



DEPARTMENT OF THE AIR FORCE
WASHINGTON DC



OFFICE OF THE ASSISTANT SECRETARY

JUN 2 1993

Dear

This is in response to your April 5, 1993 (additional letter dated April 11, 1993) application for reconsideration for the U.S. Cadet Nurse Corps (WWII).

On May 26, 1993, the Civilian/Military Service Review Board (C/MSRB) thoroughly reviewed the documentation in your reconsideration application, and unanimously voted that it failed to meet the standard of "new, relevant, and substantive" evidence as required by DODD 1000.20 (paragraph D.3.).

The Board determined the application provided no new evidence which offers information or insight into the status of your group that had not already been provided to the Board. A specific response pertaining to criteria listed in your application is attached. Additionally, I am enclosing your application per DODD 1000.20.

The Board is fully cognizant of the national effort and sacrifices which took place during World War II by the United States. The Board especially noted the valuable contribution made by the Cadet Nurse Corps in this national effort. However, while civilian service is a vital element of the war-fighting capability of the U.S. Armed Forces. Civilian service during a period of armed conflict is not necessarily equivalent to active military service, even when performed in a combat zone. The groups recognized under the provisions of P.L. 95-202 are recognized based on the criteria listed in DODD 1000.20.

Sincerely,

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1. Response to Criteria
2. Reconsideration Application

RESPONSE TO CADET NURSE CORPS RECONSIDERATION APPLICATION--26 MAY 1993

The Cadet Nurse Corps (CNC) was composed of student trainees and was not a branch of the Armed Forces or of the civilian personnel force of the United States Government. Under Public Law 74 of the 78th Congress the federal government provided scholarships for students and grants-in-aid for schools of nursing whose curricula and clinical facilities met the standards prescribed by the U.S. Public Health Service (USPHS). The nurse candidates themselves were never considered to be employees of the Federal Government in either a military or civilian capacity.

The Cadet Nurses recruited under Public Law 74 were not officers or employees of the U.S. for purposes of the War Overtime Pay Act. The small stipend which they received was dispensed by the institution at which they were trained and was considered an allowance for personal expenses.

At the beginning of the Senior Nurse Program, the Army optimistically agreed to train 1,500 senior cadets every 6 months and agreed to limit acceptance to 50 percent of each class. Such precautions proved unnecessary because of the strong influence of nursing schools on their students. Student interest increased only after the President proposed drafting nurses in January 1945. Available evidence does not permit measurement of the program's impact on civilian nursing, or on recruitment rates. Even the number of students graduated is not a measure of impact, because the senior cadet's promise to remain in nursing throughout the war was not legally binding.

Direct recruiting was not a primary objective of the program, but the Army Medical Department did make efforts to interest cadets in Army nursing. Despite efforts to make them "feel a part of it," very few cadets were ultimately persuaded to remain in the service. There is no record of the number of cadets who accepted appointment, but only 93 had been commissioned by January 1, 1945 (Medical Training in World War II, Office of the Surgeon General, Department of the Army).

Under the provisions of Title 38 (laws administered by the Department of Veterans Affairs), USC, Section 101 (21), it is stated:

- "(21) The term 'active duty' means
- (A) full time duty in the Armed Forces, other than duty for training

Training time (while not on active duty) does not accrue as time spent for the purpose of veterans benefits. Very often individuals attempt to correlate military "boot camp" training with civilian training as equivalent time. This is an erroneous assumption. For example, time spent in college as a student with an Reserve Officer Training Corps (ROTC) scholarship (paid education), monthly drills in a U.S. Armed Forces uniform, military education, and monthly allowances, does not count as time spent in the military for pay or for the purpose of VA benefits.

Letter to President Clinton (dated March 1, 1993)

- The letter makes reference to the group under consideration to total 180,000 members. However, the group can be no larger than 124,000 (170,000 nurses recruited between July 1943 and October 1945, and nearly 56,000 Cadet Nurses withdrew during the course of the program).

- The letter states the Bolton Act was "in response to a dire shortage of nurses for stateside Military and Veterans hospitals."

"the Cadet Nurse Corps of World War II was developed primarily to meet the needs of civilian hospitals. As the Corps history states: 'Perhaps the strongest case for the Cadet Nurse Corps was the plea of hospital authorities that nursing care in civilian hospitals was in a desperate state.'" (Medical Training in World War II, Office of the Surgeon General, Department of the Army, 1974)

- Cadet Nurse Corps "was there to meet and care for each and every returning American soldier...." Our research indicates a Senior Cadet Nurse did not enter a military hospital for the final six month training until June 1944, and then only at a few hospitals. The applicant provides no evidence to support how "each and every returning American soldier was cared for by a member of the Cadet Nurse Corps.

