the university program in 1955, I entered the (subtly) segregated nursing community with a Bachelor's degree in Nursing, a rarity in the 1950s. The adage, *for all the wrong reasons, the right thing was done*, was certainly true in my case. In spite of being denied admission to their schools, I stumbled into a collegiate program providing a foundation that assisted in my rise through the ranks of the nursing profession and helped in achieving lifetime goals.

Looking back, my career has been enjoyable for the most part, and I was

fortunate to have been selected for the majority of positions I sought to attain. I enjoyed stints in all the "fast services" (emergency and operating rooms, labor and delivery suites, newborn nursery) before returning to graduate school for Master's degrees in education and nursing. I was appointed assistant professor of nursing at Niagara University, Assistant Administrator for Nursing at Roswell Park Memorial Institute, one of the prestigious cancer hospitals in the country, and retired as director of nursing from a New York State Mental Health facility in 1993. Retirement is fulfilling and I have embarked upon a second career as a freelance writer.

**Willye Tillman, RN, BS,
CRNA (Chicago, Illinois)**

Willye was a 1951 graduate from Chicago's Provident Hospital School of Nursing, an all-Black hospital founded in 1891. Her applications to white hospital schools had been denied, although she was advised to apply at a later time. Their quota of two Black students

per class (to share bathroom and sleeping facilities) had been filled. She later learned the skin color of those accepted was "light, bright, and almost white."

Following graduation and licensure, Willye moved to New York City to work in the recovery room of a large New York hospital. In 1956, she applied to three Chicago schools for training as a nurse anesthetist. At one facility, as she headed for the operating room for an interview, she was asked, "Where are you going?" Upon learning the reason (and discerning her color), she was told forthwith, "We have no openings."

Willye was denied admission to several other schools of anesthesia before acceptance into St. Francis Hospital's School of

Anesthesia in Peoria, Illinois. When her Black roommate from the South failed to attend, she shared facilities with the white female students in the convent. For the time, the composition of the class was a major departure from the norm. Willye was the oldest and only Black student in her class, while a female Chinese student further integrated the small group of eight aspiring scholars.

Incidents of racism were few in the school setting, although physicians were often biased in their comments and actions. Movement throughout the city of Peoria was, however, another matter. Restaurants were not opened to Blacks. Once when crossing the street, she was told "N*****, go back to Mississippi."

Willye graduated in 1957 from St. Francis Hospital's School of Anesthesia in Peoria, Illinois. Upon her return to Chicago, she applied to three hospitals, but all reported that they had no openings. Race was definitely a factor at a private dental office where she was denied employment. This area of the city was an all white, upper-class neighborhood where Blacks were permitted to enter only as domestics, maintenance workers, or laborers. In one employment interview, she initially was cordially received; however, it soon became clear that she would not obtain the position. She recalls: "He exhibited a very condescending demeanor which spoke volumes and seemed to imply, 'How dare you come here for an interview!' He indicated he was looking for a 'more experienced professional,' and that other applicants were being considered." Willye was not requested to call back, nor advised that notification would be forthcoming about the position.

Shortly thereafter, Willye secured positions at two Gary, Indiana, hospitals where she remained from 1957-77 (St. Francis 1957-67 and later, Gary Methodist Hospital from 1967-77). But over the years, the 30-45 minute commute from Chicago to Gary and back again proved exhausting; thus, in 1977 she sought a position closer to home.



Willye Tillman (1951)

While being interviewed at an Oak Lawn, Illinois, facility, Willye was advised that a prominent local Catholic hospital might offer a position more suited to her needs.

Her employment at Holy Cross Hospital in 1977 began during Chicago's violent civil rights struggle for social equality. The facility was located in Marquette Park, another all-White neighborhood from which Dr. Martin Luther King had been evicted on numerous occasions as he and his supporters campaigned for minority rights. To enter that neighborhood, Black folk understood that they risked life and limb. But Willye accepted the challenge and the position, remaining at the hospital without incident until her retirement in 1984.

