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# The Frontier nursing service as an agent of change

Nancy Dammann

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WALDEN UNIVERSITY  
DISSERTATION APPROVAL

THE FRONTIER NURSING SERVICE AS AN

AGENT OF CHANGE

Nancy Damann

s/ Dr. Roy P. Fairfield      7/10/80  
Research Advisor              Date

s/ Dr. L. Richard Meeth      7/21/80  
Member, Review Committee      Date

s/ Dr. J. Bruce Francis      11/3/80  
Vice President for              Date  
Academic Affairs

s/ Dr. Stephanie Bennett      8/6/80  
Member, Review Committee      Date

s/ Bernard L. Turner      11/3/80  
President                          Date  
Walden University

ABSTRACT

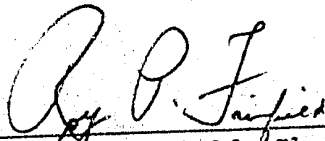
THE FRONTIER NURSING SERVICE AS AN AGENT OF CHANGE

by

Nancy Dammann

A.B., Smith College

M.J.S., Northwestern University, 1948



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Roy P. Fairfield, Ph.D., Advisor  
Coordinating Full Professor  
Union Graduate School  
Cincinnati, Ohio

A Dissertation Submitted in Partial Fulfillment of  
The Requirements for the Degree of  
Doctor of Philosophy

WALDEN UNIVERSITY

August 1980

## ABSTRACT

The purpose of this dissertation was to analyze the influence of the Frontier Nursing Service (FNS) on the area in which it operated. Mary Breckinridge founded the FNS in 1925 to demonstrate a method of delivering health care in an isolated rural area. She selected Leslie County in southeast Kentucky for its locale because of its isolation; there were no roads in the county and no licensed physicians.

The FNS program centered on nurse-midwives who provided health care from decentralized district clinics so situated that no family was more than an hour's horseback or jeep ride away. A hospital and physician backstopped the district midwives.

Apparently FNS did an excellent job of delivering health care. There have been no maternal deaths since 1952 and its infant mortality and communicable disease rates have been low. Presumably because of its emphasis on home health care, typical hospital stays have been shorter than the national average.

FNS appears to have had little impact outside of the immediate field of health. The nurses were well accepted and their advice followed on such matters as child care. But they were unable to persuade their patients to build latrines or otherwise improve sanitation. Government programs and

improved communications seem to have been the chief stimuli for change in the fields of economics, education and sanitation.

Breckinridge urged her nurses to avoid discussing and becoming involved in politics, religion or moonshining. FNS was, accordingly, no threat to the local power structure which may be one reason it was so well accepted. It also may explain why FNS had so little impact outside of the field of health.

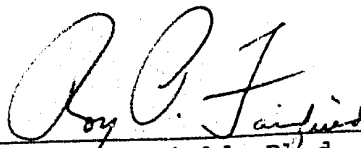
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FNS

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- The Hyden Hospital and Its Physicians
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## INTRODUCTION

In 1925 Mary Breckinridge founded the Frontier Nursing Service (FNS) in Leslie County, southeast Kentucky, to demonstrate a system of delivering health care through the nurse-midwife.

At that time there were no roads and no licensed physicians in Leslie County. The one-room schools were inadequate and most of the population semi-literate. Health care was provided by granny midwives and herb doctors, few of whom had more than six years of education.

Breckinridge's objectives, as stated in the Articles of Incorporation, were:

. . . . To safeguard the lives and health of mothers and children by providing and preparing trained nurse-midwives for rural areas in Kentucky and elsewhere where there is inadequate medical service; to give skilled care to women in childbirth; to give nursing care to the sick of both sexes and all ages; to establish, own, maintain and operate hospitals, clinics, nursing centers, and midwifery training schools for graduate nurses; to educate the rural population in the laws of health, and parents in baby hygiene and child care; to provide expert social services; to obtain medical, dental and surgical services for those who need them at a price they can afford to pay; to ameliorate economic conditions inimical to health and growth, and to conduct research toward that end; to do any and all other things in any way incident to, or connected with, these objects, and in pursuit of them, to cooperate with individuals and with organizations, whether private, state or federal, and through the fulfillment of these aims to advance the

cause of health, social welfare and economic independence in rural districts with the help of their own leading citizens.<sup>1</sup>

The FNS opened with a small clinic in Hyden, the county seat of Leslie County. By 1975 it included a 40-bed hospital, six district nursing centers staffed by five physicians and almost seventy nurses.

The study was an historical analysis of the relationship between Leslie County and FNS growth and development. The purpose was to analyze the influence of the Frontier Nursing Service on Leslie County and to ascertain if, how, and why it succeeded.

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<sup>1</sup>Articles of Incorporation of the Frontier Nursing Service, Article III.

## CHAPTER I

### DESIGN OF THE STUDY

The study utilized principles and processes of the historical method as outlined by Jacques Barzun and Henry F. Graff.<sup>1</sup> In brief, Barzun and Graff recommended that in studying each piece of evidence the researcher ask the fundamental questions:

Is this object or piece of writing genuine?  
Is its message trustworthy?  
How do I know?<sup>2</sup>

The author used three main categories of sources: FNS records, correspondence and publications; oral history interviews with local citizens and FNS personnel; and books and reports about Leslie County and the southern Appalachian region. The data from each source was checked against other sources, analyzed and synthesized into a chronological historical analysis.

Where possible the author used primary sources. The most frequently used materials were:

1. Breckinridge's correspondence and reports

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<sup>1</sup>Jacques Barzun and Henry F. Graff, The Modern Researcher, 3rd ed. (New York: Harcourt Brace Jovanovich, Inc., 1977), pp. 127-29.

<sup>2</sup>Ibid., p. 128.



2. FNS staff correspondence, reports and surveys
3. Minutes of the meetings held by the Executive Group, Executive Committee and Board of Governors of the Board of Trustees of the Frontier Nursing Service
4. Minutes of the Annual and General Meetings of the Frontier Nursing Service
5. Minutes of community district outpost center meetings
6. Vital statistics kept by the FNS records department
7. Formal interviews with staff, ex-staff and local people made for the FNS oral history project<sup>1</sup>
8. Formal interviews made for the Appalachian Oral History Project at Lees Junior College, Jackson, Kentucky, and Alice Lloyd College, Pippa Passes, Kentucky
9. Formal interviews made with staff, ex-staff and Leslie Countians by the author
10. Selected issues of the Frontier Nursing Service Quarterly Bulletin, published regularly since 1925; these included annual fiscal and statistical reports and staff articles
11. Reports and surveys about FNS written by visitors
12. Demographic and economic data collected by the Commonwealth of Kentucky, U. S. Census Bureau, University of Kentucky and Kentucky River Area Development Office
13. Southeast Kentucky studies published by the University of Kentucky, Department of Sociology, College of Agriculture
14. Academic reports and surveys concerning southern Appalachia

#### Scope and Limitations of the Study

The study encompassed the 1,000 square miles served by the FNS. This included Leslie County and portions of neighboring Clay and Perry Counties.

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<sup>1</sup>The FNS has almost completed an oral history of the Service funded by a 1978 Rockefeller Foundation grant.

The dissertation focused on FNS' influence on the area and made no attempt to analyze the medical procedures practiced by the staff. There was a minimum of material on the administrative and financial history of FNS.

The study covered the first fifty years of the Service (1925-75) only. For, in 1975 the new modern hospital opened. The following year a physician was appointed director and several outpost centers closed. The emphasis changed from a nurse-midwife directed home health care program to a physician-managed hospital-orientated system, little different from that found in almost any rural community of the United States. To include a description of this era would, the author believed, confuse the analysis of an otherwise unique institution.

## CHAPTER II

### BACKGROUND AND RELATED LITERATURE

Breckinridge's objective was to demonstrate a method of delivering health care in isolated, economically deprived areas through the nurse-midwife. She selected Leslie County for her demonstration because of its isolation and poverty. As she wrote in her autobiography, Wide Neighborhoods, if the work could be done there,

. . . it could be duplicated anywhere else in the United States with less effort. From the beginning I had the wish to do the work so well, and to keep such accurate records of it, that others would study it, be trained in its techniques, and then, in other remotely rural parts of our own and other countries, repeat the system we used. It would be possible to reach only a few thousand children directly, but hundreds of thousands of children could be reached because of us. Our inaccessibility was a priceless asset. None who wanted to copy our work could plead that it would be more difficult for them than it had been for us.<sup>1</sup>

In 1925 there were no roads within thirty miles of Hyden, horseback and mule team travel were the only modes of transportation. Supplies and mail bags took from two to five days to haul in from the nearest railroad point.

There were no state licensed physicians although there were several unregistered doctors with county licenses, one of

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<sup>1</sup>Mary Breckinridge, Wide Neighborhoods (New York: Harper and Brothers, 1952), p. 158.

whom was illiterate.<sup>1</sup> Of the fifty-three granny midwives Breckinridge interviewed prior to founding the Service none had any midwifery training, most were semi-literate. Their median age was sixty.<sup>2</sup>

Leslie County has remained economically deprived. In 1970 its only sizeable income was from coal, with agriculture and lumbering providing some minor income. The rocky, mountainous land was tired and eroded, communications inadequate and roads poor, particularly along the rocky creeks next to which many of the older people lived. Schools were closed one or two months every winter because the school buses could not navigate the icy creek roads.

In 1973 the median family income for Leslie County was \$3,517 as compared to \$9,590 for the nation and \$7,441 for the state.<sup>3</sup> Over half (55.32 percent) of its families lived below the poverty level.<sup>4</sup>

Medical work began the summer of 1925 with two nurse-midwives working out of a vacant house in Hyden. Within five years an administrative center, six outpost centers and a

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<sup>1</sup>Mary B. Willeford, Income and Health in Remote Rural Areas (Wendover, Kentucky: Frontier Nursing Service, 1932), p. 19.

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 116.

<sup>3</sup>Ralph J. Ramsey and Paul D. Warner, Kentucky County Data Book, Resource Development Series 16 (Lexington: University of Kentucky Cooperative Extension Service Department of Sociology, 1974), p. 52.

<sup>4</sup>Ibid., p. 58.

twelve bed hospital had been built with the cooperation of local citizens who contributed land, lumber and labor.

From the beginning the nurse-midwives provided health care from decentralized district clinics so situated that no family was more than an hour's horseback ride (five or six miles) away. A hospital and physician backstopped the district midwives. The nurse-midwives made regular prenatal and postpartum visits, assessed the families' health and social problems and encouraged improved sanitation and nutrition practices.

Since the late 1960s most babies have been born in the hospital and the nurse-midwife has expended the energy she formerly devoted to maternity cases on the health problems of growing children and the elderly.

#### Review of the Literature

Two major types of materials were reviewed; literature about the FNS and publications concerning Leslie County and the southern Appalachian region.

#### Books, Articles, Reports and Surveys About the FNS

The Frontier Nursing Service has attracted hundreds of visitors and been described in several books and numerous articles, most of which described FNS operations and paid relatively little attention to the area in which it worked.

Perhaps the book which gives one the best insights into the Service is Breckinridge's autobiography, Wide

Neighborhoods. Breckinridge died in 1965, yet her philosophy continued to guide the Service into the mid-seventies. It was impossible to understand the FNS without knowing something about her background and ideals, much of which she revealed in her book.

Breckinridge described in depth her philosophy and objectives in founding the Service. She hoped to make the FNS a model of health care which could be copied elsewhere. Since there was a worldwide shortage of physicians in rural areas, she utilized the nurse-midwife as the purveyor of health services using a physician for backup. She devoted a fascinating chapter to the Highlands and Islands Medical and Nursing Service in Scotland after which she modeled the Service. It was here she learned about the importance of community committees and decentralization.

Almost one quarter of the book concerned family background but she wrote only two paragraphs about her two marriages and neglected to include the name of her second husband. (She took back her maiden name following her divorce.)

A poignant chapter dealt with her two children, both of whom died in infancy. Their deaths led to her decision to devote the balance of her life to improving the health of children, and it was from this ideal that FNS developed.

She was the daughter of Clifton Rhodes Breckinridge, a congressman and minister to Russia, and the granddaughter

of John Cabell Breckinridge, vice president of the United States under James Buchanan. It was largely through her family name and connections that she raised the funds to operate the Service. She had a keen insight into the Appalachian culture, but in reading her book one felt it was written from the elitist noblesse oblige point of view.

Her romantic tendencies were reflected in a rather flowery style and frequent use of adjectives. "Great" was her favorite word; hence the book is full of great tides, great horses, great nurses, great depressions and great droughts.

Breckinridge's description of the growth and problems of the FNS was, as far as the author could ascertain by checking with old files, committee minutes and oral histories, completely accurate.

Several books for the general public have been written about the FNS. These include Clever Country,<sup>1</sup> a fictionalized account of life at one of the district centers, Nurses on Horseback,<sup>2</sup> an early non-fiction description of the Service, and Frontier Nurse,<sup>3</sup> a Breckinridge biography written for adolescents.

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<sup>1</sup>Caroline Gardner, Clever Country, Kentucky Mountain Trails (New York: Revell, 1931).

<sup>2</sup>Ernest Poole, Nurses on Horseback (New York: Macmillan, 1932).

<sup>3</sup>Katherine E. Wilkie and Elizabeth R. Mosely, Frontier Nurse (New York: Julian Messner, 1969).

An unpublished Ph.D. dissertation by a nurse, Helen Terpak, documented the administrative history of the FNS through 1971. The study contained descriptions of FNS organization and the work of the nurse-midwife, supported by statistics compiled from the service's records.<sup>1</sup>

Breckinridge wrote several articles during the twenties and thirties to publicize FNS' work and help raise money. She was very interested in improving the economy of east Kentucky. In an article for the Rotarian she said that she thought the problems of the Kentucky mountains should be considered in terms of the eighteenth century and suggested that

. . . the development of forests, fish and game, and local woodworking industries, as well as a playground for tourists, is the economic outlet for our people.<sup>2</sup>

A 1926 Survey Graphic article, "An Adventure in Midwifery," won a first place \$250 award in a "series of awards of public achievement" offered through Survey Associates by the Harmon Foundation.<sup>3</sup>

Perhaps because of a revived interest in the nurse-midwife, there were several articles about FNS in general and professional magazines during the seventies. A complimentary

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<sup>1</sup>Helen Terpak, "The Frontier Nursing Service, An Adventure in the Delivery of Health Care" (Ph.D. dissertation, University of Pittsburgh, 1972).

<sup>2</sup>Mary Breckinridge, "Where the Frontier Lingers," Rotarian (September 1935), p. 9.

<sup>3</sup>Mary Breckinridge, "An Adventure in Midwifery," Survey Graphic (October 1926), p. 25.



and beautifully illustrated Life article told of the expansion of the FNS nurse-midwives' roles to include treatment of childhood diseases, geriatric problems and common adult ailments.<sup>1</sup>

An American Journal of Nursing article by Barbara G. Schutt described FNS' new family nurse training program and the expanded role of the Service's nurse.<sup>2</sup>

Dr. Gertrude Isaacs, FNS education director, explained in a Clinical Obstetrics and Gynecology article the philosophy behind the Service's new family nurse course. FNS nurse-midwives, she said, had been specially trained to handle maternal and infant health problems. The aim of the family nurse training program was to provide additional training in common health problems so that they could extend their services to the whole family.<sup>3</sup>

Dr. W. B. Rogers Beasley described in "Coping with Family Planning in a Rural Area," how nurse-midwives persuaded their pregnant patients to adopt family planning. They used no fancy audio-visual techniques, just simple person to person teaching. Beasley believed that the program was

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<sup>1</sup>"Rebirth of the Midwife," Life, November 19, 1971, p. 51.

<sup>2</sup>Barbara G. Schutt, "Frontier's Family Nurses," American Journal of Nursing 72 (May 1972): 903-9.

<sup>3</sup>Gertrude Isaacs, "The Frontier Nursing Service-- Family Nursing in Rural Areas," Clinical Obstetrics & Gynecology 15 (June 1972): 394-407.

largely responsible for a 60 percent decrease in the FNS patient population's birthrate.<sup>1</sup>

There have been several survey and research reports written about the FNS which are discussed in some detail in the body of the report. In 1969 Booz, Allen and Hamilton, management consultants, evaluated the potential training role of the FNS in meeting health manpower needs for Kentucky. Booz, Allen and Hamilton reported severe shortages of physicians and nurses in Kentucky, particularly in the eastern mountainous section, and prophesied that it would worsen because of increasing specialization.

As a possible solution they recommended training a new type of health worker who would bridge the gap between the physician and the nurse and suggested that the FNS graduate midwifery school was remarkably suited to take on this responsibility.<sup>2</sup>

In 1974 a University of Wisconsin team headed by Frederick L. Golladay tested a research protocol for evaluating the work of the mid-level health worker on the FNS family nurse.

The team almost immediately discovered that the work of the FNS district nurse did not fit into their

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<sup>1</sup>W. B. Rogers Beasley, "Coping with Family Planning in a Rural Area," Obstetrics-Gynecology 41 (January, 1974), pp. 153-159.

<sup>2</sup>Booz, Allen and Hamilton, "Family Nurse Practitioners in Kentucky," (Wendover, Kentucky: Frontier Nursing Service, Inc., 1969).

pre-established computer code and was, in fact, almost impossible to code. For, much of the work of the FNS nurse was something indefinable which the researchers eventually termed "socializing."<sup>1</sup>

The overall findings of the study were that the FNS nurse was involved in many more tasks than other family nurse practitioners and that she devoted more time to socializing.<sup>2</sup>

The FNS was one of seven institutions funded by a Primex grant from the Department of Health, Education and Welfare (HEW) to evaluate its family nurse training program. The 170-page Primex report submitted to HEW by FNS in May, 1977, contained a wealth of statistical information about the FNS educational program as well as other aspects of FNS work.

The body of the paper described in detail the family nurse training program and reported that most of its graduates had gone on to jobs in rural areas. The appendices and tables contained data on such subjects as types of illnesses treated by FNS, length of hospital stay, and births and deaths.<sup>3</sup>

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<sup>1</sup>Fredrick L. Golladay, et al., "A Non-Experimental Health Services Research Protocol - Some Illustrative Studies of the Frontier Nursing Service," (Madison, Wisconsin: Health Economics Research Center, University of Wisconsin, 1974, mimeographed), p. 25.

<sup>2</sup>Ibid., pp. 28-30.

<sup>3</sup>Frontier Nursing Service, Inc., Primex-Family Nurse Training Program in Rural Areas, Prepared for National Center for Health Services Research, Hyattsville, Maryland, PB-267 484 (U. S. Department of Commerce National Technical Information Service, 1977).

## Publications about Leslie County

Leonard W. Roberts, professor of English at Pikeville College, Pikeville, Kentucky, has written two books about the folk songs and tales of Leslie and adjoining counties, Sang Branch Settlers<sup>1</sup> and South-from Hell-fer-Sartin.<sup>2</sup> (Hell-fer-Sartin is a short, rugged Leslie County creek.) The books feature collections of folk songs and tales introduced by a sympathetic picture of mountain life in the 1950's.

Two local authors have written genealogical histories of Leslie County which in addition to family material provide useful background on early schools, churches and other social institutions.<sup>3</sup>

An angry book by Thomas N. Bethell told of the 1970 Hurricane Creekmine disaster in which thirty-eight men were killed. Bethell laid much of the blame for the explosion on bureaucratic fumbling and lack of proper inspections. He also provided an insight into the operation of small coal mines, of which Leslie County has many.<sup>4</sup>

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<sup>1</sup>Leonard W. Roberts, Sang Branch Settlers (Austin: Published for the American Folklore Society by the University of Texas Press, 1974).

<sup>2</sup>Leonard W. Roberts, South from Hell-fer-Sartin. 1st Appalachian Heritage Edition (University of Kentucky Press, 1955; Berea, Kentucky: The Council of Southern Mountains, Inc., 1964).

<sup>3</sup>Mary T. Brewer, Rugged Trail to Appalachia (Viper, Kentucky: Graphic Arts Press, 1978); Sadie Wells Stidham, Trails Into Cutshin Country (Corbin, Kentucky: By the Author, 1978).

<sup>4</sup>Thomas N. Bethell, The Hurricane Creek Massacre (New York: Perrenial Library, Harper & Row, 1972).

In 1930-31 Mary B. Willeford, one of FNS' original nurse-midwives studied Leslie County for her Ph.D. dissertation to consider whether the population could obtain adequate medical care from their own resources. She reported a total per capita spendable income for Leslie County of \$81 as compared to \$580<sup>1</sup> for the nation and concluded the population lacked adequate funds to support medical care. She saw no hope of developing the natural resources sufficiently to provide the necessary funds.<sup>2</sup>

In 1952 Mary Ann Still Quarles, a former FNS social worker, wrote a masters degree thesis comparing Camp Creek, an isolated area of Leslie County and Stinnett, a small community adjacent to the highway. It was an era of change. Largely because of new highways connecting Leslie with adjoining counties, coal mines were opening and lumbering prospered.

Quarles found marked differences between the two areas. Camp Creek was reached by a creek bed road impassable during much of the year. Camp Creek residents grew their own food. The men worked in nearby sawmills, at the neighboring FNS headquarters or on their own small farms. The one room school was inadequate, the women seldom left the area. Most of the Stinnett men worked in the mines or saw mills. The women had modern kitchens, the food was store bought, so the

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<sup>1</sup>Mary B. Willeford, Income and Health in Remote Rural Areas (New York: Frontier Nursing Service, 1932), p. 55.

<sup>2</sup>Ibid., p. 80.

women had time for gossiping and shopping. The children attended an excellent missionary school.<sup>1</sup>

Publications concerning Southern Appalachia

A great deal has been written about the Appalachian area which FNS serves, sometimes termed the Southern Highlands and generally called the Southern Appalachian Region.

The author found most useful several regional surveys published at periodic intervals. The first, The Southern Highlander and His Homeland, by John C. Campbell, is generally considered a classic and has been widely quoted in many books about Appalachia. First published in 1921 by the Russell Sage Foundation, The Southern Highlander and His Homeland included statistics on literacy, health, population and religion. In a foreword to the 1969 edition, Rupert Vance described the book as the one scientific project fit to serve as a benchmark for later research.<sup>2</sup>

The health problems described by Campbell were very similar to those found by Breckinridge in her 1923 feasibility study of Leslie County. These included crowded housing, lack of sanitation and no available physicians, nurses or hospitals.<sup>3</sup>

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<sup>1</sup>Mary Ann Stillman Quarles, "A Comparison of Some Aspects of Family Life Between Two Areas of Leslie County, Kentucky" (M.S. thesis, University of Kentucky, 1952).

<sup>2</sup>John C. Campbell, The Southern Highlander and His Homeland (The Russell Sage Foundation, 1921; reprint ed., The University Press of Kentucky, 1969), p. vii.

<sup>3</sup>Ibid., pp. 195-226.

A 1967 study, The Southern Appalachian Region, A Survey, presented, the authors claimed, the most comprehensive survey of the southern Appalachians ever undertaken. Financed by the Ford Foundation, the survey was carried out by eleven universities and included well documented reports on such subjects as health, religion, education, mining, agriculture and demography.

An unusual feature was a study of the attitudes, opinions and aspirations of the people, which proved very similar to those of Americans elsewhere. The main problems reported by the researchers were a population which had grown more rapidly than the region's resources, and educational and religious institutions far below the national standards.

The authors found that the health of the people in the area were on the average about the same as in the nation. The major illness was tuberculosis which was 50 percent higher than the nation as a whole.<sup>1</sup> The FNS was described at some length as an organization which provided excellent health care for one small part of the area.<sup>2</sup> However, as a whole, the report stated, the region suffered from insufficient hospitals, physicians and nurses.

The writers suggested that the solution to the area's problems might be guided outmigration. They also recommended

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<sup>1</sup>Thomas R. Ford, ed., The Southern Appalachian Region-- A Survey, Kentucky Paperbacks (Lexington: University of Kentucky Press, 1967), p. 242.

<sup>2</sup>Ibid., p. 239.

implementing family planning programs and strengthening schools and other social institutions.<sup>1</sup>

Rupert Vance, one of The Southern Appalachian Region's authors, suggested that the survey be updated every decade. This was not done, but an attempt was made in Appalachia in the Sixties, published by the University of Kentucky, to assemble first hand reports of the area which together presented a picture of Appalachia during the decade. Many of Appalachia's most reputable authors were included in the collection which featured useful background statistics and information on population, outmigration, economics and new government programs.<sup>2</sup>

Since FNS was managed by outsiders, the author was interested in the numerous references to the unpopularity of the foreigners, especially journalists, who flocked to the area during the sixties. The middle class in particular resented reporters because they disliked being lumped with hillbillies.

A poignant chapter, "A Stranger with a Camera," by Calvin Trillin, described the murder of a Canadian film maker. The victim, chief of a five-man film crew, had been photographing a poverty stricken miner and his family at their home near Whitesburg, Kentucky. The team had obtained signed

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<sup>1</sup>Ibid., pp. 297-298.

<sup>2</sup>David S. Walls and John B. Stephenson, Editors, Appalachia in the Sixties (Lexington: The University Press of Kentucky).



release forms from all of the subjects in exchange for \$10 gratuities. There was no trouble until the owner of the miner's shack arrived and with no warning started shooting.

Harry Caudill, a Whitesburg lawyer, and Tom Gish, editor of the local paper, agreed that this was a typical reaction to journalists. The poor people, many on welfare, no longer cared; they'd lost their pride and submitted phlegmatically to the questions and picture taking of prying strangers. But the middle class, of which the shack's owner was a member, were infuriated.<sup>1</sup>

During the next few years several very similar collections of articles, essays and statistical data on southern Appalachia were published. Often the same articles appeared in two or three of these books. Typical examples were: Change in Appalachia, published in 1970;<sup>2</sup> Appalachia: Its People, Heritage and Problems, published in 1974;<sup>3</sup> and Appalachia: Social Context Past and Present, published in 1976.<sup>4</sup>

<sup>1</sup>Calvin Trillin, "A Stranger with a Camera," The New Yorker (April 29, 1969) reprinted in Appalachia in the Sixties, pp. 195-201.