- Applicant claims the basis for December 21, 1979 denial was based on that "we were a non-combatant organization." Nowhere in the December 1979 rationale does it state this as a reason for denial. The December 3, 1979 C/MSRB rationale was provided to the applicant upon her request in April 1993.

APPLICATION ABSTRACT

- "because the war ended and the provisions of the cadet corps was only to serve for the duration of the war, congress neglected to incorporate the Cadet Nurse Corps into the military." The applicant provided no evidence to support this conclusion. However, a majority of the evidence shows there was never any intent to incorporate the Cadet Nurse Corps into the military. From the Medical Training in World War II, Office of the Surgeon General, states "...the Army School of Nursing closed in 1933, the Army had neither the facilities nor the personnel to train student nurses. Reestablishment of the school was never seriously considered during World War II because experienced Army nurses were reluctant to take on the added burden of training students when it had been demonstrated that civilian nurses could be utilized after a brief orientation to military life." Additionally, the Bolton Act makes no mention of any provision to turn the CNC into a military organization.

HOW DID THE GROUP'S SERVICE CONTRIBUTE TO THE SUCCESS OF A MILITARY MISSION?

- "provided the nurses for all hospitals serving wounded or recovering soldiers both at home and abroad." No evidence to support this claim. No Cadet Nurse served overseas. If the applicant is referring to graduates of the CNC, this information is not pertinent since the group application under P.L. 95-202 only considers the CNC.

- "agreement to serve the military for the duration of the war." The Cadet Nurse pledged to remain in essential military or civilian nursing during the war, but the pledge was not binding. When the Surgeon General of the Public Health Service sought a legal interpretation of the pledge, he was

advised by the General Counsel as follows: "The statement of availability required of the Cadet Nurse under Section 2 of Public Law 74, Seventy eight Congress, that she shall be available for military or other Federal governmental services for the duration of the war, does not establish a contractual relationship between the Cadet Nurse and the United States. The pledge is purely honorary, and inability or failure to fulfill it involves no break of legal obligations."

- "spearheading sophisticated psychiatric counseling for returning veterans and soldiers being cared for at the battle front." No evidence to support this claim. Even if it were documented it would not be relevant to the criterion. Additionally, no World War II group has been recognized under P.L. 95-202 beyond the date of August 15, 1945--end of actual hostilities. Events which occurred between August 16, 1945 and 1948 (CNC program terminated) would have little relevancy to recognition under P.L. 95-202.

HOW WAS THE GROUP UNDER MILITARY DIRECTION OR CONTROL WHEN THEY CONTRIBUTED TO THE SUCCESS OF THE MILITARY MISSION?

- "under direct military direction and control when they contributed to the success of the military mission, under the authorization of the Commander-in-Chief, Franklin Delano Roosevelt." The applicant attempts to draw a connection between a law signed by the President (almost all laws are signed by the President), and the fact that the President also serves as the Commander-in-Chief, thereby showing some type of military control. This conclusion is entirely incorrect and without basis. In actuality, the group (U.S. Cadet Nurse Corps) was NOT under military direction or control. The Corps was administered by the Public Health Service under the Surgeon General of the United States, with the U.S. Civil Service Commission acting as a clearing house for applicants. Only as a Senior Cadet (last six months of training) did some of the cadets have an opportunity to train in a military hospital. Training/working at a military hospital does not infer the individual or group was under military control or direction, as compared to that of a member of the Armed Forces. Ultimate responsibility still remained with the Public Health Service.

- "direct control was effected through the collective arm of all of the Federal branches of service: Army, Navy, Marines, etc.." No evidence to support this claim.

- "CNC was designed to meet essential military nursing needs." There is no evidence/documentation to support this statement. The response to this statement was addressed earlier in this paper.

- "the graduates of the CNC answered to the officer in charge." Graduates of the CNC are not relevant to the group application.

UNDER WHAT CONDITIONS WERE MEMBERS OF THE GROUP SUBJECT TO ARTICLE 15/NON-JUDICIAL PUNISHMENT AND COURTS-MARTIAL?

- CNC "were subject to Article 15/non-judicial punishment and court-martial guidelines as a result of their military affiliated status." Our research indicates the Cadet Nurses did not come under military regulations, discipline, or military justice. The CNC had no status under the Uniform Code of Military Justice.

HOW WERE MEMBERS OF GROUP NORMALLY DISCIPLINED? BY THE MILITARY OR BY CIVILIAN AUTHORITIES?

- The military had no jurisdiction for discipline. Any crimes committed by a Cadet Nurse would be handled by the civilian authorities. Any reason for dismissal of a Cadet Nurse would be referred to the Public Health Service for final action. The military did not directly dismiss a Senior Cadet Nurse.