During those years Willye became active in the Illinois Association of Nurse Anesthetists and was elected its President from 1978-79, the first and only Black professional to hold that position. Today, she works with worldwide service organizations that seek to improve the legal, political, economic, and professional status of women. She says with a smile, "I've had a good life,



Willye Tillman (1980s)

an interesting career, and am enjoying a satisfying and rewarding retirement."

Wilma (Brady) Watts, RN, MSN (Flint, Michigan)

Wilma graduated from high school in Flint, Michigan, in 1953. She developed an interest

in nursing following her sister, Mary, who had entered nurses training in 1950. At that time, Mary, aware that hospitals in Flint would not admit Black students to their schools of nursing, simply applied to an all-Black school in St. Louis, Missouri. In the meantime, however, the Flint Urban League had worked diligently and successfully towards paving the way for an open admissions policy at the various schools of nursing. By 1953, when Wilma and her cousin, Sharon Simpson, sought admission to Hurley Hospital's School of Nursing, both were quietly accepted. Nevertheless, they were aware that one factor weighing heavily towards their acceptance was that the two could share bathroom and sleeping facilities in the student dormitory.

The nursing school experience was unmarred by overt racism; however, many of their classmates from the upper peninsula of Michigan had never met a black person, and asked, "Do Blacks run so fast because they have narrower heels?" Or, "We've always been told that Blacks have tails. Is that true?" Wilma commented, "My classmates were friendly and cooperative, yet some were more 'standoffish' than others. I soon became involved in student nurse activities, was elected class secretary and later class president. When we attended regional conferences, we shared rooms with White students without any problems whatsoever."

Wilma and Sharon graduated from Hurley Hospital's School of Nursing in 1956. Following graduation, Wilma remained at the hospital as an operating room nurse for a short time before moving to San Francisco. She entered Michigan State University, East Lansing, in 1958 to obtain a Bachelor of Science degree in Nursing.

It was during this period that Wilma experienced an appalling episode of discrimination while working part-time in the operating room of a local hospital. Her assignment was to "scrub" (i.e., pass instruments, sutures, and sponges to the



Wilma Watts (1956)

medical team during a surgical procedure). One morning, things were moving along smoothly until the surgeon arrived. When he saw Wilma, he demanded angrily, "What is *she* doing here? I don't want her to scrub for me." He continued this tirade by throwing instruments on the floor, loudly voicing his displeasure. Staff from adjacent rooms slipped quietly in to watch his display of ill humor and bad taste. When the O.R. supervisor arrived, she listened, quietly remarked to the surgeon, "She's your scrub nurse today," then turned and left the room. *And that was the end of that!* But it was a most disturbing incident Wilma recalls with emotion, one that *she will never forget.*

After receiving her undergraduate degree in 1960, Wilma assumed the position of director of in-service education at Hurley Hospital until 1962 when she entered graduate school at Wayne State University. Upon receiving her Master's of Science in Nursing, Wilma joined the faculty of the School of Nursing of Wayne State University. It was there she met Henry Watts, a professor of sociology. They were married and eventually settled in Buffalo, where both joined the faculty of their respective disciplines at the State University of New York at Buffalo.

During her twenty years on the faculty of the School of Nursing at SUNY/Buffalo, Wilma held the positions of Assistant Professor of Nursing and Assistant to the Dean. From 1980-1984, she established and directed a \$522,000 federally funded program for the recruitment and retention of disadvantaged students. When the grant ended, Wilma recommended that a position be created and funded within the School of nursing to continue the work of the program. However, it was not until 1988 that the post of Assistant to the Dean was established. Wilma was appointed to the position with release time from teaching duties so the new responsibilities could be undertaken. During

this time, she also published several articles that described the program.

In 1991, Wilma retired and, with the appointment of a new dean, the position was eliminated. Minority recruitment for the various schools is now a university-wide program. Wilma feels strongly that this is not the best approach, that working with these students who are often from a disadvantaged background requires an "up close and personal approach" that cannot be provided and sustained in the larger programs. It seems the need is there, but the commitment to



Wilma Watts (2002)

increasing minority representation in the School of Nursing is lacking.