<sup>2</sup>John D. Photiadis and Harry K. Schwarzweller, editors, Change in Rural Appalachia (Philadelphia: University of Pennsylvania Press, 1970).

<sup>3</sup>Frank S. Riddell, Editor, Appalachia: Its People, Heritage, and Problems (Dubuque: Kendall/Hunt Publishing Company, 1974).

<sup>4</sup>Bruce Ergood and Bruce E. Kuhre, Editors, Appalachia: Social Context Past and Present (Dubuque: Kendall/Hunt Publishing Company, 1976).

Prepared to orientate outsiders, Teaching Mountain Children featured the usual reprints of articles by such authorities as James Brown and Marian Pearsall. Its section on Appalachian schools, however, was enlightening although extremely critical.

Schools were describe . as political, their teachers poorly trained and provincial.<sup>1</sup> Neither the students nor community showed much respect for education as evidenced by the low tax rates and the fact many parents made little effort to keep their children in school.<sup>2</sup>

Rural and Appalachian Health presented a selection of papers delivered at a conference on the same subject, including a paper by Dr. Gertrude Isaacs of FNS about the family nurse. Two of the most interesting articles by Dr. David H. Loeff and Dr. G. David Steinman of the University of Kentucky Medical Center described Appalachian attitudes towards health and barriers to health care.

A psychiatrist, Dr. Loeff, held regular mental health clinics in Clay County on the edge of FNS territory. He reported that he accomplished more on home visits than in his office, because these reinforced the personal approach

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<sup>1</sup>Peter Schrag, "The School and Politics," Appalachian Review (Fall, 1966) reprinted in David N. Mielke, ed., Teaching Mountain Children (Boone, N.C.: Appalachian Consortium Press, 1978), p. 176.

<sup>2</sup>James R. Ogletree, "Appalachian Schools - A Case of Consistency" (Appalachian Center, West Virginia University, 1968, revised, 1977) reprinted in Teaching Mountain Children, p. 188.

needed for the family's acceptance of a worker's suggestions.<sup>1</sup> Dr. Loeff felt that his program succeeded because it operated through public health nurses who lived in the community and were known and accepted by the families and who understood their problems.<sup>2</sup>

Dr. Steinman described the difficulties of keeping physicians in east Kentucky. He cited a University of Kentucky study which listed the most important reasons physicians left the area as follows: wife dissatisfied with isolation and small town life; dissatisfaction with public schools; and the feeling that excessive demands on practice with inadequate resources resulted in deteriorating standards of care.<sup>3</sup>

As one possible solution to the physician shortage Dr. Steinman and University of Kentucky associates established the Clover Fork demonstration center at Evarts, Kentucky, which utilized family nurse practitioners backstopped by two physicians in much the same manner FNS pioneered in 1925. The clinic was backed up by a regional hospital with an emergency room and full complement of specialists.<sup>4</sup>

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<sup>1</sup>Robert L. Nolan and Jerome L. Schwartz, eds., Rural and Appalachian Health (Springfield, Ill.: Charles C. Thomas, publisher, 1973), p. 14.

<sup>2</sup>Rural and Appalachian Health, p. 8.

<sup>3</sup>Ronald M. Enroth, "Patterns of Response to Rural Medical Practice and Rural Life in Eastern Kentucky," (Unpublished Ph.D. thesis, University of Kentucky, 1967), cited in Rural and Appalachian Health, p. 60.

<sup>4</sup>Ibid., p. 61.

Appalachia's Children by David H. Loeff, a clinical child psychiatrist, has been high on the FNS recommended reading list for family nurses and midwifery students since its 1971 publication. Loeff managed a University of Kentucky mental health research project in eastern Kentucky (Clay, Jackson, Lee and Owsley Counties) for the period 1964-70.<sup>1</sup>

Loeff reported that almost 20 percent of his cases were children with school phobias. He found the infants were loved, protected and well trained in basic relations. But as they grew older, he wrote,

. . . appropriate developmental lines involving a balance between gratification of needs and delays, limits, and controls are not readily maintained by lower-class families in eastern Kentucky.<sup>2</sup>

Loeff recognized the influence of the environment on the mountaineer's character and wrote sensitively about the region, community programs and health problems.

Two nationally-acclaimed works about Appalachia were published in the sixties: Yesterday's People by Jack E. Weller, a Presbyterian minister, and Night Comes to the Cumberlandlands by Harry M. Caudill, an east Kentucky lawyer.<sup>3</sup> Both were full of generalities and neither adequately footnoted,

<sup>1</sup>David H. Loeff, Appalachia's Children (Lexington: The University Press of Kentucky, 1971).

<sup>2</sup>Ibid., p. 57.

<sup>3</sup>Jack E. Weller, Yesterday's People (Lexington: University of Kentucky Press, 1965); Harry M. Caudill, with a foreword by Stewart L. Udall, Night Comes to the Cumberlandlands (An Atlantic Monthly Press Book, Little, Brown and Company, paperback, 1962).

nevertheless, each contributed to an understanding of the mountaineer.

Weller identified cultural traits of the southern Appalachian which he claimed failed to prepare them to live in a technological society. These were individualism, traditionalism, fatalism, failure to seek action, fearlessness and personal orientation.<sup>1</sup> He argued that until the mountaineers rid themselves of these traits they would continue to live in poverty. The book has been criticized as simplistic and based on experience in only one small area of West Virginia.<sup>2</sup>

John R. Stephenson objected to Weller's apparent assumption that Appalachia has only one class, the poor class, and no upward movement. In his community study he identified at least three classes and found it difficult to list traits common to all.<sup>3</sup>

With a foreword by the Secretary of Interior, Night Comes to the Cumberlands was influential in bringing the problems of the area to the attention of the nation. The book mainly concerned the evil practices and sad aftereffects of

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<sup>1</sup>Ibid., pp. 28-57.

<sup>2</sup>Stephen L. Fisher, "Victim-Blaming in Appalachia: Cultural Theories and the Southern Mountaineer" (prepared for delivery at the 1975 Annual Meeting of the Southern Political Science Association, Nashville, Tennessee, November 6-8); reprinted in Appalachia: Social Context Past and Present, p. 139.

<sup>3</sup>John B. Stephenson, Shiloh, A Mountain Community (Lexington: University of Kentucky Press, 1965), p. 34.

coal mining in southeast Kentucky. Caudill also described at some length welfare programs and problems. The poorly footnoted angry book appeared exaggerated, but the author checked many of Caudill's specific statements against other sources and found no factual errors.

Twelve years later Caudill wrote The Watches of the Night with updated information on coal mining, welfare and government programs.<sup>1</sup> He devoted an entire chapter, "The Rise and Fall of Education," to the corrupt county school systems.<sup>2</sup>

Colonialism in Modern America: The Appalachian Case outlined a new approach to understanding Appalachia.<sup>3</sup> The editors argued that scholars such as Weller, Stephenson, Marian Pearsall and Ford had attributed regional problems to deficiencies of the people and their culture, an interpretation often termed the culture of poverty model.<sup>4</sup> They felt that the true explanation for the region's poverty lay in the colonization of the area by absentee coal mine and lumbering company owners. The editors termed this interpretation the "colonialism model." The admittedly biased book contained

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<sup>1</sup>Henry M. Caudill, The Watches of the Night (Boston: An Atlantic Monthly Press Book, Little, Brown & Company, 1976).

<sup>2</sup>Ibid., pp. 204-227.

<sup>3</sup>Helen Matthews Lewis, Linda Johnson and Donald Askins, eds., Colonialism in Modern America: The Appalachian Case (Boone, N.C.: The Appalachian Consortium Press, 1978).

<sup>4</sup>Ibid., p. 13.

a collection of articles on coal, the "hillbilly" and regional government programs which one writer felt were beginning to be utilized to "control the natives."<sup>1</sup>

The War on Poverty brought a horde of writers to the area during the sixties, several of whom wrote journalistic studies of mountain communities. One of the best was Stinking Creek by John Fetterman about a small community in Clay County.<sup>2</sup> Fetterman told his story through the voices of the people he interviewed with a minimum of editorializing and some excellent photographs. His description of Brown's Hollow where most of the residents were on welfare gave as good a picture of the welfare syndrome as the author has read.

Similar books of this genre are The Hollow by Bill Surface, a depressing view of an east Kentucky family of ten,<sup>3</sup> and The Longest Mile by Rena Gazaway, who lived for a few months in east Kentucky.<sup>4</sup>

Several books were written about coal mining, including We Be Here When the Morning Comes about union struggles

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<sup>1</sup>Tom Gish, editor of the Mountain Eagle in Whitesburg, Kentucky, quoted in Colonialism in Modern America, p. 25.

<sup>2</sup>John Fetterman, Stinking Creek (New York: E. P. Dutton & Co., Inc., 1967; A Dutton Paperback, 1970).

<sup>3</sup>Bill Surface, The Hollow (New York: Coward-McCann, Inc., 1971).

<sup>4</sup>Rena Gazaway, The Longest Mile (New York: Doubleday & Company, 1969).

in "Bloody Harlan"<sup>1</sup> and Voices From the Mountains, a collection of songs, oral history interviews, photographs and poetry about the life of the miner.<sup>2</sup>

Two oral history collections, Our Appalachia<sup>3</sup> and Hillybilly Woman,<sup>4</sup> contained interviews with men and women from southeast Kentucky.

There have been countless magazine and newspaper articles about the area, most of a superficial nature. T. S. Hyland's Life article about Leslie County published December 20, 1949, titled "The Fruitful Mountaineers" and subtitled "The Chronic Baby Boom of a Kentucky County, denounced as 'a biological joy ride to hell' rolls merrily along to replenish the nation," is still much alive in the memories of Leslie Countians, and has deeply prejudiced many of them against outsiders.<sup>5</sup>

The University of Kentucky's Cooperative Extension Service Department of Sociology has published numerous

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<sup>1</sup>Byan Wooley, photographs by Ford Reid, We Be Here When the Morning Comes (Lexington: The University Press of Kentucky, 1974).

<sup>2</sup>Guy and Candie Carawan, ed., Voices From the Mountains (New York: Alfred A. Knopf, 1975).

<sup>3</sup>Laurel Shackelford and Bill Weinberg, eds., Donald R. Anderson, photographer, Our Appalachia American Century Series (New York: Hill and Wang, 1977).

<sup>4</sup>Kathy Kahn, Hillbilly Woman (New York: Doubleday & Co., Inc., 1973).

<sup>5</sup>Because of its effect on Leslie County attitudes towards outsiders, the article has been discussed in some detail in the body of the report.



monographs and reports on East Kentucky. These have reported community studies and covered such subjects as outmigration from east Kentucky, high school student attitudes towards their futures and levels of poverty and provided invaluable background facts on the area. Relevant reports have been listed in the bibliography.

## CHAPTER III

### MARY BRECKINRIDGE, THE FOUNDER OF FNS

What was the woman like who founded the internationally famed health organization, the Frontier Nursing Service (FNS)?

As a young woman Mary Breckinridge was a beauty. Short and rather stocky with a sad strong face and piercing gray eyes, she had unlimited energy and continued working until the day before her death at the age of eighty-four.

Breckinridge was a spiritual woman, a woman of integrity and deep compassion. She was extremely intelligent, well read and in her chosen field fifty years in advance of her times. She was a spellbinding public speaker and greatly respected by the Kentucky mountaineers with whom she worked. Her staff had mixed feelings. She was a hard taskmaster and could be almost cruel to the lazy and careless. But she was fair and understanding to those in trouble.

#### Early Years

Breckinridge founded the FNS in 1925 and remained its director for almost forty years. She was born into a distinguished southern family February 17, 1881.<sup>1</sup> (Breckinridge was

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<sup>1</sup>Birthday listed in The Holy Bible (New York American Bible Society, 1874), with cover embossed with the names of

her maiden name, which she took back following a divorce.) Her great-great grandfather, John Breckinridge, was Attorney General for President Jefferson and her grandfather, John Cabell Breckinridge, was Vice-President under President Buchanan, also Major-General of the Confederacy and its last Secretary of War.<sup>1</sup>

Breckinridge spent her early years in Washington where her father, Clifton Rhodes Breckinridge, represented Arkansas in the U.S. Congress. Summers were spent with her aunt, Mrs. James Lees, at her country estate near High Bridges, New York. It was here Breckinridge acquired her first interest in the Kentucky mountains. For, Lees was a wealthy and charitable woman, and spent much of her fortune educating Kentucky children. As a child Breckinridge loved to listen to letters from the hundreds of young men Lees had put through school and college.<sup>2</sup>

At the age of thirteen Breckinridge accompanied her father to Russia, to which he had been appointed American Minister by President Cleveland.

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her parents, "Clifton R. Breckinridge, Kate C. Breckinridge, November 21, 1876."

<sup>1</sup>Interview with Kate Pruitt, Breckinridge's niece, 14 November 1971, cited by Helen Terpak, "The Frontier Nursing Service: An Adventure in the Delivery of Health Care" (Ph.D. dissertation, University of Pittsburgh, 1972), p. 251.

<sup>2</sup>Mary Breckinridge, Wide Neighborhoods (New York: Harper & Brothers, Publishers, 1952), pp. 3-4.

Most of her schooling was by governesses and tutors. Her formal education consisted of two years at Rosemont-Dezaley in Lausanne, Switzerland, followed by an academic year at Miss Low's school in Stamford, Connecticut.<sup>1</sup>

The years after school were filled with family gatherings, riding and hunting.<sup>2</sup> An Arkansas writer described her during this period as a popular society girl with a fondness for dancing all night.<sup>3</sup>

On November 21, 1904 Breckinridge married Henry Ruffner Morrison, a young attorney at Hot Springs, Arkansas, who died within a year of appendicitis.<sup>4</sup> It had been a happy marriage and Breckinridge was heartbroken. She later wrote concerning her bereavement:

The question I had to face was what to do with the years of life that lay before me. To stay with my parents, the subject of their endless solicitude, was impossible. I wanted to give care, not to receive it. I read "Lycidas," "Adonais," and "In Memoriam." In the last of these elegies, which I think I read hundreds of times, I found a verse that, with the change of one word, seemed applicable to me:

"Arise, and get thee forth and seek  
Service for the years to come . . ."<sup>5</sup>

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<sup>1</sup>Ibid., pp. 20-29.

<sup>2</sup>Ibid., pp. 36-40.

<sup>3</sup>Caroline Gardner, "Frontier Nurse Chieftain," Arkansas Gazette Magazine 11 (October 27, 1935):1.

<sup>4</sup>Entry in family Bible of parents, Clifton R. and Kate C. Breckinridge.

<sup>5</sup>Breckinridge, Wide Neighborhoods, p. 51.

In 1907 Breckinridge entered St. Luke's Hospital School of Nursing in New York City and graduated in 1910.<sup>1</sup>

She spent the following year caring for her sick mother, and on October 8, 1912 married Mr. Richard Ryan Thompson,<sup>2</sup> a college professor.<sup>3</sup>

The couple had two children, a son, Clifton Breckinridge Thompson (Breckie), born January 12, 1914 and a daughter, Polly, born prematurely two years later. Polly lived only six hours, then just four days after his fourth birthday Breckie died of an abdominal infection.<sup>4</sup>

The Thompsons lived in Eureka, Arkansas, some miles from a hospital. Breckinridge always believed that had she been nearer competent medical care her son would have survived.<sup>5</sup>

She was devastated by Breckie's death and spent the next months writing a detailed account of his life which she published privately.<sup>6</sup> She recalled the comment of her son's

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<sup>1</sup>Ibid., pp. 52-58.

<sup>2</sup>Entry in family Bible of parents.

<sup>3</sup>FNS oral history project interview (hereinafter referred to as FNS interview) with Helen E. Browne, retired FNS director. (Note: The names of the interviewers and the dates of the interviews are listed in Sources Consulted.)

<sup>4</sup>Breckinridge, *Wide Neighborhoods*, pp. 60-73.

<sup>5</sup>FNS interview with Helen E. Browne.

<sup>6</sup>Mary Breckinridge Thompson, Breckie--His Four Years (Washington: By the Author, 1918).

friend, that although he was always falling down he said he could fly,

. . . It was because I wanted other children to feel that they could fly--as well as fall--that we have the Frontier Nursing Service today.<sup>1</sup>

Shortly afterwards her marriage was dissolved and she took back her maiden name. So ended all attempts for a normal family existence with the children she so badly wanted. Breckinridge devoted the balance of her life to planning, organizing and administering the Frontier Nursing Service.

When she wrote her autobiography, a friend urged her to describe the human tragedy which led to the founding of the FNS.<sup>2</sup> But Breckinridge found writing about her personal life extremely difficult and refused to mention the name of either husband in her book.<sup>3</sup>

#### Getting Ready

Shortly after her divorce Breckinridge departed for Europe with the American Committee for Devastated France (CARD) and spent 1919-21 as volunteer director of Child Hygiene and District Nursing.<sup>4</sup>

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<sup>1</sup>Breckinridge, Wide Neighborhoods, pp. 73-74.

<sup>2</sup>FNS files, Letter from Gerald Heard to Mary Breckinridge dated November 30, 1949.

<sup>3</sup>FNS files, Letter from Mary Breckinridge to Gerald Heard dated December 28, 1949.

<sup>4</sup>Breckinridge, Wide Neighborhoods, pp. 77-100.

It was in France that Breckinridge met the British nurse-midwife and decided that she was the best qualified professional for rural health.<sup>1</sup>

She later credited much of her success with the FNS to her experience in France, where, she wrote:

I learned that it is wise to begin small, take root, and then grow. I also formed a habit, indispensable in new undertakings, of learning all I could about native customs so that new things could be grafted on the old. Finally, I gained a respect for facts--old and new--with the knowledge that change is not brought about by theories.<sup>2</sup>

Breckinridge spent the 1922-23 academic year at Teacher's College, Columbia University, studying public health psychology, psychiatry, nursing education and statistics.<sup>3</sup>

While at Columbia she wrote a detailed memorandum to the American Child Health Association suggesting an infant and maternal health demonstration project in Appalachia, specifically Leslie County, Kentucky. She recommended that the program tie in with the Louisville School of Public Health and become a demonstration and field center for training public health nurses.

The program, she suggested, should be supported by the Government. Women suffered as much as men did in war, she wrote, "maternity is the young woman's battlefield. Her pain is terrible and her wounds are often mortal." Legislation

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<sup>1</sup>Ibid., p. 93.    <sup>2</sup>Ibid., p. 109.    <sup>3</sup>Ibid., p. 114.

supporting maternal and child health, she said, was just as important as veterans assistance and pork barrel laws.<sup>1</sup>

The American Child Health Association replied that they were impressed by the vision and thoroughness of her proposal but were not yet ready to support such a program.<sup>2</sup>

Undeterred, Breckinridge spent the summer of 1923 in southeast Kentucky making a survey of native midwives and the families they served in Leslie, Knott and Owsley Counties. She wrote up her findings immediately and published them nine-teen years later in the Quarterly Bulletin of the Frontier Nursing Service.<sup>3</sup>

As she wrote in the survey report introduction:

It revolted my sense of decency that we should neglect our children and give eighteenth-century care to women in childbirth in remotely rural America. I knew that we could work out a plan for reaching such women and children but first I wanted the facts.<sup>4</sup>

She selected the Kentucky mountains for her investigation for three reasons:

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<sup>1</sup>Mary Breckinridge, "Memorandum Concerning a Suggested Demonstration for the Reduction of the Infant and Maternal Death Rate in a Rural Area of the South," February 11, 1923.

<sup>2</sup>Letter from American Child Health Association, signed Courtney Dinwiddie (writing illegible), General Executive, dated February 23, 1923.

<sup>3</sup>Mary Breckinridge, "Midwifery in the Kentucky Mountains, An Investigation in 1923," Quarterly Bulletin of the Frontier Nursing Service, Inc. (hereinafter referred to as Quarterly Bulletin) 17 (Spring 1942):29-53.

<sup>4</sup>Ibid. pp. 29-30.



1) She felt "the problem of unattended childbirth and neglected childhood would be found there in an acute form."<sup>1</sup>

2) Breckinridge had a great respect for the Kentucky state health officer, Dr. Arthur T. McCormack, and believed that if she could prepare a well worked out plan based on the survey he would support her.

3) Her family had been Kentuckians for generations and the money upon which she lived was inherited from her great-aunt, a native Kentuckian. It seemed right to her that these funds be spent in Kentucky.<sup>2</sup>

To find the facts Breckinridge rode approximately 650 miles on thirteen different horses and three mules, often spending nights in the homes of friendly mountaineers. Her hosts rarely permitted her to pay for food and lodging, but usually accepted fifty cents for the feed and care of her horse. The houses were frequently one or two room cabins, but Breckinridge was usually given a bed to herself. Some nights she spent at settlement schools or in the six or eight room houses of larger landowners.<sup>3</sup>

The hardest part of the survey was finding the midwives, many of whom lived near the heads of small rough creeks. To find one midwife sometimes took five or six hours of riding.<sup>4</sup>

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<sup>1</sup>Ibid., p. 30.    <sup>2</sup>Ibid.    <sup>3</sup>Ibid.

<sup>4</sup>Breckinridge, Wide Neighborhoods, pp. 116-18.

At that time most of the mountaineers lived in lonely shacks and cabins along the rivers and up the creeks and branches, walled in by steep mountains. A few of the men worked in the mines, but most remained on their farms. The surrounding mountains were covered with poplar, black walnut, oak and beech, which made a fine feeding ground for hogs, and which the men lumbered in the winter, then rafted down the swollen rivers in the spring.

Corn, grown on small strips of rocky soil, was the principal crop. The game had long since been shot away, so corn pone, potatoes and pork were the mountaineer's standard diet.

Breckinridge interviewed fifty-three midwives ranging in age from thirty to ninety. Their median age was 57 and their average age 60.3.<sup>1</sup> Their homes varied from windowless one-room log cabins to modern frame houses, but most were poor and inaccessible. At least sixteen looked exceptionally neat and clean, although six were windowless log cabins. Ten of the fifty-three were filthy as were their mistresses, the rest fitted in between.<sup>2</sup>

Breckinridge reported that only twelve could read and write, four could read but not write, and she judged doubtful the claims of three that they could read.<sup>3</sup>

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<sup>1</sup>Breckinridge, "Midwifery," p. 36.

<sup>2</sup>Ibid., p. 37.    <sup>3</sup>Ibid.

Most had taken up midwifery after their families were raised in order to help neighbor women. Their fees ranged from \$2.00 to \$4.00 and included no postpartum and virtually no prenatal visits. When the birth was over, the baby bathed and dressed, the midwife departed for good.<sup>1</sup>

The midwives Breckinridge interviewed had received no training, although a few had attended conferences held by nurses under the State Bureau of Child Hygiene. However, as Breckinridge pointed out, the nurse instructors were not midwives and therefore could not teach how to look for abnormalities.<sup>2</sup>

Breckinridge found numerous unlicensed practitioners who called themselves doctors, two of whom could not read and write. These illiterate doctors she considered the least harmful as they made use of old-fashioned herbs rather than store-bought drugs.<sup>3</sup>

To illustrate the harm done by unlicensed practitioners Breckinridge told of a case handled by an old midwife, Aunt Tilly. The baby was "crossed" in utero and Aunt Tilly could reach neither head nor foot. After trying all day and night she sent for two "doctors." For the next twenty-four hours all three worked unsuccessfully to deliver the patient. Finally, after over fifty hours of labor, they sent to the county seat for a physician who "could cut." The young mother

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<sup>1</sup>Ibid., p. 38.      <sup>2</sup>Ibid., p. 41.

<sup>3</sup>Breckinridge, Wide Neighborhoods, p. 116.

died before he reached the home. If, Breckinridge said, Aunt Tilly had sent for the physician immediately instead of wasting time with the two "doctors," the woman might have lived.<sup>1</sup>

Most of the women Breckinridge visited only vaguely remembered how many mothers they had delivered. Many denied losing either a mother or child.<sup>2</sup>

The most frequent complication mentioned by the midwives was hemorrhage. Treatments included a variety of teas made from black gum bark mixed with sweet apple tree bark, rattleweed root and sometimes from soot. An ax laid blade up under the bed was another common remedy.<sup>3</sup>

The midwives made numerous examinations, usually with greased hands. Breckinridge reported that when she asked one midwife if she washed her hands she replied, "Cou'se I don't wash 'em--I greases 'em."<sup>4</sup> As Breckinridge reported,

The care given the baby varies very little among them. Nearly all dose it with castor oil, many add catnip tea as well, some give sugared milk and some the milk of another woman. All cut the cord with unboiled scissors and tie it with several strands of thread twisted together. Most of them grease the navel with lard or castor oil and then put a scorched rag over it to revive a baby, some "work hit's arms and legs" but generally they put it in water.<sup>5</sup>

Breckinridge feared that many thoughtful persons, whose support she needed, would wonder whether the eighteenth

<sup>1</sup>Breckinridge, "Midwifery," p. 11.

<sup>2</sup>Ibid., p. 41. <sup>3</sup>Ibid., p. 49. <sup>4</sup>Ibid., p. 45.