WHAT WERE THE CONSEQUENCES OR PENALTIES FOR VARIOUS INFRACTIONS, FOR EXAMPLE, LEAVING ONE'S PLACE OF DUTY WITHOUT PROPER AUTHORITY?

- A military member for committing such an act is punished under the UCMJ. Punishment could range from loss of pay, reduction in rank, time in correctional custody, or a discharge from the service with less than an honorable discharge. The Armed Forces could not apply any of these options to a Senior Cadet Nurse. The appropriate service would provide notification to the Public Health Service of the problem with a cadet who would then take the appropriate action(s).

- The applicant makes reference to the WAVES and WACS, if dishonorably discharged by either branch were not eligible to enlist in the CNC. However, this is not relevant to the criterion.

WHO NORMALLY SUPERVISED THE MEMBERS OF GROUP AND PROVIDED THE DIRECTION AND TO WHAT EXTENT DID MILITARY OFFICIALS PARTICIPATE IN THIS SUPERVISION? (not a criterion in the current DODD 1000.20)

- "Cadet Nurses were under the direct supervision of chief nurse, and officers, of the Army, Navy or Marines Medical Department." The CNC training program was designed by the Public Health Service. Some Senior Cadet Nurses were completing a civilian designed training program at a military hospital. Overall supervision still belonged to the USPHS.

- This criterion was deleted in the 1989 revision to the DODD 1000.20 since it provided little insight into the uniqueness of a group. Under this criterion virtually any civilian would meet this criterion (Base exchange employees, cook in the chow hall, maintenance personnel, etc.). Additionally, a hospital makes use of numerous volunteer groups which would be under "direct supervision" of the military while in the hospital (American Red Cross, Candy Strippers, volunteers who come in to answer the telephone or sit at the information desk, etc.)

TO WHAT EXTENT WERE MEMBERS OF THE GROUP INTEGRATED INTO THE MILITARY ORGANIZATION AND STRUCTURE?

- The applicant provides no evidence to support the CNC integration into the military organization.

TO WHAT EXTENT DID THE MEMBERS OF THE GROUP LIVE AND WORK UNDER THE SAME CONDITIONS AS MILITARY MEMBERS? (not a criterion in the current DODD 1000.20)

TO WHAT EXTENT DID THE MEMBERS OF THE GROUP LOSE THEIR CIVILIAN IDENTITY?

- "Cadets were required to sign a 'Pledge of Commitment' form declaring their availability...." As stated earlier, this commitment did

not establish a contractual relationship between the Cadet Nurse and the United States--pledge was not binding.

- "received a 'certificate of membership' from the Federal Security Agency, U.S. Public Health Service, that included a serial number." The applicant provided no evidence to show a cadet nurse lost their civilian status. A cadet nurse remained a civilian the entire period of training.

- "Cadets were required to wear a para-military uniform and insignia in order to distinguish their status from the WAVES, WACS, and WASPS." As an aid to recruitment and to boost the morale of the Cadet Nurses, a special uniform was designed, the official "outdoor" uniform with the Cadet Nurse Corps insignia. This distinctive outdoor uniform was quickly selected for members of the CNC at a well publicized fashion show luncheon in New York City. Four prominent designers competed with their creations. Uniforms were issued to the Cadet Nurses but wearing the uniform was optional except for ceremonial occasions planned by the training institutions (The United States Cadet Nurse Corps, pg. 36).

- "had to comply with/conform to all military regulations while at work in the hospitals." The applicant provided no evidence to support this claim. The applicant may confuse the term hospital regulations with military regulations. How differently did a Senior Cadet Nurse training in a military hospital differ from one training in a civilian hospital?

- "Cadets were under the supervision of military personnel during the tenure of their service in the Corps." The applicant provided no evidence to support this claim. The CNC program and personnel were under supervision and control by the Public Health Service. The only military involvement occurred during the Senior Cadet Nurse Program, when a limited number of Senior Cadet Nurse's could receive training at a military hospital.

WHAT WAS THE EMPLOYMENT RELATIONSHIP OF THE GROUP TO THE MILITARY? FOR EXAMPLE, WERE THE MEMBERS OF THE GROUP CIVIL SERVICE CONTRACTED THROUGH A CIVILIAN COMPANY, OR HIRED IN SOME MANNER?

- "Congressional Act (Bolton Act) for the purpose of supplying a cadre of nurses for the armed service." The reconsideration application has narrowed the purpose of the Bolton Act to support her statement. The Bolton Act was to provide for the training of nurses for the armed forces, governmental and civilian hospitals, health agencies, and war industries.