**Bronte Blenman Mostiller, RN, BSN
(New York, New York)**

Bronte was a 1949 graduate of a local Buffalo high school who soon discovered that employment for unskilled high school graduates was difficult to obtain. She commented, "I couldn't find work anywhere although I scoured the entire downtown area seeking positions in the retail clothing field. But I was told each time: 'Sorry, there's nothing available.'"

Bronte was successful, however, in finding employment at Sister's Hospital in the maintenance department. The assignment to



Bronte Mostiller (1953)

the workroom of the operating room was interesting, but she was soon asked to replace a worker on maternity leave. Mopping the operating room floors was not the work Bronte envisioned, and within the week she resigned. She recalls, "Finally, I found work as a domestic for a dentist's family for a short period of time. But my goal was to become a nurse, and I sent applications (with photograph) to nursing schools within the city. I guess I must have led a sheltered life, because I'd somehow missed the fact that Black students were not accepted to most local hospital schools of nursing. The exception was the City Hospital, *if their quota had not been filled*. I really felt bad. I thought I was not bright enough or smart enough."

An older friend and registered nurse said to Bronte: "Forget it. Apply to a Black school. Apply to Lincoln, where I trained." She took her advice, all the while praying, "Dear Lord, just let me get into school and you'll never see me in this city again."

In 1950 Bronte entered Lincoln Hospital School of Nursing and graduated three years later. She found employment immediately and specialized in maternity and pediatric nursing for her entire career.

Bronte received her Bachelor of Science degree in Nursing from St. Johns University in 1971 and remained in New York City for

the next thirty-three years. She retired in 1986 from Maimonides Medical Center, New York City, and later that year returned home to Buffalo, New York. Shortly thereafter, she married a native Buffalonian, Carl Mostiller.

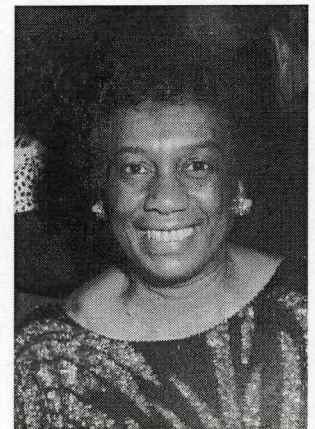
Since retirement, Bronte has remained active in the community and has become an avid genealogist. She and her husband have researched and successfully identified descendants from the early 1800s. Looking back, Bronte says, "I loved and enjoyed my career in nursing, mainly because I was fortunate to work with a group that were like family. I was not denied promotions or raises, and moved easily into nursing supervision as positions became available in maternity and pediatrics."

Conclusion: Reflection on Social Equality in 2004

There is absolutely no doubt that we've come a long way toward righting the wrongs of racism, sexism, and the low status of the nursing profession. *But we still have a long way to go.* Race still counts, and will continue to do so for untold generations.

On August 28, 1963, speaking in Washington, D.C., on the steps of the memorial of the president who had abolished slavery a century before, Martin Luther King Jr. described his vision of a society in which barriers to Black equality were removed: "I have a dream that my four children will one day live in a nation where they will not be judged by the color of their skin but by the content of their character" (quote retrieved from www.quotationspage.com). My own dream in 2004 is the belief that the only way the issues of race might vanish or diminish appreciably will be when the races intermingle to the extent that racial features and colors are not readily discernable. Perhaps then, one can be accepted upon his/her credentials, character, and/or demonstrable work ethic.

The glass ceiling remains firmly intact for the professional woman seeking entrance into



Bronte Mostiller (2002)

the higher echelons of the corporate world and their respective boardrooms. Occasionally, a few of the smart and the brave will be permitted to slip through, but sexism is still an issue to be confronted. At the lower end of the spectrum, women are still slated to perform the menial tasks of the world. Thus for Black Americans and women of all races, colors, and creeds, hear me when I say, "*Credentials are Essential.*" You need education, brains, and chutzpah to make it in this world.

The problems facing the nursing profession today are the quantity and age of the workforce, staffing and quality of care, salaries, unionism, shift work, and marketing of the profession. In years past, women were restricted to teaching, nursing, social work, and clerical positions. But now the door is wide open and opportunities abound in most areas of the labor force. It's been a tough sell to persuade the young women of today to choose a profession where evening and night shifts are a given until you reach the managerial, educational, or certified clinical practice hierarchy of the profession.