<sup>5</sup>Ibid., p. 52.

century conditions she described were attributable to isolation or a low native intelligence. She needed facts to answer this question so sought the professional help of a friend, Ella Woodyard, Ph.D., of the Institute of Educational Research, Teachers College, Columbia University.<sup>1</sup>

Woodyard, an expert on mental tests, gave the Stanford Revision of the Binet-Simon test to sixty-six children aged six to ten, selected more or less at random. Of those tested one had an Intelligence Quotient (IQ) of 135, and one was a high-grade imbecile, with an IQ of 82 (sic). The median IQ was 99.5. If the high-grade imbecile was excluded, since such a child would not be found in a typical school group, the median IQ would have been 102.<sup>2</sup>

Woodyard felt that results indicated

. . . a median intelligence somewhat higher than is general in the United States, partly because the original California children on whom Dr. Terman standardized the test were slightly above the average for the country as a whole, and partly because the language used in the tests is not the dialect of the mountain children, who still use many Middle English words in their speech.<sup>3</sup>

Woodyard also administered the Otis and Haggerty development tests to some four hundred pupils. She found that children of eight years of age were practically the norm for that age, children of eleven years about one year retarded, and children of fourteen about two years retarded. She concluded "that the native capacity is average, but the

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<sup>1</sup>Ibid., p. 30.    <sup>2</sup>Ibid., p. 31.    <sup>3</sup>Ibid.

environment does not stimulate the ability sufficiently to bring it to its best possible maturity."<sup>1</sup>

Breckinridge was impressed by the caliber of the Owsley County officials and physicians she met while making her survey. So with the support of the physicians she drafted a proposal for a Children's Public Health Service for the county. Its annual \$16,300 budget could, she suggested, be jointly financed by the county, the Shepherd-Turner Act (federal funds administered by the state), churches and the American Child Health Association.<sup>2</sup>

She was confident she could make the program succeed because she felt she understood the "old and conservative form of society with all the intricacies of civil war and post war complications supervened," where she would work. "I know I can put it across in Kentucky and probably anywhere in the South."<sup>3</sup>

Dr. Annie S. Veech, M.D., however, the director of Kentucky's State Board of Health's Bureau of Child Hygiene, turned down Breckinridge's proposal as impractical. Breckinridge immediately withdrew her application for American Child Welfare Association assistance since she knew the association

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<sup>1</sup>Ibid.

<sup>2</sup>FNS files, "Memorandum, Outline for a Demonstration of a Children's Public Health Service in Owsley County, Kentucky," which accompanied letter dated October 20, 1923, signed by Mary Breckinridge to Miss Crandall at the American Child Welfare Association (carbon copy), p. 6.

<sup>3</sup>FNS files, Mary Breckinridge letter dated October 20, 1923.

could not support a project which the state had not approved. She wrote the association that she was relieved not to receive state backing because she felt Dr. Veech and her bureau were overly cautious and would slow the work.<sup>1</sup>

There were no graduate midwifery schools in the United States, so in the fall of 1924 Breckinridge left for England to study midwifery at the British Hospital for Mothers and Babies in London.<sup>2</sup> After completing the four-month program she crossed to Scotland to study the Highlands and Islands Medical Service headed by Sir Leslie MacKenzie. She chose the Scottish service because of its economic and social similarities to eastern Kentucky.

Located in a barren, thinly populated and inaccessible area, the Highlands and Islands Medical Service featured outlying centers staffed by salaried Queen's nurses with graduate training in public health, district nursing and midwifery. Medical centers headed by physicians with some training in obstetrics and pediatrics served several nursing centers, and rural hospitals serviced larger areas.

Local volunteer committees set annual patient fees ranging from two shillings (about fifty cents) to ten

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<sup>1</sup>FNS files, carbon copy of letter to Miss Crandall, American Child Health Association, from Breckinridge, written aboard S.S. American en route to England, October 20, 1923.

It is interesting to note that Breckinridge makes no reference to her unsuccessful attempts to obtain backing from the state and American Child Health Association in her autobiography.

<sup>2</sup>Breckinridge, Wide Neighborhoods, pp. 122-30.

shillings covering a year's nursing care for the entire family. An added charge was made for a nurse-midwife's services. The difference between patient fees and the actual cost was financed by private donations and government grants. It was this system Breckinridge decided to adapt for the Frontier Nursing Service.<sup>1</sup>

From Scotland she returned to England for postgraduate work as a certified midwife. Then, while vacationing in Derbyshire she met Sister Adeline Cashmore, an anchoress (nun) who became a major force in her life and her spiritual advisor,

Somewhat against her will Breckinridge had called on the anchoress as a courtesy to her sister Maud Cashmore, the matron of the British Hospital for Mothers and Babies. Seven years earlier the anchoress had given up social work to live in a cell of the Church of All Saints in York and divide her time between prayer for others and acting as sacristan.

Breckinridge wrote of the meeting, "There came into the church the loveliest woman I think I ever met, smiling and happy, with hands outstretched to greet me and a sort of white light coming from her that could be felt and almost seen."

They talked for two hours and Breckinridge wrote, "She is a mystic and thinks that prayer is the channel by means of which the human is brought in touch with the divine."<sup>2</sup>

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<sup>1</sup>Ibid., p. 132.      <sup>2</sup>Ibid., pp. 153-56.



During her second visit with the anchoress Breckinridge found herself talking about her private life, particularly Breckie's death. Breckinridge later described this session in detail to a close friend, Margaret Gage.<sup>1</sup>

Sister Adeline told Breckinridge that her child was alive and waiting for her, and she need not feel this terrible grief because she would be reunited with him in her sleep. The anchoress explained, "You are with your child every night, but you don't remember when you wake up."

This was a great comfort to Breckinridge who told the anchoress, "You know, ever since Breckie died I have almost as if it was a jagged rock in my chest and in my heart and I feel it all the time and it's always with me and I have this awful weight of grief."

Sister Adeline looked at Breckinridge with a penetrating and loving look and said, "Many people have that with grief, will you give it to me?"

Breckinridge said yes and after that never felt the terrible grief again. Breckinridge asked the anchoress what she would do with it. The anchoress said, "I will pray and it will pass, I have it for you now."

Breckinridge considered Sister Adeline her spiritual advisor and although they only met four times they corresponded regularly. As Gage described the relationship, Breckinridge was the active, she didn't have much time for prayers,

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<sup>1</sup>FNS interview with Margaret Gage.

Sister Adeline was the contemplative, and she told Breckinridge, "Don't think you have to go into long meditations or long prayers, I'll do the praying for the Frontier Nursing Service."

Gage reported that Breckinridge often said "she never could have made the Frontier Nursing Service without Sister Adeline and her support in prayer and in the letters she wrote and the advice she gave."<sup>1</sup>

Breckinridge was forty-four years old when she first met the anchoress. She had completed her postgraduate work and finally felt ready to start her ambitious program. She later explained:

It took a child archangel, my son, and a saint, my anchoress, to get enough power into me to accomplish anything. What is amazing is that with all of that to go on, I have stumbled so much, and have accomplished so much less than should have been done.<sup>2</sup>

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<sup>1</sup>Ibid.

<sup>2</sup>Mary Breckinridge letter to Gerald Heard, Santa Monica, California, December 28, 1949 (carbon copy).

## CHAPTER IV

### THE EARLY DAYS, 1925-35

The Beginning  
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## CHAPTER IV

### THE EARLY DAYS, 1925-35

The first decade of the FNS was a period of rapid development, achieved despite a cruel drought and national depression. The FNS built a hospital and six outpost centers; established statistical, social welfare and administrative offices, and organized national fund raising committees.

#### The Beginning

The Kentucky Committee for Mothers and Babies

He shall gather the lambs with his arm and carry them in his bosom, and shall gently lead those that are with young.<sup>1</sup>

Isaiah 40:11

Breckinridge returned to the United States in January, 1925. She spent the next five months enlisting the support of professional and personal friends and relatives, and on May 28, 1925, launched the Kentucky Committee for Mothers and Babies at the Capitol Hotel in Frankfort, Kentucky.<sup>2</sup>

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<sup>1</sup>This is the motto of the Frontier Nursing Service.

<sup>2</sup>"The First Meeting," Quarterly Bulletin of the Kentucky Committee for Mothers and Babies I (June, 1925):2. (Hereinafter referred to as Quarterly Bulletin.)

The committee of nearly seventy persons included southeast Kentucky community leaders, teachers, physicians, ministers, educators, politicians, lawyers, journalists and businessmen.

Dr. Alexander J. A. Alexander of Spring Station was elected chairman; Mrs. S. C. Henning of Louisville and Judge Edward O'Rear of Frankfort, vice-chairmen; C. N. Manning of the Security Trust Company, Lexington, treasurer, and Mrs. W. H. Coffman of Georgetown, secretary.<sup>1</sup>

"Statistics show that our mortality from childbirth is higher than any other civilized country," Breckinridge argued in her introductory speech. Yet, she added,

We continue to supply eighteenth century obstetrics to our young mothers, and have lost more women in childbirth in our history as a nation than men in the field of battle.<sup>2</sup>

Breckinridge reported that the Kentucky State Board of Health had granted permission to begin the work in Leslie County. She explained that a mountain county had been selected for the demonstration, not because the problem was peculiar to the mountains, but because:

1. The mountains presented an intensification of the problem and it was more sporting to begin there.
2. The native population in the mountains had a very high average of ability and was of the greatest possible value to the nation . . . .

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<sup>1</sup>Ibid.

<sup>2</sup>Minutes of the First General Meeting of the Kentucky Committee for Mothers and Babies, May 28, 1925. (Hereinafter referred to as Minutes of General Meeting.)

3. The picturesque appeal of the mountains would draw a more ready response in getting the work under way.<sup>1</sup>

The committee agreed that the nurse-midwife would offer midwifery, nursing and public health services from special nursing centers. At Breckinridge's suggestion they appointed two American nurses already studying midwifery in London at a salary of \$150 per month, the median salary recommended by five prominent nursing groups. Each nurse was to be provided a horse and its upkeep, a place to live, a month's annual vacation and after a year's service a salary increment of ten dollars per month.<sup>2</sup>

The committee also provided for: a baseline survey to ascertain birth and death rates; accurate records; medical consultation and hospital care; the legal and professional status of the nurse-midwife; the establishment of a local committee with reciprocal membership with the central committee, and the organization of an executive committee.<sup>3</sup>

Breckinridge agreed to underwrite the program for three years. She was certain that once a beginning had been made her friends would volunteer donations.<sup>4</sup>

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<sup>1</sup>"The First Meeting," Quarterly Bulletin I (June, 1925):2.

<sup>2</sup>Minutes of the General Meeting, May 28, 1925.

<sup>3</sup>Quarterly Bulletin I (June, 1925):5.

<sup>4</sup>Breckinridge, Wide Neighborhoods, p. 161.

The Service was incorporated in October, 1925. In 1928 the organization's name was changed to the Frontier Nursing Service to make possible a wider field of fund raising and work. Its object was defined at that time:

To safeguard the lives and health of mothers and children by providing and preparing trained nurse-midwives for rural areas in Kentucky and elsewhere, where there is inadequate medical service; to give skilled care to women in childbirth; to give nursing care to the sick of both sexes and all ages; to establish, own, maintain and operate hospitals, clinics, nursing centers, and midwifery training schools for graduate nurses; to educate the rural population in the laws of health, and parents in baby hygiene and child care; to provide expert social service, to obtain medical, dental and surgical services for those who need them at a price they can afford to pay; to ameliorate economic conditions inimical to health and growth, and to conduct research towards that end; to do any and all other things in any way incident to, or connected with, these objects, and, in pursuit of them, to cooperate with individuals and organizations, whether private, state or federal; and through the fulfillment of these aims to advance the cause of health, social welfare and economic independence in rural districts with the help of their own leading citizens.<sup>1</sup>

The first summer was spent surveying Leslie County and forming local committees. Dr. Arthur McCormack, chief of the State Bureau of Health, had persuaded Breckinridge that the FNS would be unable to prove the value of the nurse-midwives unless it had accurate birth and death statistics. He feared that because of its inaccessibility there might be many unreported births and deaths in Leslie County. The State Bureau of Vital Statistics provided the forms and agreed to do the analysis.

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<sup>1</sup>Amended Articles of Incorporation of the Frontier Nursing Service, Article III.

Through Sir Leslie MacKenzie, Breckinridge hired Bertram Ireland who had done similar surveys in Scotland. "Ireland of Scotland," as she was immediately named, realized that it would be impossible to cover the 376 square mile county alone so recruited Zilpha Roberts, a Leslie County teacher to help.<sup>1</sup>

#### Leslie County in 1925

The Leslie County which Ireland surveyed was years behind the rest of the country in economics, transportation, education and amenities.

Calvin Coolidge was president and it was a prosperous era for most of the country. Transportation was beginning a period of rapid development; there were 10,000 Ford dealers in the nation, airline travel was growing in popularity and the first commercial service between Detroit and Chicago was inaugurated. U.S. refrigeration sales reached 75,000. In the field of medicine the Menninger clinic opened its group practice for the mentally ill in Topeka, Kansas, birth control was endorsed by the American Medical Association. The Scopes "monkey" trial and the death of Floyd Collins in a West Kentucky cave were among the leading news stories.<sup>2</sup>

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 161.

<sup>2</sup>James Trager, A Year-by-Year Record of Human Events from Prehistory to the Present (New York: Holt, Rinehart and Winston, 1979), pp. 832-40.



Mountainous Leslie County, on the other hand, had no public transportation, no automobiles and the only roads were creek beds which doubled as wagon tracks and were impassable several months a year.<sup>1</sup> Hyden, the county seat, had a population of 313.<sup>2</sup> Hazard (population 4,300),<sup>3</sup> the nearest sizeable town, was about thirty miles away, as was the nearest railroad.

Schools were one room affairs to which children walked from one to five miles. They closed in the winter when the creek beds froze and again in the fall to release children for "pulling fodder." There was only one high school in the county and few children went beyond the eighth grade.<sup>4</sup> Teaching standards were low. One typical young woman began teaching after only eight years of schooling plus six months of normal school. She was eighteen and paid \$50 per month.<sup>5</sup>

Leslie County had only one physician, Dr. J. H. Baker, who was paid \$95.50 by the county fiscal court for jail and pauper care.<sup>6</sup> The nearest hospital was in Hazard.

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<sup>1</sup>FNS interview with Frank Bowling, retired surveyor.

<sup>2</sup>Breckinridge, "Midwifery," p. 32.

<sup>3</sup>Kentucky Deskbook of Economic Statistics (Frankfort: Kentucky Department of Commerce, 1975), p. 11.

<sup>4</sup>FNS interview with Tempe Young, elderly housewife.

<sup>5</sup>FNS interview with Sophie Couch, elderly housewife.

<sup>6</sup>Summary of Minutes of Leslie County Fiscal Court, April 24, 1925.

Most persons relied on unlicensed doctors, granny midwives and herb salesmen for medical treatment.<sup>1</sup>

Because of incomplete reporting, health statistics for Appalachia were meaningless. However, 1916 census figures did indicate that Appalachia had an unusually high rate of typhoid fever, 28.3 deaths per 100,000 compared to 15.6 for the nationwide rural population.<sup>2</sup> Other common diseases for Appalachia reported in the 1916 census were measles, hookworm and tuberculosis.<sup>3</sup>

There were few jobs, most families scratched out a living on small infertile farms. Barter was the major form of economy, very little cash exchanged hands.

A forestry survey made in 1932 by two graduates of the Yale School of Forestry indicated that less than ten percent of Leslie County's land was arable.<sup>4</sup> Original settlers had farmed the relatively rich bottom land, but as the land wore out and the population increased, many moved up the hollows and attempted to scrape a corn crop from the

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<sup>1</sup>Breckinridge, "Midwifery," pp. 29-53.

<sup>2</sup>U.S. Census, 1916, "Rural Death Rates for the Mountain Regions of Six Southern Highland States" quoted in John C. Campbell, The Southern Highlander and His Homeland (The Russell Sage Foundation, 1921, reprinted by the University Press of Kentucky, 1969), p. 209.

<sup>3</sup>Ibid., p. 212

<sup>4</sup>Julie Lee and Richard D. Stevens, "A Forest Survey of Leslie County and the Red Bird River Section of Clay County, Kentucky," Quarterly Bulletin VII (Spring 1932):32.

steep mountain slopes, in the process seriously eroding the land. They raised corn, hogs, which ran loose in the mountains, chickens, sheep and garden vegetables, and traded the surplus for salt, sugar, coffee and other staples.<sup>1</sup>

During the summer farmers rose at about 4 A.M. and hoed in the fields until 8 P.M. with a short break for a noontime dinner. Women hauled water, gardened, washed clothes in cold mountain streams and cooked from dawn to dusk. Families were large, often with eight to twelve children.<sup>2</sup>

Children were put to work as soon as they could toddle, watching the "least one," helping with the hoeing, gardening and fetching kindling. One farm woman described her childhood as a long round of chores.

We got up around 4:30 and did housework. Then I fed chickens, helped feed the hogs and even fed the mule. After breakfast we'd go to the fields and we'd hoe corn like it was almost straight up and down. We'd stay in the fields until about noon then mother and I would go back to cook dinner. Then back to the fields until 3:30 or 4 and then chores would begin all over again. We'd milk the cows, feed the chickens, feed the hogs and the mules.<sup>3</sup>

Social events consisted mainly of workings, (when neighbors gather to help with a project such as raising a

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<sup>1</sup>FNS interviews with Leslie County old timers: Della Gay, Roe Davidson and Tempe Young.

<sup>2</sup>FNS interviews with old timers: Annie Witt and Tempe Young.

<sup>3</sup>FNS interview with Florence Burke, elderly Leslie County housewife.

barn), church and graveyard preachings. People met at each other's home for bean stringings and stir-offs (crushing sugar cane into sorghum). When the work was finished, there was food and sometimes dancing.

There were few churches so services were held in private homes or schools whenever a preacher was in the area, usually once or twice a month. Preachers were mainly fundamentalist with scant education. One Leslie Countian said her father, a Baptist minister, had not gone beyond the second grade. Although he couldn't read newspapers or magazines, "You couldn't stall him on a word in the Bible," she said.<sup>1</sup>

The dead were buried within twenty-four hours, since embalming was not available. Neighbors made the casket and burial clothes, and dug the grave. There was a short service at the home, and flowers made of crepe paper were often placed on the grave. Then, in August or September when the crops were in, a graveyard meeting would be held, sometimes with six or seven preachers. Seats were built near the grave and lunch served.<sup>2</sup>

The further up the creeks the smaller the homes. Many were one or two room cabins with no windows. There was no running water and often no outhouses. Five to ten people

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<sup>1</sup>FNS interview with Annie Witt, elderly housewife.

<sup>2</sup>Ibid.

often crowded into one or two rooms at night, all windows and doors were sealed tight. It was no wonder, Campbell wrote, that respiratory and other diseases spread rapidly through the area.<sup>1</sup>

However, in the fertile bottomlands and settlements there were numerous well built five and six room houses, for, popular myth to the contrary, not all mountaineers lived crudely.<sup>2</sup>

Most Leslie Countians knew little of current events. Radio had not reached the area and few subscribed to or read newspapers and magazines.

There were exceptions. In Hyden, the county judge, several lawyers and teachers subscribed to Lexington and Louisville papers. Whenever something important happened, townspeople gathered at the post office to hear subscribers read out loud a description of the event. One woman told of going to the post office every day during Floyd Collins' incarceration in a west Kentucky cave to learn if he had been rescued.<sup>3</sup>

#### The Birth and Death Survey

Ireland and Roberts took all summer to survey Leslie County and then they needed the help of Freda Caffin and

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<sup>1</sup>Campbell, The Southern Highlander, p. 196.

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 118.

<sup>3</sup>FNS interview with Sadie Stidham, retired teacher and author of Trails into Cutshin County (self published, 1975).

Edna Rockstroh, the first FNS nurse-midwives, to complete the assignment.

The main problem was the time it took to reach on horseback the scattered population and interview every home and 1,645 families.<sup>1</sup> Then too it was uphill work collecting data covering a fourteen-year-period from people who had not yet learned to be time conscious. Calendars, marriage lines, diaries and birth certificates were virtually non-existent. There were no burial permits. If the interviewers were lucky, the information was recorded in the Bible, but more frequently it was jotted down on a scrap of paper and stored in an old box secreted in the depths of a trunk. When there were no written records, Ireland and her assistants spent hours probing and jogging family memories.<sup>2</sup>

The summer of 1925 was hot and dry. Corn was burned up, the creeks and wells dry. Yet, despite their hardships and the long probing questions, the mountaineers treated the interviewers with unfailing kindness. Not once, Ireland wrote, could she recall an instance of anything but "consideration, patience and helpfulness."<sup>3</sup>

When the mountaineers learned there was a chance of increasing the number of nurses in the county, "we were

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<sup>1</sup>"The Survey," Quarterly Bulletin I (October 1925):5.

<sup>2</sup>"Miss Ireland's Report," Quarterly Bulletin I (October 1925):9.

<sup>3</sup>Ibid.

almost embarrassed with offers of land and timber and workers if only we would establish a nursing center 'right here on this creek.'"<sup>1</sup>

Ireland concluded her report to the Kentucky Committee for Mothers and Babies with a note of urgency.

It was obvious that malnutrition, anaemia, hookworm, tuberculosis, typhoid and other diseases have to be contended with all the time, that serious accidents happen fairly frequently, and that there is immense need for more general knowledge on the subject of hygiene and sanitation. Leslie County is blessed with invaluable material resources; its people are possessed of unique hereditary advantages. In many ways, time has passed them by. That cannot persist. The outer world is encroaching; the automobile is approaching; the railroad is near; the mail is more frequent. The people of Leslie County are aware of all this and only too anxious to cooperate with the Kentucky Committee for Mothers and Babies.<sup>2</sup>

The investigators discovered ten percent more births than had been reported during the fourteen years Kentucky had been a part of the U.S. registration area, and seventeen percent more deaths.<sup>3</sup>

#### The Leslie County Branch Committee

While Ireland surveyed the county, Breckinridge crisscrossed the area enlisting leading citizens to form a strong local committee "through whom, not for whom, the state group functions."<sup>4</sup>

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<sup>1</sup>Ibid., p. 7.

<sup>2</sup>Ibid., p. 11.

<sup>3</sup>Breckinridge, Wide Neighborhoods, p. 163.

<sup>4</sup>Mary Breckinridge, "An Adventure in Midwifery," Survey Graphic (October 1926), p. 26.

One of the first Leslie Countians Breckinridge met was Judge L. D. Lewis. He introduced her to key citizens with whom she made a great hit. As Judge Lewis' daughter explained, "She had this friendly, warm way about her that people just accepted her immediately. And you know the mountain people are not ready to accept outsiders, you have to prove yourself to them."<sup>1</sup>

That summer an epidemic of serious dysentery ran rampant and hit particularly hard youngsters in their second summer. The scourge was so bad that Breckinridge carried two tiny catheters in her saddle bags for colon irrigations.

After finishing treatment she talked to the mother and any neighbors who had assembled about how to care for the sick babies and what to feed well infants to prevent them from becoming ill. The fact that she had helped their children made the women willing to listen, Breckinridge believed.

She told the women to feed their children baked potatoes and boiled eggs rather than frying these foods, as was their custom and suggested that although tomato juice was good for youngsters, the cucumbers which were often fed them were highly indigestible.<sup>2</sup>

Before beginning regular nursing services, Breckinridge had to acquire basic supplies including typhoid and

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<sup>1</sup>FNS interview with Mary Biggerstaff, former Leslie Countian.

<sup>2</sup>Breckinridge, Wide Neighborhoods, pp. 164-65.



diphtheria serum, smallpox vaccine, worm medication, croup kettles, hypodermic needles, baby scales, lanterns for the barn and fire screens. These items had to be hauled thirty miles by mule wagon from Krypton, the railroad spur of the Louisville and Nashville railroad.<sup>1</sup>

The summer's work climaxed August 22 with the inauguration of the Leslie County Branch Committee with ninety-two members representing twenty-two communities. Thirty-five members attended the first meeting held at the Hyden courthouse.

Breckinridge later wrote:

There was none of the blase indifference of those who roll to committee meetings in limousines. The district court was adjourned in our honor, the judge, taking part in the proceedings, and one of our women members rode all day to be present, with her baby over one arm.<sup>2</sup>

The committee passed a series of resolutions providing that the Leslie County branch would have reciprocal membership with the Kentucky committee, that there would be district committees in territories served by the nurse-midwife, and that there would be a five dollar midwifery fee and one dollar subscription for every householder who used or planned to use the service.<sup>3</sup>

<sup>1</sup>Ibid., p. 165.

<sup>2</sup>Breckinridge, "An Adventure in Midwifery," p. 26.

<sup>3</sup>"Resolutions," Quarterly Bulletin I (October 1925): 15-17.

Another task completed during the summer of 1925 was the publication of the first edition of the Quarterly Bulletin edited by the director. The Bulletin serves to this day as a means of keeping committee members, donors, medical and nursing professionals informed of FNS activities.

#### The District Centers

The first center opened in Hyden on September 1, 1925 in a two-story plumbless dwelling rented from the Presbyterian school. The staff included Breckinridge and two nurse-midwives. Although there were no administrative personnel, careful records were maintained from the beginning.

The demand for medical treatment began almost at once. Although the two nurse-midwives were helping with the survey and not soliciting patients, 233 persons made 531 visits to the clinic during the first month. Twenty confinements were booked, of which four were delivered by the end of the month.<sup>1</sup>

That fall the FNS sent the first of a long line of seriously ill patients to cooperating hospitals in Louisville, Lexington and Cincinnati. These included a badly burned infant, a diabetic and an accident case. The patients were carried thirty or more miles on horseback to the railroad spur at Krypton, then on one of the railroad passes

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<sup>1</sup>"The First Centers of Nurse-Midwifery," Quarterly Bulletin I (October 1925):12.

generously furnished by the Louisville and Nashville railroad, taken by overnight train rides to the hospital.<sup>1</sup>

In the meantime, work began on the district center at Wendover four-and-a-half miles from Hyden, which was also to serve as Breckinridge's home and administrative headquarters.

Breckinridge first spotted the land while making her midwifery survey two years earlier and determined to build her home there.

. . . I thought I had never seen anything lovelier than the lay of the land with its southern exposure facing the great North Mountain. When I raised my eyes to towering forest trees, and then let them fall on a cleared place where one might have a garden, when I passed some jutting rocks, I fell in love.<sup>2</sup>

But to acquire it or any land in Leslie County proved a problem. According to Ed Morgan, a Wendover neighbor, nobody wanted to sell Breckinridge land at a reasonable price. Morgan thought some people hoped to gyp her and others didn't want anything to do with her, although they later changed their minds. She had almost decided to give up and start her program in Arkansas when Taylor Morgan, Ed's father, agreed to sell her thirteen acres "real cheap" because it would be good for the neighborhood.<sup>3</sup>

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<sup>1</sup>"Special Cases," Quarterly Bulletin I (February 1926):4-7.