UNDER WHAT CONDITIONS COULD MEMBERS OF THE GROUP RESIGN OR TERMINATE THEIR EMPLOYMENT RELATIONSHIP WITH THE MILITARY AND WHAT WERE THE CONSEQUENCE OF SUCH RESIGNATION OR TERMINATION OF EMPLOYMENT?

- "Members of the Cadet Corps were subject to termination only as a result of a prospective cadets inability to meet the evaluative criteria of the Corps." The application response to the criterion did not answer the question: could a cadet nurse resign? The answer is yes. Nearly 56,000 Cadet Nurses withdrew during the course of the program for reasons of homesickness, family obligations, or difficulty of the course, and some withdrew when the war was over.

TO WHAT EXTENT DID THE MILITARY ERECT ADMINISTRATIVE BARRIERS WHICH EITHER MADE IT DIFFICULT FOR MEMBERS TO RESIGN OR PREVENTED THEM FROM TERMINATING THEIR SERVICE?

- The applicant's response was not relevant to the question. Additionally, the applicant's statement is without evidence.

UNDER WHAT CONDITIONS WERE MEMBERS OF THE GROUP SUSCEPTIBLE TO BEING ASSIGNED TO COMBAT ZONES, AND OF SO ASSIGNED, HOW WERE SUCH ASSIGNMENTS MADE?

- The applicant's response discusses graduates of the CNC which is not relevant to the application. Further, the applicant states "in all cases, however, nursing staff assignments were determined by military demand." The applicant provided no evidence to support this claim.

TO WHAT EXTENT WAS ASSIGNMENT TO A COMBAT ZONE PART OF THEIR "CONTRACT" TO PROVIDE THE SERVICE THEY WERE HIRED TO DO?

- The applicant's response was not pertinent to the question. The response provided by the applicant was inaccurate. As mentioned earlier, the CNC "pledge" was purely honorary, and inability or failure to fulfill it involved no break of legal obligations.

WERE MEMBERS OF THE GROUP SENT INTO COMBAT ZONES BY CIVILIAN OR MILITARY AUTHORITIES?

- The applicant's response deals with "graduates" (who are not part of the CNC) and does not pertain to the group submitted for consideration under P.L. 95-202.

WERE THE MEMBERS OF THE GROUP "PROMISED" MILITARY STATUS BY MILITARY OR NATIONAL LEADERS AT THE TIME OF THEIR SERVICE?

- The applicant's response does not answer the question. In the massive nation-wide publicity campaign to recruit Cadet Nurses, the Cadet Nurse Corps message to potential recruits was: (1) Obtain the benefits of a free professional education, (2) nursing is a proud profession, and (3) render an essential wartime service to the Nation. Never was it suggested the Cadet Nurses had military status, although it was pointed out that, after graduation, the Cadets would have the choice of applying for military or civilian work.

TO WHAT EXTENT WERE MILITARY OR NATIONAL LEADERS TRYING TO INCORPORATE THE GROUP INTO THE MILITARY AT THE TIME?

- The application response to this criterion makes an erroneous assumption. The Name, "Cadet Nurse Corps," is not uncommonly associated with the Armed Forces, as in "Cadet" at West Point or the Air Force Academy, and a "Midshipmen" at the Naval Academy. But other names proposed were the Victory Nurse Corps, and the Student War Nursing Reserve. So it does not follow that the arbitrary selection of the name, "Cadet Nurse Corps," implies time spent in Federal Service. It is true, however, that it was felt that uniforms and insignia might appeal to young cadet nurses who might otherwise be attracted to other uniformed services as enlisted personnel. The uniform was in fact more of a novelty for recruiting purposes rather than a distinctive uniform of any of the Armed Forces.

WERE MEMBERS OF THE GROUP PREVENTED BY STATUTE FROM BEING MILITARY AT THE TIME?

- "The members of the U.S. Cadet Nursing Corps were trained as a para-military group." The applicant provides no evidence to support her claim the CNC was a "para-military group." A uniform and a flag does not

constitute such a group. Did the CNC have an organized hierarchy like the military? Did they salute each other? Did they carry equivalent rank similar to the military?

TO WHAT EXTENT DID THE MEMBERS OF THE GROUP RENDER THEIR SERVICE EXCLUSIVELY TO THE MILITARY?

- "all nurses were available for military service." This statement is incorrect. Despite the quotas established for Army hospitals, the number of cadets assigned to them varied. Early estimates indicated that 50 percent of the senior cadet nurses could be trained in Federal hospitals, but in practice, only 15 percent enrolled, and only 6.4 percent of these were assigned to military hospitals, even though it participated for only 20 of the 64 months the program was in operation as a result of the amendment to the Bolton Act..