Due to the 1964 Civil Rights Act enacted in the decade after *Brown vs. the Board of Education*, minority nurses cannot be refused admission to a school of nursing. The problem now (as before) is whether the applicant is educationally qualified. Obtaining an adequate elementary and high school education in most inner cities is one of the Black community's greatest challenges. Reading, writing, and arithmetic remain the cornerstones of a basic education. Yet, because of the country's "social promotion" policies over the past several decades, students graduate from high school ill equipped to enter college. One has only to witness the plethora of remedial courses in the freshman curriculum to see that we are not educating our children to enter the mainstream of society. While President Bush mouths the slogan, "No Child Will Be Left Behind," he has cut educational funding and

is currently attempting to revamp the Head Start Programs (translate: push funding costs off to the already financially strapped states).

The problems facing minority nurses today are not the overt denials to recognize, honor, and promote, but the subtle, covert actions more difficult to document and quantify. Sometimes racial attitudes are so embedded that perhaps the person is not totally aware of core beliefs that influence his/her decisions. Look around you. How many minority nurses have been appointed to the highest administrative and top educational posts throughout the country? I grant you other factors weigh in, but it appears the glass ceiling is also operative at lower levels of the occupational ladder.

Nursing organizations created to promote professionalism within the field mirrored the workplace. After the American Nurses Association (ANA) began accepting Black nurses in 1951, it took only twenty years for Black nurses to again form their own professional organization. Feeling their needs were not being addressed and noting the lack of minority nurses in leadership positions within the ANA, a small group formed the National Black Nurses Association in 1971, which continues to flourish today.

Having been retired for over ten years, I no longer hold memberships in the local, state, and national nursing organizations. Thus, I can't specifically speak to whether the lack of minority nurses in leadership positions in those organizations continues today. However, as in the larger society, I believe improvements continue to be made. Minorities in the United States continue to overcome the barriers in our path to equal employment, housing, and education. It has been a long, difficult struggle, yet we continue to fight the good fight. We must continue to work within our health care system, even when it is in shambles, and within other established systems to promote social equality. We also can emulate our early

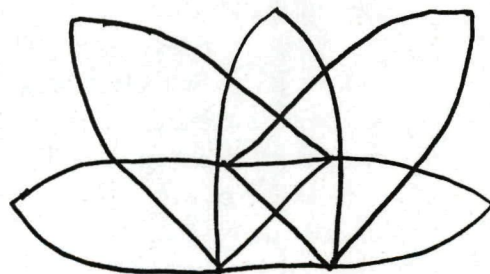
leaders by initiating and developing *alternative alliances* to better meet our needs. And we must preserve our history. As Althea Davis (1999) has observed: "The value of knowing one's history, its context within American history, and the leaders that shaped the profession inclusively as it grew, instills a pride about the leaders who made it possible for Black women to have access to success. *We did not merely arrive on our own*" (p. vii).

End Note

Preparation of this paper has been a revelation to me. I was educated in a university school of nursing at a time when issues of race were not discussed. Colleagues from minority nursing schools smiled and nodded knowingly when I mentioned readings that described the struggle by Black women to enter the profession. Their history of nursing classes had exposed them to these early conflicts. I have always loved history, thanks to the wonderful instructors who taught this fascinating subject, and I have thoroughly enjoyed this foray into the stories of early nursing.

References

- Davis, A.T. (1999). *Early Black American Leaders in Nursing*. Sudbury, MA: Jones and Bartlett Publishers.
- Frank, Sister C.M. (1953). *The Historical Development of Nursing*. Philadelphia: W.B. Saunders Company.
- Hine, D.C. (1989). *Black Women in White*. Bloomington, IN: Indiana University Press.
- Kalisch, P.A. and Kalisch, B.J. (1995). *The Advance of American Nursing* (3rd edition). Philadelphia: J.B. Lippincott Company.
- Lay, S. (1995). *Hooded Knights of the Niagara: The Ku Klux Klan in Buffalo, New York*. New York: New York University Press.



Copyright of Reflections: Narratives of Professional Helping is the property of Cleveland State University and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.