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 121.

<sup>3</sup>FNS interview with Ed Morgan, retired miner and farmer.

The deal was settled the summer of 1925 and contractors were brought in from Hazard to install the plumbing. Most of the work on the three story log cabin was done by local men; the logs, mainly chestnut, poplar and ash came from land a mile above Wendover.<sup>1</sup>

It took two-and-a-half days to haul supplies by mule wagon from the railroad. Water and snow, soaked on the mountain, slid on the house, and floods washed the logs down the river.

Nevertheless, by December, the roof of the big house, as it has always been called, was on. So Breckinridge decided to hold a huge Christmas party to which she invited everyone in the county.

She sent circulars to friends asking for clothes and money, a custom still followed. The ladies of the Hyder committee helped with ham baking and made tons of bread. A wash boiler full of cocoa was prepared and toys were stacked under the tree.

It was bitterly cold and the river barely fordable, so only about five hundred people came to the party, which also served as a dedication of the center.<sup>2</sup>

This was the first of the Christmas parties, which became traditional for all outpost centers. At that time

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<sup>1</sup>Ibid.

<sup>2</sup>Breckinridge, Wide Neighborhoods, pp. 178-79.

Christmas did not mean much to most Leslie County families. The toys and "store bought" decorations at the FNS parties were the first that most children ever saw.<sup>1</sup>

Wendover was habitable by the Spring of 1926. With four bedrooms, downstairs offices, a large kitchen and dining room, the big house boasted two out of the five bath tubs in Leslie County. Often people dismounted at Wendover just for the luxury of a tub bath.<sup>2</sup>

For nearly three years Wendover served as a cottage hospital (a small hospital without a resident medical staff), and overflowed with sick people and women whose homes were deemed unsuitable for confinements.

By September, 1926, the FNS had under its care 139 babies and 215 toddlers and had arranged with Dr. James K. Stoddard, who had moved into the county, for monthly pediatrics clinics. The nurses had begun Red Cross training for school girls in home hygiene and the care of the sick, and started typhoid and diphtheria immunization programs.

Two nurses spent four nights, a day's horseback ride away, at Maggards Branch of Cutshin, where there was a typhoid epidemic, innoculating ninety-six persons. They also took water samples and advised on sanitary precautions.<sup>3</sup>

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<sup>1</sup>FNS interviews with Sadie Stidham, retired teacher, and Jessie Sheppard, elderly housewife. Sheppard attended the first Wendover Christmas party.

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 187.

<sup>3</sup>"In the Field--The Three Centers," Quarterly Bulletin II (October 1926):4.

Money flowed in from friends and relatives, and Breckinridge began making fund-raising trips. On one of her early trips she persuaded Mrs. Draper Ayer, a distant cousin, to finance the construction of the first outpost nursing center, the Jessie Preston Draper Memorial Nursing Center at Beech Fork.

A twelve-mile ride from Wendover, the Beech Fork center was built in 1926 at the request of forty local citizens, each of whom had pledged his or her support. Many gave a day's labor or more. One man contributed 112 square feet of oak lumber; others trees and stone for the foundation.<sup>1</sup>

Since there were no trained builders in the area, Breckinridge ordered a ready-built house to be shipped to Pineville in Bell County and then hauled by mule thirty-two miles to Beech Fork.

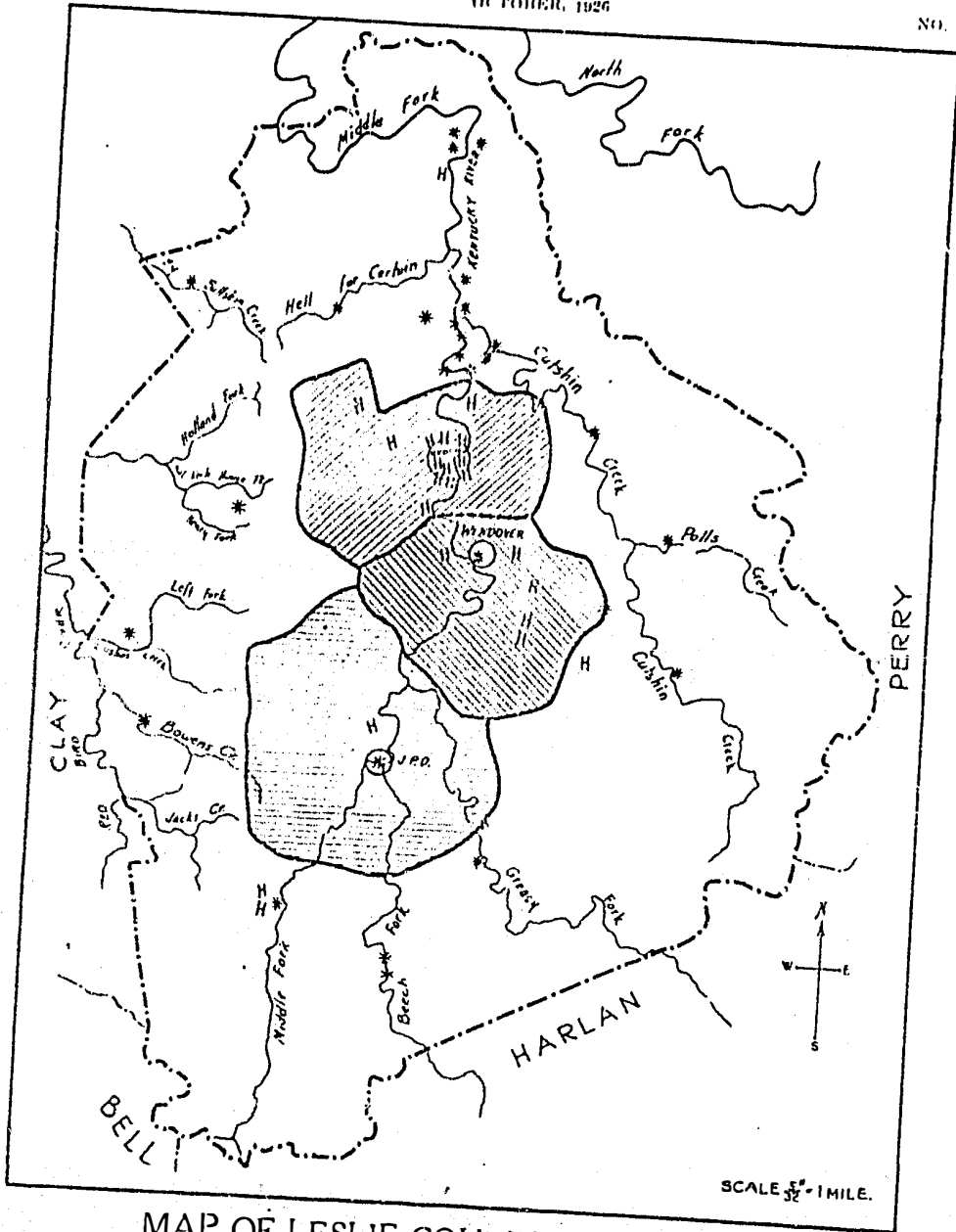
Nurse-midwives Gladys Peacock and Mary B. Willeford were sent to Beech Fork to supervise the construction, although they had only been with the Service two months and knew nothing about building.

The two women rented rooms nearby, and while the barn was being built, foundation laid and house assembled, they organized their district and started answering medical calls.

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<sup>1</sup>Ibid.

The Quarterly Bulletin of  
The Kentucky Committee for Mothers and Babies, Inc.  
VOL. II. OCTOBER, 1926 NO. 1



MAP OF LESLIE COUNTY, KENTUCKY  
Map 1.

In 1927 FNS built a second outpost center at Confluence on the Middle Fork of the Kentucky River at the request of seventy-six people who offered five hundred dollars in cash, labor and material, and three acres of land if the center was built there.<sup>1</sup>

By 1930 the FNS had built six outpost centers from nine to twelve miles apart. Where one nurse-midwife's territory ended another took over. FNS paid no attention to county lines, instead situated the centers on the waterways, the natural arteries of travel and trade with the gaps in the mountains serving as district boundaries.

FNS territory now covered about sixty miles along the Middle Fork of the Kentucky River and its tributary streams, from the Beech Fork Nursing Center in Leslie County to Bowlingtown Nursing Center in Perry County. It took seven days of horseback riding to make rounds of all eight stations starting from Wendover, or Hyden, and staying overnight at each center.<sup>2</sup>

Breckinridge may not have always waited for the community to request a center as she later claimed. She probably knew in advance where she wanted to locate some, if not all of them, and then created popular interest in her program.

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<sup>1</sup>Minutes of General Meeting, May 18, 1927.

<sup>2</sup>Breckinridge, Wide Neighborhoods, pp. 229-30.



**FRONTIER  
NURSING SERVICE, Inc.**

Organized  
May, 1925

Started in Leslie Co.  
Summer, 1925

Hyden District  
Work begun September,  
1925

Wendover Dedicated  
Christmas, 1925

Beech Fork  
(Jessie Preston Draper)  
P.O. Asher, Leslie Co.  
Work begun October, 1926

Hyden Hospital  
Mary Ballard Morton  
Wing  
Mary Parker Gill Wing  
Dedicated  
June 26, 1928

Red Bird  
(Clara Ford)  
At Peabody, Clay Co.  
P.O. Route 3,  
Manchester, Ky.  
Work begun June, 1925

Flat Creek  
(Caroline Butler Atwood)  
P.O. Creeksville, Clay Co.  
Work begun June, 1929

Brutus  
(Belle Barrett Hughtt)  
At Brutus, Clay Co.  
P.O. Route 1, Oneida, Ky.  
Work begun July, 1930

Wolf Creek  
(Margaret Durbin Harper)  
P.O. Big Fork, Leslie Co.  
Work begun December,  
1938



**ROADS AND  
RAILROADS**

Hyden is located 125 miles from Lexington on U. S. 421, 30 miles east of Manchester and 35 miles north of Harlan, Ky. 80 passes through Hyden, connecting it with Hazard and London.

Freight and railway express come via the Louisville and Nashville Railroad to Hazard but there is no passenger service.

**TELEGRAPH**

Western Union via Hazard, Cable—Froserve, Hazard, Kentucky.

**TELEPHONE**

The Leslie County Telephone Company serves Hyden, Wendover, Beech Fork, and Wolf Creek. The Northeastern Telephone Company serves Brutus, Flat Creek, and Red Bird.

**\*Possum Bend**

(Frances Bolton)  
Work begun June, 1927  
Center closed April, 1960

**\*Bowlingtown**

Work begun July, 1930  
Center relocated at  
Wolf Creek,  
December, 1955

**\*Beverly**

FNS Nurse-Midwife  
loaned the  
Evangelical Mission  
from June, 1930  
to July, 1932

Map 2. Frontier Nursing Service Country.

Frank Bowling, a surveyor, told of working in the Wendover area and boarding at Taylor Morgan's<sup>1</sup> across the river from the FNS headquarters. When Breckinridge learned of his presence she invited him to Wendover to discuss establishing the Red Bird center in Clay County. "When I met her," Bowling said, "I thought she was the smartest woman that I ever talked to and I have always thought that of her."<sup>2</sup>

Brutus, the last center, was built in 1930 during the height of the depression. Breckinridge arranged a community meeting to discuss building the center, and, according to Alden Gay, who later headed the Brutus committee, the reaction was "fantastic." Citizens donated land, labor and the use of their mule teams. People were particularly grateful, Gay said, because they would be given medical care practically free of charge (\$1 per year per family). Gay was a teenager at the time and served as the first center barn boy. "I was proud," he said, "to even get to take care of the nurses' horses."<sup>3</sup>

#### The Hyden Hospital

Breckinridge began planning and raising money for a hospital to be staffed with a physician in 1925. Two cases

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<sup>1</sup>A large portion of Leslie Countians carry the family names of Morgan, Bowling, Cornett, Lewis or Muncy. Therefore, when referring to a member of one of these families the author has included their given name.

<sup>2</sup>FNS interview with Frank Bowling, retired surveyor.

<sup>3</sup>FNS interview with Alden Gay, Clay County farmer.

of placenta previa (a serious obstetrical complication) in July, 1927, strengthened her resolve. For the first of these, two nurses had to make long horseback trips to four counties before they could find an available physician. Finally, Dr. J. P. Boggs in Hazard answered their call and had to ride thirty-three miles to reach the patient. With two nurse-midwives assisting, and by the light of a flashlight he did a version. The baby was dead but the mother's life was saved.<sup>1</sup>

A fund raising committee of Hyden citizens was organized in 1925 and within a short time exceeded its goal of \$1,000. Many of the gifts were in kind, and included timber, locust fence posts, the use of teams and free labor.<sup>2</sup>

The state chairman of the Kentucky committee donated the five hundred dollar cost of the hospital site, a narrow bench of the Thousandsticks mountain overlooking Hyden, purchased in July, 1926, from the V. A. and James L. Maggard families.<sup>3</sup>

Hyden citizens and staff alike often asked Breckinridge why she chose that particular spot. The approach road was steep and barely passable during the winter, there were constant slides and a reliable water source hard to come by.

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 183.

<sup>2</sup>Quarterly Bulletin II (June 1926):4.

<sup>3</sup>Deed, Hyden Hospital site, on file in Leslie County Courthouse.

Breckinridge liked to explain that the air was clearer and drier than in the narrow valley town of Hyden. It was also quieter, for in those days the young men, "for lack of anything better to do on a Saturday night, used to ride their horses madly through town, shooting in the air-- a noisy custom."<sup>1</sup>

Actually, she probably had scant choice since there was little other available land. The few acres of level or semi-level land near Hyden had been grabbed years before.

There were continuous construction problems, the worst being a never ending series of land slides. A Lexington architectural firm designed the hospital and furnished the blue prints free of charge without visiting the site or understanding the problems, such as what to do with cow manure (there was no pasteurized milk available so the FNS had its own cows), or where to locate the barn for the nurses' horses.

The contractor lived in Hazard so an amateur building committee of Hyden businessmen supervised the work. Labor was cheap, 20¢ per hour, the stone masons excellent, but electricians, plumbers, plasterers and steam fitters had to be brought in from outside. Most of them had never ridden horseback so they arrived in Hyden sore and mad, and left as soon as possible.<sup>2</sup>

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 210.

<sup>2</sup>Ibid., p. 211-19.

The hospital was dedicated June 26, 1928, by Sir Leslie MacKenzie, head of the Scottish Highlands and Islands Medical and Nursing Service, which had served as a model for the FMS.

Fifty outsiders plus about one thousand local people attended the ceremony. Thirty horses and mules were sent to Hazard the day before to fetch the guests. The skies opened up, it turned cold and the trip to Hyden was miserable as the guests were forced to ride through raging streams and ford the river with water up to their horses' girths. The baggage wagons could not get through so that night the soaked visitors were dressed in discarded clothing which had been sent by charitable groups for distribution to poor Leslie County families.<sup>1</sup>

The dedication day dawned clear and bright. Sir Leslie spoke at some length about the similarities between the Highlands and Islands Medical and Nursing Service and the FNS, concluding,

. . . In all reverence, I dedicate this hospital to the service of this mountain people. The act of dedication will have consequences beyond all imagination. It will evoke responses along the many hundred miles of these mountain frontiers and among the millions of their people. The beacon lighted here today will find an answering flame wherever human hearts are touched with the same divine pity. For in the future, men and women, generation after generation, will rise to bless the name of the Frontier Nursing Service.<sup>2</sup>

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<sup>1</sup>Ibid., pp. 223-24.

<sup>2</sup>"The Dedication Address," Quarterly Bulletin IV (September 1920):8.

## The Great Depression and Drought

Much of the organization of the FNS was accomplished just prior to and during the Great Depression of 1929-39. The Service established central record and accounting systems, hired an executive secretary and organized a social work department.

Perhaps because FNS was dependent on outside funds, which dried up following the stock market crash, its staff took the depression more seriously than many Leslie Countians. Then too FNS nurses came from middle-class homes where warm comfortable clothes and nutritious meals were taken for granted. To see for the first time shoeless children in threadbare hand-me-downs was a shocking experience.<sup>1</sup>

The FNS needed funds for its building and expansion program, and found that photographing and writing about one-room shacks, ragged children and malnutrition was a dramatic way of appealing to better off Americans. But this approach annoyed some local people. A teacher complained:

Mrs. Breckinridge didn't tell anything about the fine homes that were here. It was always the little shacks on the hill side and the people going without clothing and half starved and barefoot, so that most people on the outside got the wrong idea.<sup>2</sup>

During the late twenties many Leslie Countians were on a semi-barter economy. The men worked only a few months

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<sup>1</sup> Author interview with retired midwife.

<sup>2</sup> FNS interview with Mary Brewer, retired teacher and author of Rugged Trail to Appalachia (self-published, 1978).

a year lumbering or in Perry County mines. They raised their own food and when the men lost their jobs, lived at only a slightly lower level than they were accustomed to. Many men had never held jobs, their only income came from small farm surpluses.<sup>1</sup>

A retired tax commissioner said he didn't think the depression affected Leslie County as much as other parts of the country because nearly everybody raised their own food and didn't have any money to start with.<sup>2</sup>

The main victims were the ambitious young families who had migrated to Northern factory jobs, been laid off and returned to marginal farms.<sup>3</sup> Many moved in with relatives.

In 1929 there was no government assistance other than small county stipends to a few needy families. Some families in FNS territory were dressed almost entirely from "grab," a collection of donated clothing called "grab" because each nurse grabbed the best for her patients. The FNS gave the most needy families clothing at no cost. In most cases it sold "grab" at nominal price, such as fifty cents for a coat.<sup>4</sup>

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<sup>1</sup>FNS interviews with Lula Baker, a farm woman; Della Gay, housewife; and Corbin Pennington, retired farmer.

<sup>2</sup>FNS interview with John D. Muncy, retired tax commissioner.

<sup>3</sup>Thomas R. Ford, ed., The Southern Appalachian Region (Lexington: University of Kentucky Press, 1967), p. 39.

<sup>4</sup>Breckinridge, Wide Neighborhoods, p. 266.

The small amount of cash available for shoes was usually spent on older children who needed them for work and school. So the nurse-midwives often found youngsters with their feet wrapped in sacks. In 1929 the nurses surveyed the families and found that about 6.5 percent of the children were shoeless.<sup>1</sup>

That Thanksgiving Harry French Knight of St. Louis was a guest at the traditional Wendover festivities. When he asked the district nurses what they wanted for Christmas, they chorused, "Shoes!" Knight returned to St. Louis with foot outlines carefully drawn by district nurses for 203 pairs of shoes. Many children wore shoes for the first time that Christmas.<sup>2</sup>

The market crash was compounded by the unprecedented drought of 1930, with the south and midwest the most seriously affected areas.<sup>3</sup> In Kentucky there was practically no rain or snow during the winter of 1930, leaving no subsoil water. The scorched summer months which followed brought disaster. The only drinking water was a "foul slime," with bathing water a one or two mile walk from many homes. The results were high rates of dysentery and poor skin conditions.<sup>4</sup>

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<sup>1</sup>Quarterly Bulletin V (December 1929):3.

<sup>2</sup>Ibid.

<sup>3</sup>Trager, The People's Chronology, p. 879.

<sup>4</sup>"Forward," Quarterly Bulletin VI (Autumn 1930):1.



One tragic result was the total loss of income from timber, the main cash crop of the area, for at that time it was the custom to float rafts of logs down the river to urban areas on the first spring flood tide. But in 1930 there was no spring tide.<sup>1</sup>

Breckinridge feared famine so decided to learn how bad the situation would grow from the fall of 1930 when the crops should have been harvested until the following fall. She hired Lee Morgan, an educated neighbor with a sound knowledge of crops, to find out how much corn each family had for the months ahead and the number of animals and people it would have to feed. Morgan interviewed 1,175 families with 6,584 people.

According to his estimate, which proved 2 percent short of actual conditions, 17 percent of the population would be entirely without food by January 1931, 55 percent would be foodless by March, and nearly 70 percent by June. Over 92 percent would be without corn before the next harvest.<sup>2</sup>

In October when the survey was completed, Breckinridge took Morgan's data to the American Red Cross headquarters in Washington. The Red Cross began helping in January 1931, at which time one-fifth of the people had no food and were being fed by friends and neighbors.

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<sup>1</sup>FNS interview with Ed Morgan, retired farmer and miner.

<sup>2</sup>"What Price Famine?" Quarterly Bulletin VII (Winter 1931):1-2.

The Red Cross food allowance was \$2.00 per person per month with a maximum of \$20.00 per family.<sup>1</sup> The FNS supplemented with milk and cod liver oil obtained through radio and publicity campaigns. Over 2,000 children were given milk with the help of the Borden Milk Company, the Pet Milk Corporation and private individuals. To stave off disease FNS nurses gave 11,023 diphtheria, smallpox and typhoid inoculations to people scattered over 1,000 square miles.<sup>2</sup>

Breckinridge made several trips to the Red Cross headquarters in Washington to try to obtain higher allowances. During one such trip she telegraphed Agnes Lewis, her executive secretary, ordering her to have the Hyden Red Cross Committee ask regional Red Cross officials in Hazard for higher allotments. She had been told the request for higher allowances should start with local committees.

Mitch Begley, the committee's chairman, told Lewis that the people had enough canned goods, chickens, hogs and potatoes to last them through the crisis. Besides, he said, "they are accustomed to helping one another."

Lewis reported Begley's feelings to Breckinridge who wrote back an angry blast, "I will form my own opinions . . . Upon receipt of this letter tell Mr. Begley and the committee that something has to be done."

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<sup>1</sup>Ibid.

<sup>2</sup>"Forward," Quarterly Bulletin VI (Spring 1931):1.

Lewis received the letter at 7:30 P.M. A hard-working, dedicated, rather meek woman, Lewis never argued with Breckinridge. She was frightened of horses and had sworn never to ride at night. But on this particular evening she saddled up, rode the four miles to Hyden and called the committee together. They argued until midnight and finally agreed to let Lewis go to Hazard and discuss a compromise with the regional Red Cross representative.<sup>1</sup> This she did the next day, a settlement was reached and the monthly rate raised to \$2.50 per person per month with a \$20.00 maximum per family.<sup>2</sup>

There were many severe hardship cases. Ford Barger, the Bowling postmaster and a Red Cross representative, for example, told of visiting one man who had killed a ground hog and cooked it. That and some bread and water were all his family had eaten in several days.<sup>3</sup>

Some of the foods distributed were new to Leslie County and unpopular when first introduced. A missionary told of a neighbor bringing her a bag of grapefruit. "We've fried it, we've done everything. We don't like it," he said and gave her the bag.<sup>4</sup>

It was because of the depression that Hyden was finally opened to the outside world through the construction

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<sup>1</sup>FNS interview with Agnes Lewis, retired executive secretary.

<sup>2</sup>"What Price Famine?" p. 4.

<sup>3</sup>FNS interview with Ford Barger, retired postmaster.

<sup>4</sup>FNS interview with Jean Tokk, retired missionary.

of roads under CCC, WPA and other government programs. The first highway, a 24-mile gravel road connecting Hyden and the railroad spur near Hazard, was built largely by hand at a cost of an average of \$29,112.48 per mile.<sup>1</sup>

WPA work was anything but a boondoggle. Men often had to walk five to ten miles to the project sites.<sup>2</sup> There was no machinery; the arduous work of hewing roads through the rock cliffs was done by hand for \$1.31 per eight-hour day.<sup>3</sup>

Not everyone liked the relief programs. As one community leader summed it up, the government started giving a little flour under Hoover and in 1932 Roosevelt began a big giveaway program. Every president since increased it and made "a sorry people in our country."<sup>4</sup>

#### FNS Depression Finances

The years 1929-32 were extremely difficult for FNS since the stock market crash dried up its major source of donations from wealthy philanthropists. Nevertheless, after some argument the executive board agreed to continue the FNS expansion program and to build a center at Brutus. C. N. Manning, the treasurer, offered to advance collateral for a

<sup>1</sup>State Highway Department, Louisville, as quoted in Mary B. Willeford, Income and Health in Remote Rural Areas (New York: FNS, 1932), p. 17.

<sup>2</sup>FNS interview with Sadie Stidham, retired teacher.

<sup>3</sup>FNS interview with Walter Morgan, farmer.

<sup>4</sup>FNS interview with Frank Bowling, retired surveyor.

\$10,000 loan because, "it would be an act of faith to build now."<sup>1</sup>

FNS's financial problems became critical in November 1931 when Breckinridge, the Service's principal fund raiser, broke her back in a horseback accident and remained bedridden for three months. She was furious and kept up her fund raising correspondence from her hospital bed, but it was almost a year before she could resume her highly profitable speech-making trips.

By the end of the financial year (April 1932) the Service had a \$3,000 overdraft and unpaid salaries of \$10,000. The 1932 budget was set at \$145,000 at the annual spring meeting and then reduced to \$84,000 three weeks later.<sup>2</sup>

When salary payments fell in arrears, Breckinridge told the staff they would receive two-thirds of their pay and the balance when times improved. There was no guarantee for even this amount; many of the older staff voluntarily lived for several years on just barely enough to keep them in minimal clothing and cigarettes.

Eventually the national chairman, Mrs. S. Thurston Ballard, offered to repay all back salaries plus a month's pay in advance to anyone who wished to leave. Those remaining would receive minimal pay; in fact they went several months with no pay.

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<sup>1</sup>Minutes of Executive Group, July 21, 1930.

<sup>2</sup>Ibid., May 11, 1933.

Nevertheless, more nurses wanted to remain than depart, forcing the FNS to discharge several against their will. Seven nurses were released and the centers reduced to a staff of one each.<sup>1</sup>

The staff reduction had relatively little effect on the work. The remaining nurses simply worked harder. According to a 1933 report:

75% of the staff did 90% of the number of deliveries of last year;  
 75% of the staff cared for 99% of the number of sick cases of last year;  
 75% of the staff did 65% more inoculations than last year;  
 75% of the staff received 88% of the number of visits of last year.<sup>2</sup>

Regardless of their poverty, Leslie Countians continued to contribute what they could. At the recommendation of the Hyder committee it was decided that one hundred percent of membership should be solicited, with the better-off members paying for those who could not afford one dollar. Within five days of the meeting their goal had been achieved.

Breckinridge reported to the Board, "The people had no money either and are paying fees in whitewashing barns, mending drains and so on . . . Our poverty seems to have endeared us to them greatly."<sup>3</sup>

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<sup>1</sup>Ibid., October 10, 1932.

<sup>2</sup>"Field Report," Quarterly Bulletin IX (Summer 1933):

3.

<sup>3</sup>Minutes of the Executive Group, May 11, 1933.

The Work of the Nurse-Midwife

Except during the depression two nurse-midwives staffed each district. The design and layout of the centers were similar. One end of the house contained the clinic and waiting room with the clinic occasionally doubling as a hospital. A large living room with fireplace, cheerful curtains and rugs and comfortable furniture was the focal point of the house. There were bedrooms for the nurses, guests and the maid, a bathroom and roomy kitchen. Next to the house was an airy whitewashed barn with a tack room, four stalls and hayloft.

Each center had a housekeeper-maid and a barn man. When the nurses returned in the evening after hours in the saddle they groomed and fed their horses, but when they entered the house to a fire and well cooked meal, their physical work was done. Breckinridge simply felt that it would be impossible for a nurse-midwife to carry a district and return to milking and feeding the cows, feeding the chickens, cleaning and lighting the kerosene lamps, churning the butter, building the fires and cleaning the house.<sup>1</sup>

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Author's note: Several years ago while working in the Philippines I asked a Filipino physician, who had visited the FNS, her reaction to the organization. She was admiring of the nurses' accomplishments, but commented that the Philippine health service would never be able to do such good work since it didn't provide comfortable quarters for its nurses. Filipino nurses must scrounge for housing on a very low living allowance. My friend felt that much of the success of the FNS was attributable to the comfortable living quarters given the district nurses, making it easy for them to concentrate on the job.

<sup>1</sup>Breckinridge, Wide Neighborhoods, pp. 240-42.

Despite these amenities, the life of the nurse-midwife in the twenties and thirties was far from easy.

New nurses traveled from Lexington, Kentucky, to Krypton near Hazard by train and were disembarked on the siding at 4:45 A.M. They breakfasted at a nearby lodging-house, changed into the riding clothes they had been told to bring and mounted the steeds (mules or horses) which had been provided then, and then rode 25-30 miles up and down narrow paths and through several fords to Hyden. If they were lucky they spent a night en route at the Confluence center. The initial shock was almost overpowering. One British nurse described riding for some time on what she considered an unbelievably rough trail and finally asking her guide when they would reach the road. "This is the road," she was told, "It's a main road and a good one too."<sup>1</sup>

Breckinridge wrote of guiding Ellen Halsall, a new nurse, down the trail from Hazard in 1926. Halsall had never been on a horse before and had to be boosted onto her mount by several men. Poor Halsall was frightened so pulled tightly on the reins. Every time she did this the horse reared; Breckinridge grabbed the reins, led the animal for a while and then tried to persuade Halsall to relax and hold the reins loosely. Finally, Breckinridge gave in and led her the approximately thirty miles from Hazard to Wendover.

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<sup>1</sup>Nora Kelly, "When I Joined Up in 1939," Quarterly Bulletin XIV (Autumn 1939):11.



Eventually, Halsall became an excellent rider. However, after this experience Breckinridge required all new nurses to take five riding lessons before reporting to work.<sup>1</sup>

On a normal day the nurses saddled up at eight and headed up whichever creek she had chosen to follow. Throughout the area, creek beds served as roads along which most mountaineers built their homes. To save time and long tiresome rides the nurses tried to center their work on a different creek each day. Once or twice a week they saw patients at clinics they had organized in homes or schools on their outer district boundaries to make health care as accessible as possible.

Many of their visits were to pregnant women or to women who had just had babies. While examining the patient the nurse looked over members of the family, particularly children, and gently educated the mother concerning such problems as nutrition, sanitation and worms and the necessity for inoculations.

The Kentucky mountaineer was extremely hospitable. Nurses were invariably offered refreshments and if it was near mealtime, urged to stay and eat. But times were hard so the nurses carried their lunches and attempted to schedule their visits so that they could picnic rather than impose on the hospitality of their patients.

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 188.

Normally the nurse rode twelve to fifteen miles before completing her rounds and returning home in time for tea. Even if she were lucky enough to have no night calls, her work was far from complete, for there were records to write up, the drug orders to prepare and a variety of other chores.

Midwifery was the nurses' main function. In order to be registered with the FNS a patient had to be seen and examined by the nurse-midwife at least twice. After the delivery, the nurse-midwife attempted to make daily follow-up calls for the first week and after that on a regular basis depending on the needs of the patient.

As is true worldwide, Leslie County babies often chose to be born in the middle of the night. The rule of the FNS nurse-midwife was simple. "If anyone can come to us we can go to them."<sup>1</sup> This often meant fording streams and rivers and climbing icy paths on pitch dark nights by the light of a kerosene lamp held by the expectant father.

In carrying out their work the nurse-midwives followed routine written orders which the FNS Medical Advisory Committee had approved in 1928. The advisory committee consisted of leading Lexington physicians whom the FNS consulted about medical problems. The written orders were designed to enable the nurse to meet all kinds of emergencies until a physician arrived. They took into account the fact that because of high

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<sup>1</sup>"Our Christmas Holidays," Quarterly Bulletin II (January 1927):2.

costs and poor transportation, it was often impossible to obtain a physician, so instructed the nurse how to handle the emergency.<sup>1</sup>

The standard fee for a delivery including prenatal and postpartum care was five dollars. If possible the pregnant woman was seen by the physician medical director as well as the nurse-midwife. If a nurse was concerned about a patient she was seen by a physician as soon after registration as possible.

Hired after the opening of the hospital, Dr. Hiram C. Capps was the first FNS physician. Under an affiliation arrangement with the State Board of Health, Dr. Capps served as county public health officer and FNS medical director with his salary divided between the two organizations. Dr. Capps had done a residency in obstetrics but was not a surgeon. Emergency surgery was referred to Dr. R. L. Collins in Hazard.<sup>2</sup>

An experienced field supervisor visited each center once a month and tried to see all new patients. Home deliveries were the rule. However, if the case looked problematical or the home situation was bad, the patient was brought to the center for delivery. Once the hospital was built

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<sup>1</sup>Routine for the use of the Frontier Nursing Service authorized by the Medical Advisory Committee Meeting August 27, 1928, in Lexington, Kentucky. (Note: These routines have been updated every two or three years by FNS staff in cooperation with the Medical Advisory Committee.)

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 243.

women with problems went there for delivery. Regardless, the fee remained five dollars.

Since there were no U.S. graduate midwifery schools, all of the FNS nurse-midwives were trained in England. Most were British since not many American nurses could go to England for the specialized training.

The British nurses' biggest problem was communication. Betty Lester, who joined the Service in 1929, described her early days as frustrating.

She participated in her first delivery as an assistant and was astonished by the large number of curious neighbors present. "They came to see what the new nurse is like," she was told.

During her first months she met many people. She ate with them, relaxed on their porches with them, but nobody had much to say. She finally discussed her apparent failure to be accepted with an American co-worker who in turn asked a mountaineer how Lester was getting on. "We like her fine, but she sure is the talkingist woman I ever hear (sic)," he said. After that Betty relaxed. She decided if her patients liked her it didn't matter if they talked or not.<sup>1</sup>

The nurses soon learned they couldn't rush in and out of homes without hurting feelings. Regardless of how busy they were they had to wait at least twenty minutes before getting down to business.

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<sup>1</sup>FNS interview with Betty Lester, retired British nurse-midwife.

In the early days not everyone liked FNS. "If you were riding up a creek," Lester explained, "and saw a door shut, you didn't go in, you knew they didn't want you."<sup>1</sup>

However, Breckinridge and FNS were well accepted by most people, partially perhaps because of the Breckinridge name, partially because of her philosophy and approach to people, and because FNS provided a service the people wanted.

The attitude of Leslie County's leading citizens toward the Breckinridge family was described in a letter from the FNS treasurer to Breckinridge's father.

. . . At a meeting of the committee held in Louisville last winter, a speech was made by a native of Leslie County attempting to express the gratitude of the natives for the work that is being done by Mrs. Breckinridge and her corps of assistants. In it he said that the Breckinridge family had always been doing something for the good of Kentucky ever since the state was heard of, and that he and those for whom he spoke were always ready to follow wherever they might lead. I am confident that the historians of Kentucky in after years will record the work that is being done by your daughter in Leslie County as not the least of the services rendered by the Breckinridge family to the state.<sup>2</sup>

Breckinridge thought of the Kentucky mountaineer as an individual, not the stereotyped hillbilly visualized by most of the nation.

. . . The Kentucky mountaineer has been written up and talked about as though he were a special kind of Homo sapiens. I have knocked around the world a lot in my time and have never found any people in it but men, women, and children, with not two of them alike.

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<sup>1</sup>Ibid.

<sup>2</sup>C. N. Manning, letter to Clifton R. Breckinridge dated April 27, 1927.

This delectable variety is as true of Kentucky mountaineers as everybody else.<sup>1</sup>

At first nobody knew what Breckinridge and her nurses would do. She didn't push, she let people get to know her.

. . . She didn't say we're going to change your life. She said, "We're here; if you want us, come and visit us. . . . Come and see the clinic, bring the children and if there is anything wrong with them we'll help you. . . . We'd like to come and visit you but we aren't going to visit you unless you invite us."<sup>2</sup>

Once accepted, FNS nurses spent a large part of their time on home visits for they believed that it was in the homes they could get to know the people and the people them.<sup>3</sup>

The nurse-midwives were accepted almost immediately. Barger, a Bowlingtown committee member, told of having his first three children with a granny midwife. "She was a knowing woman who had never gone to school a day in her life. But when the FNS came everyone in the area stopped using the old woman."<sup>4</sup>

Several oral history interviewees described having babies with granny midwives in pre-FNS days. The granny midwives brought no equipment except scissors and tie strings for the cord and almost never made return visits after the delivery. On the other hand the FNS nurse-midwives visited the new

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 169.

<sup>2</sup>FNS interview with Betty Lester, retired nurse-midwife.

<sup>3</sup>Ibid.

<sup>4</sup>FNS interview with Ford Barger, retired store owner.

mothers every day for a week after the birth, bathed the baby and did a lot of things to help.<sup>1</sup>

Another woman observed,

They had their own equipment . . . they knew what they were doing. I had five healthy babies and they always took care of them good, took care of the mothers good. . . . They took care of us like a doctor.

The same woman thought she had received much better care from the FNS midwives than her daughters were given a generation later in Michigan hospitals. "The nurses taught us how to bathe and feed the baby, more than my daughters were ever told in the hospital," she said.<sup>2</sup>

Frank Bowling described a nurse riding her horse up an icy creek on a terrible winter night to deliver his son, Allen. "I just don't see how we could have made it then without the FNS," he said.<sup>3</sup>

Dan Young, a retired miner, said the nurses had saved his wife's life. The Youngs had been using a granny midwife when his wife sickened with her third child. He called Breckinridge and the nurses came. They wanted her to go to the hospital and said they would take care of the two "least" ones but Young said he just couldn't "make it" without her so they

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<sup>1</sup>FNS interviews with Tempe Young, Della Gay and Lula Baker.

<sup>2</sup>FNS interview with Jessie Sheppard, elderly housewife.

<sup>3</sup>FNS interview with Frank Bowling.

got Dr. Collins from Hazard. Young couldn't explain what Dr. Collins did but was sure he saved his wife's life.<sup>1</sup>

Afterwards the nurses visited her at least once a month. "That's when I learned how good they were," Mrs. Young said.<sup>2</sup>

Young went to Breckinridge to find out how much the doctor cost. She told him \$125 and asked if Young was working. When he said yes, but that he wasn't being paid, Breckinridge insisted upon paying the bill.<sup>3</sup>

#### Special Clinics

By 1930 FNS had established medical, surgical and dental clinics staffed by specialists who came to the mountains on a regular basis. The first of these was the trachoma clinic conducted by Dr. Robert Sory of the U.S. Public Health Service in 1927.<sup>4</sup> This was followed by a dental clinic carried out in cooperation with the Kentucky State Dental Association,<sup>5</sup> and gynecological and eye clinics by Breckinridge's cousin, Dr. Scott Breckinridge and Dr. F. C. Thomas of the Lexington Medical advisory committee.<sup>6</sup>

<sup>1</sup>FNS interview with Dan Young.

<sup>2</sup>FNS interview with Tempe Young.

<sup>3</sup>FNS interview with Dan Young.

<sup>4</sup>"Field Notes," Quarterly Bulletin V (September 1929): 15.

<sup>5</sup>Ibid.

<sup>6</sup>Breckinridge, Wide Neighborhoods, p. 259.



Dr. C. B. Kobart of the Kentucky State Board of Health managed the first tonsillectomy clinic in 1930, during which he performed 151 operations. Some of the children traveled two days by wagon train to reach the clinic. They remained three days for recuperation, housed in a Hyden boarding house, and then were escorted home by FNS nurses.<sup>1</sup>

Two chronic elective surgery clinics were held each year. The surgeon, a member of the medical advisory committee, accompanied by an anesthetist and surgical resident arrived for Wednesday lunch, saw fifty to seventy patients in the afternoon, selected fifteen to twenty for surgery and then operated until Saturday.<sup>2</sup>

Worms caused much illness in the FNS area. Accordingly, the FNS was happy to cooperate with a team of hematologists from Vanderbilt and Johns Hopkins Universities who came to Leslie County in 1930 to test a new drug, hexylresorcinol.<sup>3</sup>

The FNS lined up 820 young volunteers, mostly from the Hyden area, whose parents had consented. FNS couriers (young volunteer workers) collected the specimens and brought them by horseback to the Hyden hospital. Of the 820 tested, 80.5 percent had intestinal parasites, including hookworm, whipworm,

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<sup>1</sup>"The Summer's Work," Quarterly Bulletin VI (Autumn 1930):9.

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 257.

<sup>3</sup>"The Summer's Work," p. 11.

dwarf tapeworm and pinworm. New specimens were collected in the spring to learn how much infestation had occurred during the winter. It was not heavy. But when the specimens were collected again at the end of the summer, practically all of the youngsters were found to be reinfested, probably because most went barefoot during the hot months. Following this study, the FNS attempted to worm all children in the fall to rid them of the summer infestation.<sup>1</sup>

### Administration, Reports and Surveys

#### Organization of the Service

By 1932 Breckinridge had completed organizing all departments of the Service except the graduate midwifery school. And plans for the school had been discussed at length in executive committee meetings.

The FNS now had committees in fifteen cities from which it drew its trustees and financial support. There was also a national medical council and national nursing council.

A central record system had been established with a grant from the Carnegie Corporation. The Metropolitan Life Insurance Company had agreed to evaluate the first 1,000 maternity cases for the Service, a job it continued for each successive 1,000 cases until World War II began.

At the recommendation of the auditors, FNS hired a full time bookkeeper, Lucile Hodges. Agnes Lewis joined the

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<sup>1</sup>Breckinridge, Wide Neighborhoods, pp. 260-61.

staff, first as assistant records supervisor and later as executive secretary. These two women soon shouldered the administrative responsibilities with which Breckinridge had been burdened.

In 1929 the government authorized the FNS an institutional post office at Wendover with Breckinridge as postmistress. Secretaries were sworn in as postal assistants to run the office.<sup>1</sup>

One of Breckinridge's early dreams was to establish a social service department. This she achieved in 1931 when the Alpha Omicron Pi National Sorority voted to support it as a national philanthropic project. Bland Morrow was the first FNS social worker.<sup>2</sup>

The social work department provided assistance where other agencies couldn't help, because of time factors or government regulations. Mainly, this consisted of emergency food orders and taking patients to urban hospitals. The FNS also helped obtain scholarships for bright youngsters to nearby boarding schools or colleges.

The courier services had become a permanent FNS institution by the year 1932. Couriers were young women, 19 years and older, who handled FNS transportation. In the early days this meant taking horses to Hazard to meet new nurses and spending long days in the saddle carrying supplies and messages between centers.

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<sup>1</sup>Ibid., pp. 253-55.    <sup>2</sup>Ibid., p. 254.

The couriers had to know the characteristics of each horse and how to match it with the riding abilities and tastes of the nurses. They escorted and taught the basics of riding to guests and new nurses and were in charge of doctoring sick animals.<sup>1</sup>

Couriers were recruited from social register type families, and were selected partially, the author believes, for their potentialities as future trustees and donors.<sup>2</sup>

#### Staff Development

Breckinridge was a firm believer in staff development.

. . . More has to be planned than a fair salary, decent living accommodations, and extra days of holiday for the long hours spent in working overtime. People have to grow. If they stand still their work is static too, and the Frontier Nursing Service would be missing its mark altogether if its work stood still.<sup>3</sup>

With this in mind the FNS gave or procured scholarships for Marion Ross to obtain a Master's degree in statistics, for Bland Morrow to obtain a Master's in social work and Mary Willeford to obtain her Ph.D. Several nurses were sent to England or Scotland for postgraduate studies in Midwifery.<sup>4</sup>

<sup>1</sup>Ibid., p. 272.

<sup>2</sup>The current chairman of the FNS Executive Board, Kate Ireland, is a former courier, as are board members Marvin Patterson, Jane Leigh Powell and Fredrica Holdship.

<sup>3</sup>"Progressive Education," Quarterly Bulletin V (September 1929):17.

<sup>4</sup>Breckinridge, Wide Neighborhoods, p. 254.

The scholarship recipients all returned to FNS for years of fruitful work.

### Reports

Breckinridge prided herself on keeping careful records of the money spent and what was accomplished. From the beginning annual audits were published in the summer issue of the Quarterly Bulletin as an accounting to donors.

The first annual report covered the period May 28, 1925, to April 30, 1926. Donations amounted to \$9,712.00. Expenses were \$6,622.92 and included such items as: care of horses--\$96.65; feed for horses--\$580.23; special patients--\$99.61.<sup>1</sup> (Note: The total operating expenses for the FNS fiscal year ending April 20, 1975, were \$2,024,974.00.)<sup>2</sup>

There were 43 midwifery cases; 820 patients registered; 3,563 visits paid; 2,107 visits received; and 868 immunizations given. Eight patients were taken to Lexington and one to Louisville. Doctors were called four times for twenty patients.<sup>3</sup>

During the first year there were two and a half nurses who worked an average of 54 hours per week. They spent about 31 percent of their time on office work, horses and supplies;

<sup>1</sup>"Statement of Cash Receipts and Disbursements," Quarterly Bulletin 13 (June 1926):7.

<sup>2</sup>"Statement of Revenues and Expenses," Quarterly Bulletin 51 (Summer 1975):7.

31 percent on travel; 20 percent making visits; 8 percent on deliveries; 7 percent on clinic visits, and the balance on such items as transporting patients and group work.<sup>1</sup> The following year there were 34 midwifery cases and by the 1930s over 400 per year.<sup>2</sup>

Throughout the years the FNS constantly evaluated its work. The first such study was compiled by Ella Woodyard, Ph.D. from the Institute of Educational Research, Teachers College, Columbia University.

Woodyard's report, which covered the years 1926-27, analyzed the cost of operating the Service. At that time, according to Dr. Woodyard, the Service covered a population of 10,500 and an area of 373 square miles. The area covered for bedside nursing, midwifery and intensive work, as well as public health was about 180 square miles.

. . . The total cost of the service for all purposes including publicity, moving picture, scholarship fund for Europe and printing of bulletins, as well as administrative and field work, was \$25,907.37. The cost for administrative field service only was \$21,054.14. Upon this cost 14,826 visits were paid, 5,876 visits were received. The average cost per visit based on the costs of administrative and field work was \$1.02; the number of visits per nurse being 3,286 for the year or 11½ calls per working day.<sup>3</sup>

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<sup>1</sup>Ibid.

<sup>2</sup>"Midwifery," Quarterly Bulletin IX (Summer 1933):4. For comparative figures with later years see appendix J.

<sup>3</sup>Ella Woodyard, Ph.D., "Statement in Regard to Cost of Running Nursing Service of the Kentucky Committee for Mothers and Babies During the Fiscal Year May 1, 1926-27," Quarterly Bulletin III (February 1928):7.

This record, Woodyard argued, compared favorably with that of the Visiting Nurses Association of Brooklyn whose nurses made 16 visits per day at \$.94 per visit; the Visiting Nursing Association of New York, with 7½ visits per day at \$1.25, and the Millbank Memorial Fund Comprehensive Health Program for Cattaraugus County, New York, with 7½ visits per working day at \$2.45 each.<sup>1</sup>

The records for the first thousand deliveries (the thousandth delivery occurred in December 1931) were analyzed by the Metropolitan Life Insurance Company. A summary was printed in the Bulletin and read in part:

. . . The patients cared for were, for the most part, young women. Seventeen percent were under age 20 and 28 percent between 20 and 25 years . . . Eighteen percent of the cases receiving care were primiparas, that is, were bearing their first children. Among 167 under age 20, 109 were in their first pregnancy. Two hundred eighty-seven women, or 29 percent developed one or more puerperal abnormalities during pregnancy and in 130 cases, the services of a doctor were called for. This proportion of abnormalities is lower than is usually found in the general population and is lower than in other series where excellent care in pregnancy has been available. Only two of the thousand cases developed eclampsia, although there were 172 cases with toxic symptoms which might have developed seriously without the care which the nurses rendered. Delivery complications occurred among 366 women, of which the commonest were hemorrhage, prolonged labor, and laceration. The number of these cases, however, is much less than usually occurs. In only 52 cases was it necessary to obtain the service of a physician during labor. Forceps were used nine times.

The most important single result of this work is that not one of the women died as the direct result of either pregnancy or labor. There were two deaths

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<sup>1</sup>Ibid., pp. 7-11.

in the series; but in one of these the cause of death was chronic heart and kidney disease and in the other it was chronic heart disease. Neither of these two cases could properly be ascribed to the maternal state. They would probably have occurred under ordinary conditions.

Another important result is the small number of stillbirths. There was a total of 26 stillbirths among the 1,015 babies. This figure is one-third less than occurs usually in the general population of the United States. Another result is the number of babies that die within one month after birth. There were 25 such deaths out of 989 babies born alive. In the general white population of Kentucky there occurs 36 such infant deaths in 1,000 live births, which represents a saving of one-third from that in the general population. . . .

The study shows conclusively what has in fact been demonstrated before, that the type of service rendered by the Frontier Nurses safeguards the life of mother and baby. If such service were available to the women of the country generally, there would be a savings of 10,000 mothers' lives a year in the United States, there would be 30,000 less stillbirths and 30,000 more children alive at the end of the first month of life.<sup>1</sup>

The second one thousand deliveries were completed in June, 1934, without a single maternal death. In the report summary, Dr. Louis Dublin commented:

. . . this would be an exceptional record under the most favorable circumstances, its accomplishment under the difficult conditions obtaining in frontier homes is noteworthy. In 1930, the last year for which figures are available, the rural white population of the United States recorded a maternal death rate of 5.2 per 1,000 live births and Kentucky a rate of 5.0 per 1,000 live births.<sup>2</sup>

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<sup>1</sup>"Metropolitan Life Insurance," Quarterly Bulletin VIII (Summer 1932):7.

<sup>2</sup>"Metropolitan Life Insurance," Quarterly Bulletin XI (Summer 1935):13.



## Income and Health Survey

In 1930-31 Mary B. Willeford, one of FNS' original nurse-midwives, studied two magisterial (voting) districts in Leslie County to consider whether the population could obtain adequate medical care from their own resources. She wrote up her findings as a dissertation for Columbia University. The dissertation was later published by FNS.

The study included an investigation of income and available medical costs and their services. In presenting her data Willeford pointed out that the survey was made during a severe drought so that timber income was almost nonexistent and the size of the crops well below average. She also explained that it had been impossible to obtain information about an important source of income, the making and selling of whiskey.<sup>1</sup>

Willeford reported 77.5 percent self-employed on small farms and 22.5 percent employed in all other industries.<sup>2</sup> The family income for 400 families in the two districts ranged from \$32.30 to \$4,632.78. The mean was \$640.75, the median \$566.00 and the mode \$416.50.<sup>3</sup>

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<sup>1</sup>Willeford, Income and Health, p. 13.

<sup>2</sup>Ibid., p. 16.

<sup>3</sup>See appendix C, "Total Family Income for 400 Families."

The total family money income in dollars for the 400 families varied from 0.00 to \$2,959.28 with a mean of \$248.62, median of \$201.36 and mode of \$183.53.<sup>1</sup>

Only 33.75 percent owned their own farms.<sup>2</sup> For the 400 families the modal (relating to a statistical mode) size farm was 10 acres, of which 7 acres were improved, or capable of being planted. Of the 7 improved acres not quite 7 acres were planted and only 3½ acres were harvested for the average family of 5 persons.<sup>3</sup>

Willeford found seven state-registered physicians working in the area. These included the FNS physician, a physician employed by the mission settlement school and five private practitioners who charged one dollar a mile per visit and were difficult to obtain in an emergency. There were four unregistered doctors, none of whom had any medical training.<sup>4</sup> The eighteen-bed FNS hospital and a twelve-bed hospital at the Red Bird missionary school served the area.<sup>5</sup>

Among the 400 families studied, 11 persons received hospital care at a total cost to them of \$812.65 and a mean cost of \$79.25 per person. This averaged out to approximately 12 percent of the total family income.<sup>6</sup>

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<sup>1</sup>See appendix D, "Money Income per Family in Dollars."

<sup>2</sup>Willeford, Income and Health, p. 33.

<sup>3</sup>Ibid., p. 27.      <sup>4</sup>Ibid., pp. 38-40.

<sup>5</sup>Ibid., p. 41.      <sup>6</sup>Ibid., p. 42.

Medicine was purchased from registered physicians, unregistered doctors, FNS nurses and small grocery and country stores located on the creeks. A total of 334 families bought \$1,071.69 worth of medicine at a cost of \$3.20 per family.<sup>1</sup>

Most of the medicine was nonproprietary (patent) medicine bought from the stores. In their order of popularity these were: castor oil, turpentine (taken for a variety of ailments), epsom salts, calomel and quinine.<sup>2</sup>

A total of 358 of the 400 families used medical care (doctors, nurses and/or medicine) at a cost of \$3,494.79. The mean amount paid was \$9.53 or a per capita cost of \$1.91.<sup>3</sup>

The cost to the 400 families worked out to \$8.73 or \$1.75 per person.<sup>4</sup>

In her conclusion Willeford quoted a survey made by Sales Management, Inc. in New York which indicated that the total spendable money income per capita for Leslie County in 1930 was \$81.00 as compared to \$580.00 for the nation.<sup>5</sup>

Willeford concluded that the population lacked the funds to obtain adequate funds, that the natural resources could not be developed to the point where they would have sufficient funds for medical care, and that if they were to receive the care they deserved it must be brought to them.

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<sup>1</sup>Ibid., pp. 46-47.    <sup>2</sup>Ibid., p. 48.

<sup>3</sup>Ibid., p. 50.    <sup>4</sup>Ibid., p. 53.

<sup>5</sup>See appendix E, "Total Spendable Money Income Per Capita for Certain Sections of the United States."

Funds could be either private or public or a combination of the two. She further recommended that midwifery schools be established to provide personnel to serve rural areas.<sup>1</sup>

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<sup>1</sup>Willeford, Income and Health, p. 80.

CHAPTER V

THE MIDDLE YEARS, 1935-65

1935-40

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The Physician and His Work

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## CHAPTER V

### THE MIDDLE YEARS, 1935-65

The two decades following 1935 were the peak of FNS' fame and success. The organization which Breckinridge had so painstakingly founded was consolidated, a midwifery school established, the hospital enlarged and the effectiveness of the FNS approach demonstrated.

Breckinridge died of cancer in 1965 at the age of eighty-four. She was ill for several years preceding her death, but unwilling to give up the reins. FNS was virtually rudderless during the last five or six years of her life.

#### 1935-40

##### Leslie County

Leslie County hadn't changed much since FNS opened in 1925. Only one road connected the county with the outside world. There was no electricity in most of the area and a majority of the homes remained plumbing-less.

The first radios came to the area in the early 1930s. Soon practically everyone had scraped up enough money to buy one. The new media were on all day starting in the early morning with revivalist style sermons from fundamentalist

preachers and progressing later in the day to endless soap operas. Then in the evening learned news commentators pontificated on the problems of the world.<sup>1</sup>

Numerous WPA projects sparked the beginning of change. WPA roads soon crisscrossed the area. A WPA road was built up hospital hill and in Clay County there were so many new roads the Red Bird District Center Committee suggested that FNS give the nurses a car for making home visits during summer months.<sup>2</sup>

The FNS and the Leslie County Health Department had continuously preached sanitation with negligible results. Typhoid remained endemic largely because many houses had no privies. Finally, the WPA latrine program under which WPA workers built latrines for anyone who requested them, achieved the beginnings of success. Householders were supposed to supply lumber, nails and other materials, but if they couldn't, WPA still built the latrines.<sup>3</sup> In the beginning not everyone used the latrines for the purposes for which they had been built. One retired nurse-midwife told of observing many latrines being used to store coal or to house animals. After

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<sup>1</sup>Harry M. Caudill, Night Comes to the Cumberlands (Boston: Little, Brown and Company; An Atlantic Monthly Press Book, 1962), pp. 213-14.

<sup>2</sup>Minutes of FNS Executive Committee, January 12, 1939.

<sup>3</sup>Alice Lloyd College Oral History Project interview with Martha Cornett, public health nurse.

all, said the midwife, the WPA latrines were better built than many houses.<sup>1</sup>

WPA built a new high school in Hyden in 1938<sup>2</sup> and helped finance moonlight schools for adults, so named because they were taught on nights when there was plenty of light.<sup>3</sup> The WPA also funded new books for the Horseback Library operated by the Presbyterian church at Wooten, ten miles from Hyden. The Horseback Library was later transferred to Hyden and eventually developed into the county library.<sup>4</sup>

Stimulated perhaps by depression welfare projects, the county health department and agriculture extension office matured during the thirties. Although Kentucky established the State Board of Health in 1878, Leslie County was slow in developing a health program. In 1919 Lela Buyers of the Hyden Presbyterian Church recruited Jean Tolk as a county health worker. The county fiscal court agreed to pay her \$25 a month and the state another \$25. Unfortunately, Tolk had a misunderstanding with one of the magistrates. The court decided that \$25 was a waste of money and Tolk resigned.<sup>5</sup>

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<sup>1</sup> Author interview with retired nurse-midwife.

<sup>2</sup> Mary T. Brewer, Of Bolder Men (Hyden, Ky.: The Leslie County News, undated), p. 61.

<sup>3</sup> Author interview with Rufus Fugat, county extension agent.

<sup>4</sup> Mary T. Brewer, Rugged Trail to Appalachia (Viper, Ky.: Graphic Arts Press, 1978), p. 50.

<sup>5</sup> FNS interview with Jean Tolk, retired nurse and missionary.



That ended the health department until 1930 when the county fiscal court appropriated \$750 for the "creation and maintenance of a full time health department."<sup>1</sup> Dr. Hiram C. Capps served jointly as public health officer and FNS medical director until 1931.<sup>2</sup> The health department closed until 1934 but has remained open ever since.<sup>3</sup>

T. L. Britton was appointed the first Leslie County agriculture extension agent in 1922. He left in 1926 and there was no agent for the next three years. Some Leslie Countians criticized Britton for spending most of his time preaching, but he is also remembered for distributing potatoes and holding contests to see who could grow the biggest and most potatoes.<sup>4</sup> The county had trouble finding funds to help pay the agent (the state and federal governments also contributed), so the post was vacant off and on until 1934. The office has been staffed ever since.<sup>5</sup>

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<sup>1</sup>Leslie County Fiscal Court orders dated April 23, 1930.

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 243.

<sup>3</sup>Alice Lloyd College interview with Martha Cornett, county health nurse.

<sup>4</sup>Author interview with Rufus Fugat, county extension agent.

<sup>5</sup>Ibid.

## FNS During the Late Thirties

Procedures and Problems

By 1935 the field work had been organized along lines which remained much the same until 1975. The system was decentralized because of transportation difficulties; most people still travelled by mule or horse at a rate of about four miles per hour.

There were six outpost centers plus the Wendover administrative headquarters and Hyden hospital, each with two districts and two nurses. With a radius of about five miles, each district covered approximately seventy-eight square miles. Every center had a citizens committee which met twice a year to hear the nurses' reports and discuss local problems.

The staff of thirty included twenty-two nurses, a social service worker, supervisors, secretaries and a book-keeper. The director and her assistant, a midwifery supervisor; hospital supervisor and the medical director constituted the management personnel.

Registered graduate nurses experienced in public health and trained in midwifery staffed the district centers. Each nurse was responsible for the health of all of the families in her district. Once a family was registered by the nurse every member was carried until he or she died or left the district.

The midwifery supervisor headquartered at Wendover but spent much of her time in the saddle. She was on call

for all abnormal cases, many of which she attended. Every month or two she visited each center checking prenatals with problems and advising the nurses. The midwifery supervisor tried to see all registered primiparous women (those having their first babies) at least once. There were usually about one hundred active midwifery cases at all times on which the supervisor kept a card file, thus keeping informed on the status of each woman.

The hospital supervisor functioned much the same as any hospital supervisor, with one additional responsibility, distributing medical and nursing supplies to the centers. Working under her were five full-time nurses and a nurse-midwife.

Senior staff members introduced new nurses to the field. For at least a month the new nurse was given little responsibility. The senior nurse planned the work, checked her horsemanship, taught her the trails and the records. The newcomer then served as a floater relieving for vacations and familiarizing herself with each of the centers. Later she became a junior district nurse and finally was placed in charge of a center.

Patient records were kept at the centers in family folders. These contained, in addition to individual charts, information concerning the family, such as the condition of the house, sanitation, and the water, milk and food supply.

Each week the nurses sent their daily report sheets to the central record office at Wendover where they were summarized for monthly and annual reports. The statistician or her assistant visited the centers two or three times a year to check the records.<sup>1</sup>

The district nurse's chief responsibility was midwifery. Because of the difficulties of obtaining prompt assistance from a physician, the Service emphasized preventive care. Pregnant women were asked to register early. The nurse-midwives examined prenatal patients, at the clinic or on home visits, every two weeks for the first seven months and once a week after that. They made a urinalysis, took the patient's blood pressure and did an abdominal examination including external measurements to find at the earliest opportunity disproportion between pelvis and baby, an undesirable position of the baby or signs of toxemia.<sup>2</sup> In an attempt to build up their resistance, the nurses worked their patients and prescribed cod liver oil.

The nurses tried to rectify any abnormal situations they encountered. For example, if possible, they corrected all faulty positions to anterior vertex, the simplest one for delivery.

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<sup>1</sup>Mary B. Willeford and Marion S. Ross, "How the Frontier Nurse Spends Her Time," Quarterly Bulletin, XII (Spring, 1937):3.

<sup>2</sup>A serious disease of pregnancy often associated with poor kidney function or high blood pressure caused by poisons circulating in the blood.

When the nurse-midwife found abnormalities, she made extra home visits to make certain the patient understood and followed directions and reported her findings to the midwifery supervisor. She also consulted the physician, who often made special visits to patients who didn't respond to treatment.

If there was anything about the woman which made the nurse-midwife nervous, she asked the supervisor to accompany her for the delivery. This was often done with worrying patients who had refused hospitalization but had not been deemed critical enough to call the doctor at the beginning of delivery.

The most dreaded complication was the postpartum hemorrhage. There were 168 hemorrhages (no deaths) during the FNS' second 1,000 deliveries.<sup>1</sup> As a precaution against such emergencies a sterile glove and filled hypodermic were at hand during every delivery.

A typical hemorrhage was described by Dorothy Buck, the midwifery supervisor, in a 1936 issue of the Quarterly Bulletin.

Consider the case of Mrs. Gray, in her eighty-year-old windowless, one-room log cabin. Mrs. Gray felt rather honored by the rare event of being attended by two nurse-midwives. One midwife holds the lusty new baby; the other has just completed the delivery. Suddenly there is a gush of blood. It seems almost no time before the mother's face becomes a terrifying white, her skin cold and clammy. While the content of one hypodermic is pressed home, the other nurse is filling the

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<sup>1</sup>Elizabeth J. Steele, "Summary of Second 1,000 Midwifery Records of Frontier Nursing Service, Inc.," Quarterly Bulletin XI (Summer 1935):13-14.

second. It is evident that the bleeding will not be controlled in time by these drugs. Without a moment's hesitation one midwife pulls on the rubber glove which has been waiting and so crushes the bleeding points between her hands that no further blood can escape. The physician is sent for in post-haste. The one midwife dares not for a moment relax her hold on the uterus, so it is left to the other, with the help of a neighbor woman, to warm blankets and wrap up the exhausted mother, surrounding her with irons heated in the open fire and fruit jars full of hot water, to bandage the arms and legs to keep the remaining blood near more vital organs, and to give rectal salines to replace some of the lost fluid. At last (after four hours!) the welcome hoofs are heard outside and Dr. Kooser arrives to take charge of another critical situation. In cases like this he always brings supplies and set-up for giving fluid intravenously, and before he leaves Mrs. Gray is much better.<sup>1</sup>

In such cases the nurse spent the night with the patient and the physician usually slept at the nearby center in order to be readily available.

The FNS kept detailed statistical records on its patients and staff. In a 1937 Quarterly Bulletin article Mary B. Willeford, the assistant director, and Marion S. Ross, the statistician, attempted to show statistically how the nurse spent her day.<sup>2</sup> They admitted, however, that there was no such thing as a typical day.

They reported that during an average working day the nurse spent 26.8 percent of her time caring for her horse and traveling; 26 percent on midwifery cases; 13.6 percent on

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<sup>1</sup>Dorothy Buck, "How Does the Frontier Nursing Service Handle Obstetrical Complications?" Quarterly Bulletin, XI (Winter 1936):13.

<sup>2</sup>Willeford and Ross, "How the Frontier Nurse Spends Her Time."

public health work; 3.2 percent for sick nursing; 16.3 percent on record keeping and office work; 9 percent on running her center; and 5.15 percent on miscellaneous activities.

The day began at 8:30 A.M. when the nurse groomed her horse and rode out on district. As far as possible she planned her work in relation to a specific creek. She might do a postpartum and a prenatal, answer a sick call and make such public health visits as she could, all on the same creek. Sometimes she returned to the center for lunch. Otherwise, she crossed a hill and worked her way down a second creek. On such a day the nurse made an average of eight visits. She tried to return by 3:30 or 4:00 P.M., have tea and write up her records before dark. Actually the nurses seldom completed their paper work before 9:00 P.M., leaving only an hour or so for reading and letter writing.

One day a week the nurse held clinic mainly for pre-natals and children. Each district nurse cared for approximately 100 families with about 525 people. Her caseload usually included about 25 babies under one year of age whom she tried to see twice a month; 100 preschool children; 200 school age children; and 200 adults. There were between ten and twenty midwifery cases who had to be visited regularly.<sup>1</sup>

No two days were the same. Life was full of unusual adventures; sometimes answering a midwifery call could be downright spooky, Betty Lester reported.

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<sup>1</sup>Willeford and Ross, "How the Frontier Nurse," p. 3.

One night a mountaineer came after Lester for his wife, who was about to have a baby. One of FNS' few rules was that no nurse should ride alone after dark. Although their distinctive blue-gray riding uniforms identified them as FNS and permitted them to ride unmolested anywhere in the mountains, Breckinridge feared a possible accident, a frightened horse falling in the dark, or running away on a treacherous trail.

But the man had no mule and was on foot, the trip would have been slow and the message said hurry, so Lester set off alone, knowing the father would be close behind should she have an accident. She rode quickly along a mountain ridge and then decided to cut down a hollow to shorten her journey.

. . . Suddenly, with no sight or sound that I could see or hear, Raven (her horse) halted in her stride, with a snort of fear, ears pointed, her body rigid, and a cold sweat breaking out on her. I sat tense and strained, listening, too scared to move.

In the darkness ahead I saw the ruins of a little abandoned cabin. Raven at first refused to pass. I had to talk to her and soothe her. Gradually, after what seemed an eternity, the tenseness left Raven's body and she shivered as I did. We passed out of the hollow and struck a wider trail. The fear had gone but I left behind a feeling of unhappiness.

She reached the house in plenty of time. While waiting for the birth Lester gossiped with her patient and two neighbor women. She explained that she had arrived so quickly because she had cut down the hollow.



. . . "Miss Lester, did you come past the hollow by yourself?" Smiling cheerfully I said, "Of course, why not?" . . .

. . . "Don't you know hits ha'nted? A man was killed up in that hollow years ago and you can hear him moaning. I sure wouldn't go by thar, day or night."<sup>1</sup>

The District nurses tried to become as much involved in community activities as time permitted. At the Confluence center, for example, Nora Kelly and Dela Int-Hout made the center a neighborhood forum with a debating club and sewing classes. When she moved to the Flat Creek center Kelly founded a knitting club which grew into a cooperative.<sup>2</sup>

#### The Physician and His Work

Dr. John H. Kooser, FNS medical director, described medical and other problems common to the area during the thirties in a Quarterly Bulletin article.

"My prenatal work is varied," he wrote, "intestinal parasites, cardiac conditions, nephritis, anemias, pre-eclamptics, acute infections, small pelves, large babies, hemorrhage and mal-presentations."<sup>3</sup>

Since many patients with one or more of these problems would or could not enter the hospital, Dr. Kooser made

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<sup>1</sup>Betty Lester, "What Stopped Raven?" Quarterly Bulletin XII (Spring 1937):3.

<sup>2</sup>Nora Kelly, "The Frontier Nursing Service Handknitters," Quarterly Bulletin XIII (Spring 1938):13.

<sup>3</sup>John H. Kooser, "Mountain Medicine," Quarterly Bulletin X (Spring 1935):23-29.

home visits and in cooperation with the nurse-midwife outlined a course of treatment.

Much of his time was spent with children. Mountain children, he felt, differed from city children in the quantity rather than the quality of their diseases. The principal problems were parasitic infestations: ascaris, hookworm, tapeworm and strongyloides. Apart from the parasites Dr. Kooser found nothing unusual about his young patients.

The chief FNS aim, Dr. Kooser wrote, was preventive medicine with sanitation of first importance.

. . . One starts with the newborn, where attempts are made to keep "grannies" from using prophylactic brews against poor health. Next in order is supplementary feeding--cod liver oil and tomato juice. Diphtheria immunization is due about this time, followed by weaning talks. "Mountain teething" problems arise next and may become serious. Associated with this is intercurrent infection, otitis media, pyelitis, gastroenteritis. These infections may constitute the infant's first life scrimmage . . . By this time the walking stage is in full force and with it the first introduction to dirt--fingernails, mouth, bare feet, soil pollution and the inevitable intestinal parasites . . . The subsequent pediatric stage is otherwise not unusual save in concentrated efforts which take the form of tonsil, dental, eye and general clinics, as well as large inoculation clinics.<sup>1</sup>

For home visits Dr. Kooser carried in his saddlebags stethoscope, otoscope, a blood pressure outfit and pills. Drugs included codeine, several colors of soda and aspirin. Most homes already contained corn meal, castor oil, epsom salts, coal oil, and in many cases turpentine. Japanese oil

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<sup>1</sup>Ibid., p. 26.

and Raleigh (a patent medicine company) products were also present.

The principal hospital cases, as reported by Dr. Kooser, were women with abnormal obstetrical symptoms, patients with serious worm infestations, children with summer diarrhea, and the usual cardiac, pneumonia, accident and similar ailments found in all hospitals.<sup>1</sup>

Pellagra was endemic to the area and one of Dr. Kooser's main concerns. Apparently caused by lack of nicotine in the diet, pellagra was mainly confined to low income groups.

Classical pellagra began in the early spring with loss of appetite and weight. Sore tongue, sore mouth, a stomach pain, nervousness, diarrhea and rash followed. Sometimes the disease showed psychotic symptoms.

In April 1938, Dr. Kooser helped the University of Cincinnati pellagra program start a clinic at Hazard. The clinic utilized nicotinic acid in a combined treatment and prevention study.<sup>2</sup>

Naturally, the FNS preferred handling complicated cases in the hospital, but transporting the patient to the hospital was often difficult. Breckinridge described the case of a woman bleeding from an obstetrical complication

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<sup>1</sup>Ibid., pp. 23-29.

<sup>2</sup>John H. Kooser, "Pellagra," Quarterly Bulletin XIV (Spring 1939):7-10.

known as a central placenta previa. It was a cold February afternoon. The woman lived on Sally Sizemore's Branch about six miles from the hospital. Peggy Tinline, the nurse-midwife, called Dr. Kooser who came and prepared the patient for the trip to the hospital. He took a blood sample and then rode on ahead to get everything ready for a Caesarean section; to obtain blood from the staff and phone the surgeon in Hazard.

In the meantime the patient's husband went up and down the creek recruiting sixteen stretcher bearers. They put the woman on a stretcher made from two husky saplings with several cross-slats. Four men carried the stretcher while others carried lanterns and led horses and mules between taking turns with the stretcher. It was a terrible trail, down Sally Sizemore's Branch, up Bull Creek, up Jones' Branch, over a mountain to Asher's Branch and over Thousandsticks Mountain to Hyden Hospital. They walked through icy creeks sometimes up to their knees. Their overalls froze and they averaged about a mile per hour. The operation was successful and the five-pound-fourteen-ounce baby and her mother none the worse for wear.<sup>1</sup>

#### Threats to Wendover and Breckinridge

Camp Creek flows into the Middle Fork of the Kentucky River two or three miles above Wendover. Along its banks

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 310.

lived the Morgan, Cornett, Howard and Hoskins families who cooked and handled Wendover maintenance work.

In the spring of 1936, Breckinridge received an anonymous letter which had been posted in Hyden on March 21, ordering her to fire the Camp Creekers, "Jayhue, Bell, Lee, Lullie and Curmitt and all them old mean women," and give their jobs to others by April 1 or the barns would be burned, "there will be an awfull (sic) explosion, you will be subject to be shot at from the bushes."<sup>1</sup>

Breckinridge showed the letter to Sheriff Rex Farmer and FNS attorney M. C. Begley and upon their advice hired a deputy sheriff as night watchman.

On April 21 a forest fire was started near Wendover and put out by neighbors. On April 25 a second fire was set in five places on land owned by Fordson Company near Wendover. The fire was finally doused after ten acres burned.

On July 13 someone saturated the Wendover pump house with an inflammable material and set it afire. Soon gasoline stored in a building behind the pumphouse exploded, the big house was evacuated and key files removed. Luckily, the fire did not spread.<sup>2</sup>

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<sup>1</sup>Undated, unsigned letter addressed to Mrs. Breckinridge, envelope postmarked March 21, 1936, in FNS files at Wendover.

<sup>2</sup>"Report to the Members of the Executive Committee of The Frontier Nursing Service (Confidential)" from Mary Breckinridge, dated August 8, 1936.

The sheriff then phoned Lexington for bloodhounds, but after a long hunt the hounds lost the trail. At the same time the case was referred to the Justice Department which took no action. So Breckinridge wrote Eleanor Roosevelt, whom she knew fairly well, and the FBI took over.

There were now two night watchmen assigned to Wendover, one of whom found traces of what he thought was an ambush. One of the first FBI acts was to request handwriting samples of the people living in the area and the Wendover nurse was sent through the district with copy books in which she asked women to list Christmas presents they wanted for their children.

The FBI soon identified the handwriting as belonging to a woman living not two miles from Wendover, described by the agent as "a low-grade emotional type, belonging to a family with a local reputation for being very peculiar--a family that has always gotten on poorly with those outside their own circle."<sup>1</sup>

The woman had five living children and was pregnant. The agent suspected that the sabotage had been done by one of two men, both very odd but neither of whom was husband to the woman.

Breckinridge asked the Department of Justice not to prosecute. She feared to do so would infuriate the men and

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<sup>1</sup>"Supplemental Report of the Director of the Frontier Nursing Service to the Executive Committee at its Meeting, Friday, November 5th, 1936, at the Pendennis Club, Louisville."

cause further damage. And, as she wrote the Executive Committee, the family was poor and pitiful, although unbalanced not criminals. "The case is one for social assistance and the deepest compassion and should be so handled."<sup>1</sup>

Breckinridge loved drama. Her staff believed she often created crises just for the excitement.<sup>2</sup> She played this incident to the hilt writing long reports to the Board then swearing them to secrecy for the sake of the investigation<sup>3</sup> and writing equally dramatic confidential letters to wealthy donors requesting money for a new pump house.

She wrote one such letter to T. Kenneth Boyd in Winnetka, Illinois, explaining that she could not make a general appeal so was writing a few close friends.<sup>4</sup> He replied with a check for two thousand dollars, five hundred dollars more than his usual annual gift.<sup>5</sup>

In her letter of thanks Breckinridge wrote in part:

. . . There is no danger for anyone but me in the sort of extortion racket that has come up this year. . . . it is aimed directly at me and not at anyone else in the Service, and purports to be a demand for the Wend-over payroll, which is a huge sum in here and practically supports ten families.

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<sup>1</sup>Ibid.

<sup>2</sup>FNS interview with Helen E. Browne.

<sup>3</sup>Author's note: Nowhere in the voluminous file on this incident is the name of the woman and her family given.

<sup>4</sup>Letter from Mary Breckinridge to T. Kenneth Boyd dated September 16, 1936.

<sup>5</sup>Letter from T. Kenneth Boyd to Mary Breckinridge dated September 22, 1936.

You see, the situation in here is that I control a great deal of power. I don't mean in reference to medical, nursing or social services which are available for all alike, but as regards funds given out for work. With a large drifting population, formerly employed in the mines, and more than can be carried by W.P.A., there is an immense demand for money to support life. I try to see that the work we give out reaches those who need it most. On the other hand, our regular jobs cannot be given out on the basis of need, but on the basis of character, ability, and fidelity. The regular employees of the Frontier Nursing Service are almost the only people in this county with an assured income. The floating population haven't even any land, and desperately need money, or the work to bring money. They are not in the main as reliable a group as the old mountaineers, who never left the land. Many of them are jealous of the fact that we give permanent employment to the old group who need it less, but who are so much more reliable.<sup>1</sup>

It was partly because of this incident that Breckinridge deeded the Wendover Big House to the FNS in 1936.<sup>2</sup>

In 1936 Breckinridge told the board that her personal fortune of \$70,000 was nearly exhausted. She was scheduled for an operation on her back, which she had broken in 1931, so resigned from the board and asked the FNS to help her to the extent necessary. She reported that she had underwritten the FNS during its first five years, loaned the FNS without interest \$9,940 and built Wendover at a cost of about \$20,000 and given it to the Service. (From that time on, Breckinridge was on the FNS payroll at the same rate as her nurse-midwives.)

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<sup>1</sup>Letter from Breckinridge to Boyd dated September 27, 1936.

<sup>2</sup>Breckinridge memo to Executive Committee, FNS, dated August 8, 1936.



With the help of \$10,000 interest from the endowment fund the FNS had carried itself for the previous year, Breckinridge explained, and should continue to do so.<sup>1</sup> The budget was \$92,000, compared to \$11,000 for 1925-26.<sup>2</sup>

### The Midwifery School

The declaration of war in Europe on September 3, 1939, struck the FNS a serious blow. Three-quarters of its nurse-midwives were British and most of them wanted to return home to serve their country.<sup>3</sup> By 1940 eleven English nurse-midwives had resigned.<sup>4</sup>

It was impossible to recruit new British nurse-midwives or to send American nurses to England for midwifery training. The only solution was to open a school to develop its own staff, as Breckinridge had long dreamed of doing. In fact the amended articles of incorporation of November, 1931, included in its objectives training American nurses in midwifery and frontier techniques.

Breckinridge procrastinated because she wanted to locate the school in Lexington and affiliate it with the University of Kentucky. Although the university approved

<sup>1</sup>Minutes of Executive Committee, FNS, March 4, 1938.

<sup>2</sup>"Annual Report of the Frontier Nursing Service," Quarterly Bulletin XIV (Summer 1938):3.

<sup>3</sup>Minutes of Executive Committee, September 6, 1939.

<sup>4</sup>Compilation from 1939 and 1940 Quarterly Bulletin "Field Reports," and Breckinridge, Wide Neighborhoods, p. 331.

the idea, she had been unable to find money for school facilities.<sup>1</sup>

With the coming of war, however, she had no alternative. She obtained the board's consent and opened the school November 1, 1939, in Hyden with a class of two nurses detached from the hospital staff.<sup>2</sup>

Earlier Breckinridge visited each center to gain district committee support. Approximately two thousand mountaineers endorsed the program at rallies all over FNS territory, Breckinridge reported to the board.<sup>3</sup>

Dr. Arthur T. McCormack, health commissioner for the Commonwealth of Kentucky, authorized the creation of the school along lines similar to British schools and promised to arrange for impartial examinations like those conducted by the Central Midwives' Board of England and Scotland.

Six trustees donated money for equipment and a former courier financed the construction of Mardi cottage, a student dormitory, thereby making it possible to enlarge the class.<sup>4</sup>

The curriculum for the six-month course followed that of the Central Midwives' Board of England and Scotland. Each student was required to deliver twenty midwifery cases of which five had to be in the hospital and five on district.

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 323.

<sup>2</sup>Ibid., p. 324.

<sup>3</sup>Minutes of Executive Committee, October 31, 1939.

<sup>4</sup>Ibid.

The emphasis was on teaching pupil-midwives:

. . . how to manage the normal obstetrical patient in such a way as to prevent the abnormal wherever possible, to recognize the abnormal when it does occur, and to apply the proper emergency measures if such are necessary before the physician arrives.

The special aim of the Frontier Graduate School of Midwifery is to train nurse-midwives for remotely rural areas.<sup>1</sup>

The first two classes were of four months' duration and paid for from scholarships provided by trustees. The third class was extended to six months. Two students were added to the fourth class to accommodate U. S. Children's Bureau scholarships for nurse-midwives in southern and western states.<sup>2</sup>

Almost at once the FNS began preparing graduates for other agencies. By 1945 graduates with federal Bolton Act scholarships were working in fourteen states and on the island of Guam.<sup>3</sup>

Concurrently the FNS began training nurses in public health and district work. At the request of the School of Nursing at Johns Hopkins Hospital, the FNS took four seniors under Bolton Act scholarships for six months training in district work. These were followed by two more students from Johns Hopkins and several from Michigan, Ohio and Lexington.<sup>4</sup>

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<sup>1</sup>Dorothy F. Buck, "The Frontier Graduate School of Midwifery," Quarterly Bulletin 18 (Autumn 1942):32.

<sup>2</sup>Ibid., pp. 31-36.

<sup>3</sup>Minutes of the Executive Committee, December 2, 1945.

<sup>4</sup>Breckinridge, Wide Neighborhoods, p. 329.

The Bolton Act ended after the war but there was no lack of applications for the graduate school. Those accepted fell into three categories: nurses on FNS scholarships, required to remain on staff for two years; missionaries whose fees were paid by their churches at a 50 percent discount; and veterans on the GI Bill of Rights. Applicants had to be registered nurses with at least six months' experience. Tuition remained \$600 until the 1960's.

By 1953 there were 122 graduates working in the U. S., the Philippines, Japan, Alaska, India, Thailand, Africa, South Africa and Latin America.<sup>1</sup>

### World War II

#### The War and Leslie County

The FNS set aside a room in one of the Wendover log cabins for a Victory Shrine Chapel. A service flag hung on the wall and the names of the men and women who served in the war were entered in a notebook with their units and decorations. By the end of the war the number under the blue star on the flag (the number who served) was 1,040 and under the gold star 42. This did not include couriers and ex-staff whose names were entered on a separate page.<sup>2</sup>

The high standard of health of FNS-cared-for families partially explained the large number of recruits from the

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<sup>1</sup>Minutes of FNS General Meeting, May 28, 1953.  
(Hereinafter referred to as Annual Meeting.)

<sup>2</sup>Breckinridge, Wide Neighborhoods, p. 335.

area. In fact, Dr. McCormack, health commissioner for the Commonwealth of Kentucky, reported that physicians had been struck by the superior fitness of the recruits from FNS territory as compared to enlistees from other parts of the mountains.<sup>1</sup>

A large number of older men and youths, who had been unable to pass the Army physicals, migrated to norther factory jobs. This was the beginning of an out-migration which depleted Leslie County's population by 20 percent during the period 1950-60 and by almost 30 percent during the fifties.<sup>2</sup>

By the end of the war, a retired nurse-midwife reported, there was such a shortage of able-bodied men that she was unable to find male stretcher-bearers and had to recruit women.<sup>3</sup>

By 1943 seventeen-year-olds were enlisting. Maurice Morgan, grandson of the Taylor Morgan who sold Breckinridge the Wendover property, was one of the first FNS babies to enlist. He was seventeen.<sup>4</sup> Morgan retired some twenty years later as a commander, having been sent to college by the Navy and then having served in several middle eastern countries as

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<sup>1</sup>"Field Notes," Quarterly Bulletin 19 (Spring 1944): 91.

<sup>2</sup>Thomas R. Ford, ed., *The Southern Appalachian Region* (Lexington: University of Kentucky Press, 1967), pp. 56-57.

<sup>3</sup>Author interview with retired nurse-midwife.

<sup>4</sup>"Field Notes," Quarterly Bulletin 18 (Spring 1943): 67.

a naval attache. Morgan is now regional disaster engineer for the federal government and a leader in Leslie County community activities.

Many mountaineers took jobs where there was no housing available for their families. They lived in camps or in urban rooming houses. A retired nurse-midwife and mental health nurse believes that this began the breakup of many families.<sup>1</sup>

On the home front, the Leslie County Nutrition Council was formed with Breckinridge a key member. Organized at the request of the federal government the council asked teachers to urge families in their neighborhoods to plant fall gardens, to can and store more food than ever.<sup>2</sup> By 1941 the Hyden high school and grammar school lunch programs, partially financed by WPA, fed 400 children.<sup>3</sup>

The University of Kentucky radio listening program, which had been started in 1933, was expanded so that there was one center within a three mile reach of all Leslie Countians. Radio station WHAS in Louisville financed the expansion.<sup>4</sup>

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<sup>1</sup> Author interview with retired nurse-midwife.

<sup>2</sup> "Nutrition Council Formed," Thousandsticks News, 24 July, 1941.

<sup>3</sup> "Hyden School Lunch Project," Thousandsticks News, 23 October, 1941.

<sup>4</sup> "WHAS (Louisville) Gives Batteries to UK Listening Centers," Thousandsticks News, 24 April, 1941.

The County's weekly newspaper's headlines indicated that life in Leslie County during this period was far from dull. One 1941 headline read, "One killed, one wounded at religious meeting on Bowens Creek." The shooting, the reporter explained, was the result of "former grudges."<sup>1</sup>

Another headline read, "Bitten by Snake at Holiness Meeting on Big Creek." Jimmy Sizemore who was bitten on the hand by a rattler was believed to be recovering, the reporter wrote.<sup>2</sup> There were stories about moonshine stills being destroyed<sup>3</sup> and a brief notation, "Bruce Hoskins Shot and Killed at Idle Hour road house near Hyden."<sup>4</sup>

Breckinridge reported that numerous shooting victims had been hospitalized.

. . . even if the Army turns down good marksmen, this is not the time in which to shoot one's friends. All of this reminds us that when Tommy (one of the nurses) returned to the Hospital after the death of her father, one of the patients, Homer, aged eight, asked her, "Did your Daddy die, I mean, did he just die or was he shot?"<sup>5</sup>

#### The FNS and the War

Because of the large number of British nurses on its staff, the war, particularly before Pearl Harbor, was felt more deeply by FNS staff than by many Americans.

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<sup>1</sup>Thousandsticks News, 3 July, 1941.

<sup>2</sup>Ibid.

<sup>3</sup>"Moonshine Stills Destroyed," Thousandsticks News, 27 November, 1941.

<sup>4</sup>Thousandsticks News, 29 January, 1942.

<sup>5</sup>"Field Notes," Quarterly Bulletin 19 (Spring 1944):88.

Breckinridge was very internationally minded and, in addition to worrying about the conflict's effect on the FNS, thought and wrote a great deal about the war and the world's future. She was specially interested in the concept of "Union Now."<sup>1</sup>

Although the Office for Emergency Management of the War Manpower Commission listed employees of the Frontier Nursing Service as essential, the FNS never claimed exemption for anyone and several key employees left, including Dr. Kooser, who joined the Navy after nearly twelve years with the FNS.

The FNS had a high priority for supplies and only became seriously short of two items; horseshoes and diapers. In 1942 its wholesale house notified FNS that it could no longer supply horseshoes. None could be found anywhere, so Breckinridge referred the shortage to high level contacts in Washington, none of whom could see why horseshoes were essential to childbirth. For that matter, Breckinridge complained, they didn't understand that horseshoes were essential to horses.

One War Production Board official wrote that wear and tear on horseshoes might be minimized if the shoes were taken off the horses outside of working hours. He also suggested that "unessential horseshoe styles should be eliminated."

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<sup>1</sup>Breckinridge, Wide Neighborhoods, p. 334.



Representative John Flannagan rescued the horses and their owners by asking on the House floor if there could be zipper horseshoes. After the press had joined the laughter a factory was authorized to produce the shoes.<sup>1</sup>

In 1943 the FNS ran desperately short of diapers and appealed through the Quarterly Bulletin for old materials to be used as a substitute. Much of the linen received in response was so old it fell apart after one washing.

Finally on July 7, 1943, Representative Frances Bolton presented the national problem of diapers on the House floor. Breckinridge later said:

. . . She wrote us privately that she had a rough time. In the newspapers we read how one member of Congress had gotten up to reply that, in earlier times, "millions of babies had been born without these conveniences." We wondered how he happened not to have heard of swaddling clothes, which took a great deal more yardage than diapers.<sup>2</sup>

As the war progressed many of the maintenance and barn men enlisted. By the end of the war couriers helped shoe horses, load sawdust and hay, clean out the stalls and do many of the heavy jobs formerly handled by men.

Luckily most of the Wendover maintenance employees were still there when the administrative building (the Garden House) burned to the ground.

The fire started at midday January 8, 1942, while the staff were eating. Breckinridge was away on a fund raising

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<sup>1</sup>Ibid., p. 330.

<sup>2</sup>Ibid.

and vacation trip. A passerby saw the flames from the road and shouted the alarm.

By the time the staff reached the Garden House, flames were coming out the windows. Lucile Hodges, the bookkeeper, got into her office and handed out most of her books and ledgers before Dorothy Buck, the assistant director, entered the office and forced her to leave.

The maintenance men, several passersby and a preacher, there for his mail, fought stubbornly, but the fire had too good a start. The only injury was to the preacher, whose hands and feet got frostbitten. Agnes Lewis and the couriers lost all of their clothes and personal possessions. The records including the fifth thousand midwifery cases were burned to a black powder. Luckily the Metropolitan Life Insurance Company had duplicate copies of reports and the annual statistics were on file elsewhere.

The Garden House had been heated by coal which continued burning for several days. The thermometer hovered around zero so that the pipes from the pump house to the storage house froze. There was just barely sufficient water for cooking, none for dousing the smouldering coals.<sup>1</sup>

When Breckinridge learned of the fire she wired Lewis to start work immediately on plans for a new Garden House. She wanted to take Lewis' mind off the fire and stimulate her

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<sup>1</sup>"Garden House Fire," Quarterly Bulletin XVII (Winter 1942):3-7.

to think constructively about the future. But Lewis was furious.

We still hadn't gotten the pipes thawed and the pumps running and a place for people to work. And of course were getting no sleep at all. I took the telegram to Bucket (Dorothy Buck) and said, "Bucket, you write Mrs. Breckinridge, you call her or telegraph her and you tell her that when the water pipes are repaired and the pumps are running and the fire is put out I will think about plans but until that happens I will not think about plans.

Upon hearing of Lewis' reaction Breckinridge wired Dr. Kooser to give Lewis something to calm her down. This infuriated Dr. Kooser. Didn't she think he knew how to take care of the staff, he fumed.<sup>1</sup>

Four days later Lewis, her secretary and a courier drew up plans for a new Garden House. When she finished she felt "greatly rested and refreshed," Lewis admitted to Breckinridge.<sup>2</sup>

Construction started immediately. Money for the new building poured in following publication of the Winter 1942 Quarterly Bulletin which contained vivid descriptions and staff photographs of the fire. The new Garden House was finished the following fall.<sup>3</sup>

The FNS had always raised some of its food, so it didn't suffer from severe wartime food shortages as did many

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<sup>1</sup>Oral history interview with Agnes Lewis.

<sup>2</sup>Memo from Agnes Lewis to Breckinridge, January 22, 1942.

<sup>3</sup>"The Garden House," Quarterly Bulletin 43 (Autumn 1942):13.

institutions. However, with the maintenance men gone, caring for the Wendover chickens, pigs and three-acre garden proved a problem. Suck rose at daybreak to feed the four hundred pigs. Breckinridge took over the evening feeding and the staff divided the chore of cleaning the hen houses.

The garden was a stupendous job as Breckinridge explained.

We put out 1,000 cabbages, hundreds of tomato plants, eggplants, beets and peppers. As is the custom here, we always plant our first beans on Good Friday, and everything is planted in relation to the moon and the signs of the Zodiac. We plant successions of things like onions, lettuce, radishes, beans and corn.<sup>1</sup>

Supplies and trained help were difficult to obtain, otherwise the work of the district nurses remained much the same as in earlier days. Louise Mombray described the job of running a district center in a 1945 Quarterly Bulletin article.

The nurse was responsible for the upkeep of the house, the two acres of pasture, the approach road, the barn and its animals and the garden.

The nurse returned from her rounds at around four and then had to unsaddle, groom, feed and water her horse before going to the house. She couldn't possibly handle the house-keeping on top of her job so usually had a live-in maid.

In addition to the house work the maid fed, watered and milked the cow, fed the chickens and collected the eggs,

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<sup>1</sup>Breckinridge, "Field Notes," Quarterly Bulletin 20 (Spring 1945):57.

and helped with the garden, for food was hard to come by and district nurses raised as much of their own as they could.

The center nurse bought staples at a local store and gave an order for fruits, coffee and a few luxuries to a neighbor who drove to Hyden once a week. She often traded for fresh vegetables or was paid for her services in kind.

With luck the district nurse had a part-time barn boy to clean out the stalls each day, put down fresh sawdust bedding and in the winter shovel paths and carry out furnace ashes. In the evening she and her maid canned vegetables, fruit or freshly butchered pork obtained from a neighbor.

The outpost nurse was responsible for the center's fuel; three cords of wood and sixteen tons of coal to be cut or dug locally and delivered during the slack season between hoeing and harvesting. She rationed the kerosene used for the lamps so the huge drum could be filled when roads were open to truck travel. She ordered grain, hay and salt blocks for the horses and arranged to have it hauled from the nearest railroad some twenty miles away.

She supervised local workhands in the heavier jobs of running a center: pasture fencing, seeding and fertilizing; cleaning the spring and water tank and chimney flues, and inspecting the furnace grate and firebox.<sup>1</sup>

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<sup>1</sup>Louise Mombray, "Running a Center," Quarterly Bulletin 20 (Spring 1945):5.

Author's note: Each center was provided detailed written instructions on equipment maintenance and animal care.

Towards the end of the war personnel shortages became acute. To fill hospital nurse vacancies several couriers took nurses aides courses and returned to staff the wards. Helen Browne, the hospital director, said it would have been impossible to run the hospital without them.<sup>1</sup>

One happy side effect of the war was the acquisition of the first FNS jeep procured by a Detroit friend on a more or less permanent loan from the War Department.

#### 1945-65

The postwar years saw a slump in the lumbering and coal mining industries and an out-migration, between 1950 and 1960, of almost 30 percent of Leslie County's population.<sup>2</sup> At the same time the number of FNS hospital patients rose by almost 39 percent and district patients by approximately 14 percent.<sup>3</sup>

The years 1945-65 were also a period of gradual modernization featuring the introduction of electricity and improved communications.

#### Leslie County, 1945-65

##### Out-migration and Poverty

Deep coal mining came into Leslie County in the early forties following the construction of a highway connecting

<sup>1</sup>FNS interview with Helen Browne.

<sup>2</sup>Kentucky Deskbook, p. 44.

<sup>3</sup>Compilation of figures from 1950 and 1960 annual reports printed in Summer 1950 and 1960 Quarterly Bulletin.

Hyden with the Hazard railroad spur. The first coal strip mile opened on Bear Branch, Leslie County, in 1947 with royalties of ten cents per ton to the landowner which was considered a lot of money, according to one of the owners.<sup>1</sup> During the late 1940s Leslie County miners earned four to six dollars per day.<sup>2</sup> The Ritter Lumber Company opened a large sawmill near Hyden in 1946;<sup>3</sup> there were several smaller mills throughout the county.

By 1948 the coal boom was over. To survive, mine owners mechanized and laid off many of their employees. By the fifties the county was lumbered over.<sup>4</sup> So there were virtually no jobs and many ambitious young families migrated north in search of work. During the years 1950-60 Leslie County's population fell from 15,537 to 10,941, a decrease of 29.6 percent, the highest out-migration county loss in the state.<sup>5</sup>

Many of those remaining went on welfare, thus increasing the dependency tendencies started during the Great Depression. At this time there were two public welfare

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<sup>1</sup>Author interview with Lottie Roberts, retired businesswoman and social worker.

<sup>2</sup>Caudill, Night Comes to the Cumberlands, p. 255.

<sup>3</sup>Thousandsticks News, 11 April 1946, p. 1.

<sup>4</sup>Caudill, Night Comes to the Cumberlands, pp. 256-7.

<sup>5</sup>Ralph Ramsey, Population Change in Kentucky Counties 1950, 1960, 1970, Resource Development Data RS-32 (University of Kentucky Sociology Department, November 1971), p. 7.

programs: state aid, locally termed "the welfare," and social security. State aid provided assistance to indigent citizens who were blind, dependent children, more than sixty-five years old or totally disabled. Although administered by the state, it was mainly financed by the federal government. The federally funded and administered social security provided checks for beneficiaries and their dependents who had reached retirement age or become disabled. The state old age pensions, which averaged about fifty-five dollars, had come to be considered a right by 1960, although they had originally been planned as assistance to the desperately poor only.<sup>1</sup>

Many of the laid off middle aged miners lacked the drive to migrate. Often they were semi-literate and unemployable. Although they had large families they were refused Aid to Dependent Children monies unless they were physically or mentally unable to work.

Beginning in the early sixties many unemployed fathers were put to work under the federally funded project known locally as the "Happy Pappy" program. They were paid \$1.25 per hour to clean out creek beds, cut roadside weeds and perform miscellaneous chores assigned to them by their school board, county or city supervisors.<sup>2</sup>

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<sup>1</sup>Caudill, Night Comes to the Cumberlands, pp. 273-74.

<sup>2</sup>John Fetterman, Stinking Creek (E. P. Dutton & Co., 1967; Dutton Paperback, 1970), p. 79.



Prior to the sixties many unemployed fathers became welfare malingerers and attempted to obtain medical certificates stating they were sick enough "to draw welfare."<sup>1</sup>

A few 1960 statistics illustrate Leslie County's poverty. In 1960 Leslie County had the highest dependency ratio (the ratio of non-workers per 100 workers) in the state, 508.<sup>2</sup> The median family income for Leslie Countians was \$1,838 as compared to \$5,660 for the U.S. and \$4,051 for Kentucky.<sup>3</sup> Fifty-five percent of Leslie County's 2,713 families were below the poverty threshold.<sup>4</sup> Only 329 or 13 percent of Leslie County's 2,379 homes had complete indoor plumbing<sup>5</sup> and 304 or 13 percent adequate sewage disposal.<sup>6</sup> The mean number of persons per household was 4.1 as compared to 3.3 for the nation and 3.5 for the state.<sup>7</sup>

The level of education was equally low. In 1960 the median number of school years completed by persons 25 years

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<sup>1</sup>Caudill, Night Comes to the Cumberlands, p. 280.

<sup>2</sup>Ralph J. Ramsey and Paul D. Warner, Kentucky County Data Book (University of Kentucky Cooperative Extension Service Department of Sociology, Resource Department Series 16, 1974), p. 40.

<sup>3</sup>Ibid., p. 52.

<sup>4</sup>Ibid., p. 58.

<sup>5</sup>Ibid., p. 86.

<sup>6</sup>Ibid.

<sup>7</sup>Ibid., p. 92.

and over was 6.9 in Leslie County as compared to 10.6 for the nation and 8.7 for the state.<sup>1</sup>

Some Leslie Countains were contemptuous of the migrants and welfare malingerers. Cecil Morgan, a Camp Creek resident, said about 70 percent of the Camp Creek families had moved to Ohio. People just folded up, he said. "People could always garden, there was no call for going hungry."<sup>2</sup>

#### Gang Wars and Union Strife

Leslie County was a violent place in the late forties and early fifties and according to Harry M. Caudill, "the most primitive (county) in the plateau, and probably the most primitive political entity in the nation. . . ."<sup>3</sup>

Almost every issue of the Thousandsticks News carried one or more stories about shootings. Typical headlines read, "One dead, two shot in street affray,"<sup>4</sup> "Two more wounded in shooting affray,"<sup>5</sup> and "Two men killed, auto riddled with bullets."<sup>6</sup>

Leslie was a dry county, nevertheless you could buy whiskey and beer at any of the Hyden restaurants, according

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<sup>1</sup>Ibid., p. 25.

<sup>2</sup>Author interview with Camp Creek resident.

<sup>3</sup>Caudill, Night Comes to the Cumberlands, p. 254.

<sup>4</sup>Thousandsticks News, 6 May 1948.

<sup>5</sup>Ibid., 10 June 1948.

<sup>6</sup>Ibid., 4 August 1948.

to Vance Bowling, a former carpenter turned preacher. Several Hyden restaurants had gambling rooms in the back, he said.

There were "ginny barns" all over the county where they sold whiskey and women and had dances, Bowling said. "All in all Hyden was about as rough as any town in the country. People carried guns and there were lots of shootings in the street."<sup>1</sup>

The widow of a department store owner described what she called gang wars. On one occasion a bullet smashed into her house, situated just off Main street, during a battle between two gangs. When shooting started, she said, storekeepers locked their doors to prevent participants from ducking into the store.<sup>2</sup>

Dr. Gertrude Isaacs told of making a home visit to a pregnant woman the day after a Hyden shooting. It was in the early fifties.

My patients and I started talking about it, although we (nurses) weren't supposed to talk about shootings. I looked up and there was the man who had done the shooting. I knew him, I had dressed his wounds many a time. . .

Isaacs said her knees shook so badly she sat down. The youth described the battle, told her how he had saved his life by falling and playing dead and made Isaacs put her finger in a bullet hole in his hat.

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<sup>1</sup>FNS interview with Vance Bowling, Church of Christ preacher.

<sup>2</sup>Author interview with Hyden store owner.

Finally Isaacs mustered the courage to leave. The young man picked up her saddle bags, escorted her to her horse and held out his locked hands for her to use as a mounting block. "He couldn't have been more gentlemanly," Isaacs said.

When she was settled on her horse, Isaacs asked him why he had gone to Hyden when he knew they were laying for him. He replied, "Miss Isaacs, I am not a coward."<sup>1</sup>

This was typical of the Leslie County attitude toward the FNS nurse. To the best of the author's knowledge no FNS nurse has ever been deliverately harmed. It was for this reason that FNS staff were required to wear their riding uniforms (blue-gray for nurses, tan for couriers and brown for administrative staff) when on duty so that they could be easily identified as belonging to FNS.

A favorite FNS recreation during this era was picnics and a favorite locale was a rock formation on a mountain behind the hospital. That is, it was a favorite until the hospital superintendent received a letter warning her to keep the nurses away from the area, presumably because a still was located nearby.

On one occasion a group of nurses and several men friends from Hyden were eating a picnic lunch when a shot was fired over their heads. One of the men went off quietly,

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<sup>1</sup> Author interview with Dr. Gertrude Isaacs, retired nurse-midwife.

apparently to talk to the marksman, returned and said, "Let's go, this is not an acceptable place."<sup>1</sup>

Hospital nurses were generally warned when there might be trouble. "If the Caldwells and Brocks (two families who disliked each other) were going to be in town, we were told; that meant don't go downtown."<sup>2</sup>

The only law enforcement agent in the area was the sheriff. There were no state police.<sup>3</sup>

Breckinridge asked her nurses never to discuss "moonshining" with their patients. But the nurses usually knew where the stills were located. It was easy enough to tell, one retired nurse explained, since the moonshiners always burned white ash, which didn't produce much smoke, "So whenever we saw a small wisp of white smoke, we knew there was a still. We rode around them because we didn't want to get in trouble."<sup>4</sup>

One popular FNS nurse, Anna May January, is reputed to have drawn a gun on a revenuer when he tried to question her about local stills.<sup>5</sup>

A former district nurse told of starting up a mountain trail to visit a patient and finding the path blockaded. To detour around the roadblock meant a four mile ride, so she

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<sup>1</sup>Ibid.

<sup>2</sup>Ibid.

<sup>3</sup>Ibid.

<sup>4</sup>Author interview with retired nurse-midwife.

<sup>5</sup>Ibid.

went to the country store and inquired about the blockade. The next day a man appeared at the clinic and asked if she had a patient up the trail, which was blocked, and when she needed to see her. The nurse said, yes, she had a patient up the mountain, whom she saw every Wednesday afternoon. After that, the road block was lifted on Wednesday afternoons.<sup>1</sup>

The United Mine Workers of America (UMW) attempted to unionize Leslie County mines in the early fifties; in fact, according to a Hyden businesswoman, Leslie County had top priority in their plans.<sup>2</sup>

Because the operators had to absorb the expense of trucking their coal thirty or so miles to the railroad ramps, they pared miners' wages to four to six dollars a day, well below what was being paid in neighboring counties.<sup>3</sup> This, organizers felt, made them ready to be unionized.

The mines at Cutshin about five miles from the Perry County border were unionized in the mid-forties, but the rest of Leslie County remained nonunionized.<sup>4</sup>

In July 1951, the UMW held a rally next to a bridge, a mile from Hyden, attended by about 2,000 miners and a few organizers.<sup>5</sup> There were sixty state police present to keep

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<sup>1</sup>Ibid.

<sup>2</sup>Author interview with Hyden businesswoman.

<sup>3</sup>Caudill, Night Comes to the Cumberland, p. 255.

<sup>4</sup>FNS interview with Charlie Rice.

<sup>5</sup>Thousandsticks News, 2 August 1951.

the peace, but the police wanted trouble according to Charlie Rice, the president of the Cutshin union local. The men were angry, he said. Many had been followed by outsiders hired by the operators. Some had been shot at. They were particularly annoyed with Ep North, a deputy sheriff, so almost pitched him off the bridge into the river fifteen feet below. Tom Reiny, the chief organizer, saw there might be trouble, according to Rice, so he jumped on a truck and asked the men to break up and go home. That ended any attempts at unionization.<sup>1</sup>

If the union problems affected FNS, there was no record of it in the Quarterly Bulletin, FNS board meeting minutes or oral history interviews with staff; nor did Breckinridge refer to it in her autobiography. There were three subjects which Breckinridge preferred her staff not discuss: religion, moon-shining and local politics, of which the attempt to organize the mines was very much a part.<sup>2</sup> If you were careful and did not discuss these subjects, Isaacs said, you didn't learn what people felt about them,<sup>3</sup> which may be one reason nothing is recorded in FNS documents about the union strife.

#### Modernization and Improved Communications

The Kentucky Power Company brought electricity to Hyden during the war. By January 1947, there were 849 miles of electric power lines in Leslie County<sup>4</sup> and by the end of

<sup>1</sup>FNS interview with Charlie Rice.

<sup>2</sup>FNS interviews with Betty Lester and Gertrude Isaacs.

<sup>3</sup>Author interview with Gertrude Isaacs.

<sup>4</sup>Thousandsticks News, 30 January, 1947.

1947 electricity had reached Wendover, Wooton and most other outlying areas.<sup>1</sup>

The Hyden-Harlan highway was blacktopped, roads constructed up numerous creeks, and the wagon trail leading to Wendover improved under a postwar program partially financed by the State.<sup>2</sup>

Hyden was incorporated as a sixth class city in 1946 making it possible to hire a policeman and enforce public safety laws.<sup>3</sup> Street lights were installed the following year.<sup>4</sup>

By the late forties the Leslie County Telephone Company had almost 150 phones. The owner's wife, occasionally assisted by her teen-age daughters, served as operator; the owner and his brother maintained the lines. The switchboard was located in the owner's home on Main Street. Hours were 7:00 A.M. to 7:00 P.M.<sup>5</sup>

A retired nurse told of riding through Hyden in the late forties and having Lottie Roberts, the telephone operator, yell at her through a window, "You have a long distance call from Cincinnati, Miss S-----."<sup>6</sup>

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<sup>1</sup>Ibid., 20 February 1948.

<sup>2</sup>Ibid., 28 June 1945; 31 January 1946; 20 March 1947; 4 July 1946; and 22 May 1947.

<sup>3</sup>Ibid., 19 September 1946.

<sup>4</sup>Author interview with Lottie Roberts.

<sup>5</sup>Thousandsticks News, 20 February 1947.

<sup>6</sup>Author interview with retired nurse-midwife.



When asked about the incident Roberts said, "We'd probably been looking for her all day, we did the best we could."<sup>1</sup>

The 1950s saw a rapid decrease in Leslie County's isolation. Television spread up the hollows, and highways improved so that trips to Hazard and Lexington became commonplace. By the mid-fifties it was possible to reach most homes by jeep. The 1960 census showed that 1,330 families or businesses owned vehicles and 600 owned TV sets.<sup>2</sup>

Not all of Leslie County progressed equally, as Mary Ann Stillman Quarles illustrated in her master's thesis in sociology.<sup>3</sup> Quarles, a former FNS social worker, compared Camp Creek, an isolated area four to eight miles from a passable road, with Stinnett, a small community on U.S. Highway 421 connecting Harlan and Hyden.

She found Stinnett family incomes and educational levels higher than those on Camp Creek. The isolated Camp Creek families were larger and a good deal less sophisticated than their Stinnett brethren.

In 1952, when Quarles made her survey, Camp Creekers could only reach the main road by traveling a muddy track and fording the river twice. Camp Creek emptied into the Middle

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<sup>1</sup>Author interview with Lottie Roberts.

<sup>2</sup>Kentucky County Data Book, p. 105.

<sup>3</sup>Mary Ann Stillman Quarles, "A Comparison of Some Aspects of Family Life Between Two Areas of Leslie County, Kentucky" (M.A. Thesis, University of Kentucky, 1952).

Fork of the Kentucky River about a mile above Wendover, which in turn was three miles from the highway.

From the first heavy fall rains until late spring the roads were deep in mud and the creeks often overflowing. Inhabitants could get in and out only on foot, mule or horse-back.

They lived in old log houses or simple frame homes heated by fireplaces and minus indoor plumbing. Forty-four percent of the households had electricity.<sup>1</sup> Each family raised almost all of its own food. There were two one-room schools on Camp Creek taught by high school graduates and one church, the Church of Christ, with no full-time minister.<sup>2</sup>

Because of inadequate transportation the men were forced to work nearby. Eight of the forty-four Camp Creek men employed worked at the FNS Wendover headquarters tending the animals, garden, pasture and buildings. Others held jobs in the mines, as carpenter and truck driving.

Wendover served as an informal hangout for much of Camp Creek. Inhabitants picked up their mail at the Wendover post office and used the phone to call a cab if they were going to Hyden and couldn't obtain a ride with an FNS staffer. The women visited with two friends from Camp Creek who did the Wendover laundry. The men played horseshoes or threw darts-- a lunch-break tradition--with their neighbors who worked at Wendover.

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<sup>1</sup>Ibid., Table 32, p. 136.

<sup>2</sup>Ibid., pp. 16-17.

Young bachelors congregated in the evenings at Wendover to court the three or four young maids usually there. FMS only permitted the girls to date twice a week and then on the place. Other nights the boys gossiped with the night watchman or played their favorite card game, "Setback."<sup>1</sup>

Camp Creek men handled their business and major purchases in Hyden; the women seldom accompanied them. Older boys and girls often went to town Saturday afternoon to hang out at the drug store, shop or go to the movies.<sup>2</sup>

With the opening of lumber mills and coal mines many families moved to settlements along the highways in order to have access to good jobs. Stinnett, located from six to nine miles from Hyden on Highway 421, was such a community. It included two small post offices, Stinnett and Hoskinston, a twelve-grade missionary school, a Church of Christ with weekly Sunday services, and a Holiness Church with irregular services.<sup>3</sup>

Quarles considered the school the best in the county. Most of the teachers were outsiders, all but one had college degrees.<sup>4</sup>

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<sup>1</sup>Ibid., p. 85.

<sup>2</sup>Ibid., p. 86.

<sup>3</sup>Ibid., p. 18.

<sup>4</sup>Ibid., p. 55.

Since most of the men held good jobs, Stinnett families were much less dependent on raising their own food than Camp Creekers. Of the forty-eight employed men, fourteen worked in sawmills, ten in mines, seven were truck drivers, three carpenters, two storekeepers, one was a teacher, one a student, one a bus driver and one a mechanic. Seven were on pensions and one was in prison.<sup>1</sup>

Stinnett women lived an easier life than their Camp Creek counterparts. The school had a hot lunch program so the children did not return for lunch as they did on Camp Creek, nor did their fathers. The women sewed, but not as much as on Camp Creek since most of their clothes were store bought. They spent their free time listening to the radio, shopping, waiting for the mail and gossiping at the post office.<sup>2</sup>

Older unmarried boys hung around together in the evenings, sometimes cruising around in a truck or visiting a nearby "ginny" barn.

Three buses a day ran through Stinnett so the movies, courthouse and stores were easily accessible. As on Camp Creek, Saturday was the usual day for the men and teenagers to socialize in town.<sup>3</sup>

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<sup>1</sup>Ibid., Table 13, p. 122.

<sup>2</sup>Ibid., p. 89.

<sup>3</sup>Ibid., p. 97.

Stinnett homes contained fewer people than those on Camp Creek; an average of 4.8 persons per household compared to 5.8 for Camp Creek.<sup>1</sup>

They were slightly better educated. Stinnett fathers had completed an average of 7.7 grades compared to 7.2 for Camp Creek fathers. The mothers had finished 7.9 grades compared to 6.5 for Camp Creek mothers.<sup>2</sup>

The annual cash income for Stinnett families ranged from \$500 to over \$5,000 with an average family income of \$2,245. Camp Creek incomes varied from under \$600 to \$5,000, the average was \$1,360.<sup>3</sup>

Stinnett families had many more conveniences than Camp Creekites, as can be seen from Table 1.<sup>4</sup>

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TABLE 1  
NUMBER OF CAMP CREEK AND STINNETT FAMILIES  
HAVING SPECIFIED CONVENIENCES

Conveniences	Stinnett		Camp Creek	
	No. of Families	Percent	No. of Families	Percent
Electricity	44 (sic)	88	22	44 (sic)
Running Water	6	12	0	0
Washing Machines	36	72	19	38
Refrigerators	35	70	12	24
Radio	44	88	44	88
Car	11	22	4	8
Truck	19	38	4	8

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<sup>1</sup>Ibid., Table 2, p. 115.

<sup>2</sup>Ibid., Table 13, p. 122.

<sup>3</sup>Ibid., Table 27, p. 133.

<sup>4</sup>Ibid., Table 32, p. 136.

## FNS 1945-65

FNS reached its peak, perhaps, during the immediate postwar years. Despite the out-migration the number of hospital patients rose almost nineteen percent between 1950 and 1960 and the number of district patients about fourteen percent.<sup>1</sup> With a million dollar endowment achieved in 1958<sup>2</sup> FNS was in the black during most of this period.

In the fall of 1949 Harper & Brothers asked Breckinridge to write the story of FNS and she turned over administration to key staff to find the necessary time, thus beginning a slow withdrawal from FNS control.<sup>3</sup> Wide Neighborhoods, her autobiography, went on sale in 1952.

Breckinridge died in 1965 at the age of eighty-four and worked until the day before her death. But as her health failed her production slowed and FNS operations stagnated, since she was unwilling to deputize.

Wendover, the Administrative Headquarters

Leslie County had no vocational school; local secretaries, clerical workers and bookkeepers were nonexistent. So FNS hired its administrative staff from outside and housed them and their offices at Wendover. They lived and worked in: the original three story log cabin, known as the Big House;

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<sup>1</sup>See appendix F.

<sup>2</sup>Minutes of FNS Executive Committee, November 11, 1958.

<sup>3</sup>Ibid., October 24, 1949.



Fig. 1. Wendover "Big House."



Fig. 2. Wendover Barn.

the garden house, with offices on the ground floor and bedrooms above; two cabins on the steep mountainside, or in a small log cabin near the Big House.

The Big House was Wendover's social center. It contained a large kitchen and community dining room, a comfortable living room, offices, the Wendover post office, guest rooms and Breckinridge's quarters.

A ten-stall horse barn, paddocks and two large chicken houses were next to the garden house and on the road leading to the river, known as pig alley, were cow barns and pig sheds. Two horse pastures lay up river from Wendover and a cow pasture below. There was a large vegetable garden between the buildings and river road.

Between ten and twenty women lived at Wendover. The number depended on turnover and staff shortages and included Breckinridge; Dorothy Buck, the assistant director; Agnes Lewis, the executive secretary; Lucile Hodges, the bookkeeper; Jean Hollins, resident courier, and an ever changing group of women in the jobs of social work secretary, postmistress and statistician. There were also three or four secretaries, two to four volunteer couriers and two or three maids.

Guests were almost always present except during the winter when roads were impassable. Physicians and nurses from all over the world visited the FNS to observe its work. Friends, relatives and prospective donors came to see Breckinridge.



Professional and administrative staff were termed staff and paid a monthly salary. Maintenance men, cooks and maids were categorized as employees and paid an hourly wage. There were usually one or two cooks, three or four cleaning women and eight to ten maintenance men.<sup>1</sup> The men were responsible for the cows, pigs, chickens, cleaning the barns (couriers exercised and groomed the horses), repairing pasture fences, gardening, stoking the furnaces and feeding bedroom and office fires (two of the cabins were heated by fireplaces).

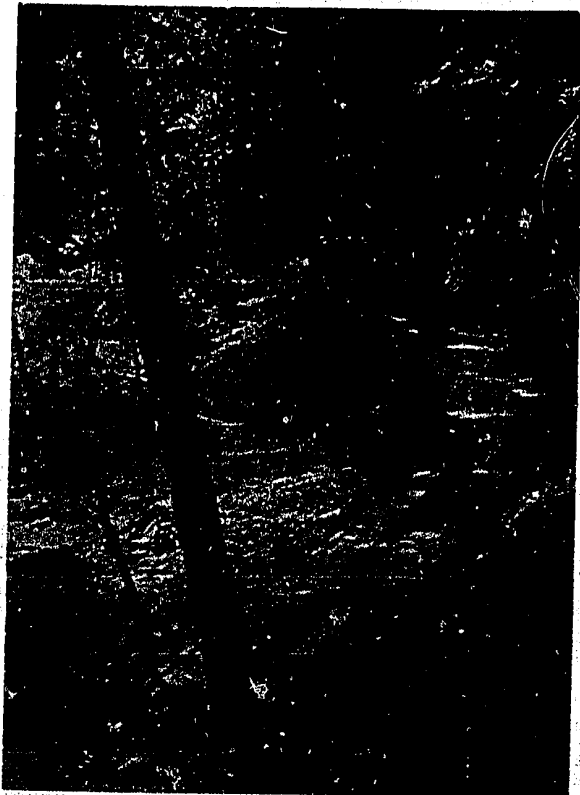
Cleanliness was a fetish. The kitchen, barns, offices and yard were kept immaculate. Breckinridge and her associates were avid gardeners. During the spring, summer and fall the Wendover rose and flower gardens were a county show-place.

The Wendover day began at 5:00 A.M. when Breckinridge came to the kitchen for her morning coffee and a gossip with the night watchman. The employees began drifting in at 6:30 A.M. Staff breakfast was served at 7:30 A.M. after which Breckinridge met with key staff. Office hours were from 8:00 A.M. to 4:00 P.M. with a half hour off for lunch.

After breakfast the couriers watered and groomed the horses, took to pasture those which weren't being ridden, cleaned tack and did clerical chores. The employees ate a

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<sup>1</sup>There were eight maintenance men at the time of Quarles' survey; the number increased later.



THE WENDOVER ROAD

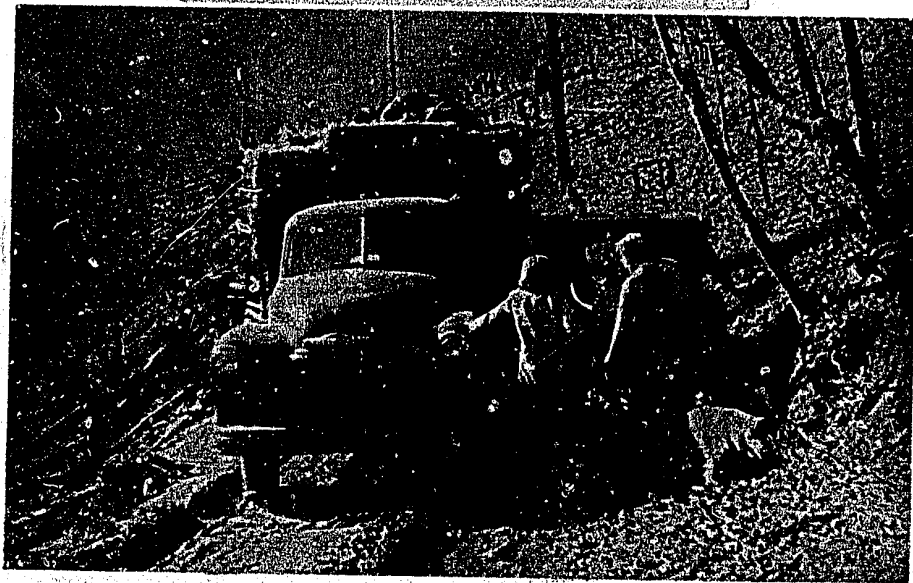


Fig. 3.

huge dinner at eleven and then retired to the garden house for a gossip or, if the weather was good, for a horseshoe match.

The noontime staff lunch was a hurried affair since Breckinridge, a fast eater, rushed around the table after she had finished, scooping up leftovers for her beloved chickens.

Caring for the chickens, of which there were scores, was Breckinridge's hobby. She knew each by sight and had a particular affection for the good mothers, refusing to let them be killed for the Wendover pot. After lunch, accompanied by one of the women employees, Breckinridge fed her chickens. The two of them often sat for a gossip. If a staff member had in any way offended an employee Breckinridge usually heard of it during the chicken feeding sessions.

The employees departed at around three-thirty and at four a courier rang a cow bell to announce the end of the office day and the serving of tea in the Big House living room.

Tea was a traditional ceremony made and served by the couriers in the same manner every day. Breckinridge sat in her special chair and dispensed cheese tidbits to the Wendover dogs. Shop was never discussed; instead Breckinridge and senior staff talked about current events, books or whatever came to mind. The younger women sat at the other end of the room, talked among themselves or read their mail.

Dinner was served at six, preceded by sherry in the living room if there were guests.<sup>1</sup> Otherwise, Breckinridge, who usually ate dinner in her room, invited one or two persons to her quarters for sherry.

Staff often returned to their offices after dinner for more work. Some read, others gathered in each other's rooms for talk or bridge. About once a week junior staff jeeped into Hyden for a movie. The more sophisticated movies such as My Sister Eileen and Blackboard Jungle preferred by FNS staff, were scheduled for the middle of the week; western and Tarzan type films for the weekend.

On Saturdays groups occasionally drove to Hazard for a steak dinner. Once or twice a year most Wendover residents spent a long weekend in Lexington shopping, going to movies and sampling popular restaurants. Picnics and hiking were favorite weekend activities and there were occasional Saturday night square dances with Camp Creek friends.<sup>2</sup>

Breckinridge and Lewis, who supervised the couriers and secretaries, felt that the young people on the staff led an abnormal social life away from their families and customary association with young men, but were afraid they would pick up with the wrong kind of man if they dated Leslie Countians, so discouraged any such tendency.<sup>3</sup>

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<sup>1</sup>Breckinridge permitted no hard liquor on FNS property.

<sup>2</sup>From journals and letters of the author; see appendix A.

<sup>3</sup>FNS interview with Agnes Lewis.

Then too Leslie County was quite conservative. Until the mid-fifties there was little dating. Social contacts between the sexes were at church suppers and family gatherings. For young couriers or secretaries to date would have caused harmful gossip, senior staff believed.

There was another reason for not dating, a former social worker said, "I dated a couple of times but stopped. I didn't know the ground rules. Our cultures were different, I didn't know what was expected and was never at ease."<sup>1</sup>

When Quarles lived at Wendover while doing research for her sociology master's thesis, she occasionally invited a University of Kentucky professor and other friends to Wendover for the weekend. Breckinridge enjoyed Quarles' friends and said to her, "I wish you would invite that nice Dr. Jim up here with a whole bunch of young people every weekend. It would do a great deal to relieve some of the frustrations."<sup>2</sup>

Realizing the unnatural conditions in which her associates lived, Breckinridge insisted that staff take six weeks annual vacation plus two or three long weekends. She also instructed the social service secretary to make her jeep available for taking groups to the movies and local basketball games.<sup>3</sup>

What attracted young women to such a confining, isolated life? There was no Peace Corps or VISTA, a retired

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<sup>1</sup>FNS interview with Mary Ann Quarles Hawkes.

<sup>2</sup>Ibid.      <sup>3</sup>Ibid.

nurse pointed out. The FNS was one of the few places adventuresome young women could find creative, idealistic jobs other than with missionaries.<sup>1</sup> Quarles said she came because she couldn't find such a stimulating job anywhere else.<sup>2</sup>

There was no such thing as a typical FNS staff member. Many of the nurses were fresh out of nursing school and came to FNS because of its midwifery school. They tended to be ambitious, adventuresome and idealistic. Others were older, attracted by the challenging jobs. Several were missionaries anxious to acquire rural experience before going overseas.<sup>3</sup> Two of the senior British nurses, Betty Lester and Helen E. Browne, said they came to Kentucky because they liked horses and dogs.<sup>4</sup> "Where else could I have my own horse and dog and still do midwifery?" asked Betty Lester.<sup>5</sup> Of those who remained for long periods, most did so because they enjoyed the independence and responsibility of their work and because they fell in love with the mountains and its people, so much so that several retired in Leslie County.

Most of the young secretaries, statisticians and bookkeepers, many of whom were college graduates, left after a year or two to marry and/or continue their education. Two

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<sup>1</sup> Author interview with retired nurse-midwife.

<sup>2</sup> FNS interview with Mary Ann Quarles Hawkes.

<sup>3</sup> Author letters and journals.

<sup>4</sup> FNS interviews with Betty Lester and Helen E. Browne.

<sup>5</sup> FNS interview with Betty Lester.

secretaries married Camp Creek men and moved north for better jobs.<sup>1</sup>

Breckinridge hired her first Wendover maintenance man and cook from Camp Creek, JaHugh and Belle Morgan. Camp Creek men and women have worked at Wendover ever since.

In the early days FNS often took on Camp Creek people because they needed work. In the summer extra men, usually from Camp Creek, were added to repair buildings, check and wrap the water pipes and furnaces, garden and do a variety of other jobs which could not be handled in the winter. Later FNS could not afford this luxury and the applicants complained bitterly. "Mrs. Breckinridge always made jobs for us before when we needed them," they said.<sup>2</sup>

When Lewis, a petite southern lady, became executive secretary she knew nothing about the maintenance and construction of buildings, septic tanks, horses and supervising a large dining hall. She immediately learned to rely heavily on the Camp Creek employees. If she didn't know how to handle a problem she asked their advice. "If I asked enough questions," she said, "which must have seemed very silly to them, they nearly always worked something out."<sup>3</sup>

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<sup>1</sup>Both couples have returned to Camp Creek. The wives now hold FNS administrative jobs. One of the men is a maintenance engineer at the hospital and the other retired from a supervisory mining job following a heart attack.

<sup>2</sup>FNS interview with Agnes Lewis.

<sup>3</sup>Ibid.

When there was much work to be done Breckinridge asked for a "working"<sup>1</sup> and word was sent up Camp Creek with the employees going home for the night. The next day thirty to forty men and older boys were at Wendover by 6 A.M. They divided into groups, some to mend a fence, others to do another job, and competed with each other to see who could work fastest. "We'd give them a good dinner," Lewis said, "and Breckinridge entertained them. They did their best work at workings when they weren't paid."<sup>2</sup>

Since the beginning, Camp Creek-Wendover relations have been close. But there was a definite line drawn between Leslie Countians including Camp Creekites and FNS staff. "Why is it," Hodges the bookkeeper frequently asked, "that we always call them by their first names and they use our Miss and Mrs. titles?" Quarles knew the Camp Creek community well and remarked that although she called them by their first names, only one or two called her Mary Ann.<sup>3</sup>

Residents on neighboring Hurricane Creek thoroughly resented the Camp Creek-Wendover relationship. John Bowling, a mailman and former magistrate living on Hurricane has told the author repeatedly that Breckinridge had decreed that all

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<sup>1</sup>During a working, friends and neighbors volunteered a day's work to complete a difficult job or jobs, such as roofing a barn. The workers were given a huge dinner. Often square dancing and music followed the working.

<sup>2</sup>FNS interview with Agnes Lewis.

<sup>3</sup>FNS interview with Mary Ann Quarles Hawkes.



maintenance jobs go to Camp Creek people, a fact which Lewis denied.<sup>1</sup>

The Wendover fetish for cleanliness and decorative gardening appeared to spread to Camp Creek which has always been one of the prettiest creeks in the county. Yards have been kept spotless with none of the ugly garbage prevalent in the rest of the county. Flowers and decorative shrubs were planted in front of most houses. On the other hand, neighboring Hurricane Creek has always appeared a rural slum despite the fact several inhabitants had money. Houses were in disrepair, garbage thrown into the creek or just left in yards.<sup>2</sup>

Life Magazine Article Infuriates  
Leslie County and FNS

On December 24, 1949, Life Magazine published an article, "The Fruitful Mountaineers," by T. S. Hyland, which neither FNS nor Leslie County has forgotten nor forgiven.<sup>3</sup> The article's subtitle read, "The chronic baby boom of a Kentucky county, denounced as 'a biological joy ride to hell,' rolling merrily along to replenish the nation."

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<sup>1</sup>FNS interview with Agnes Lewis. (Author's note: Maintenance foremen have always lived on Camp Creek. It is possible that they influenced Wendover administration to hire their relatives and neighbors.)

<sup>2</sup>One Hurricane Creek inhabitant told the author she never took her garbage to the dump, what was the use, people living above her tossed their garbage into the creek, why shouldn't she.

<sup>3</sup>T. S. Hyland, "The Fruitful Mountaineers," Life Magazine (December 24, 1949):60.

The author, T. S. Hyland was a former science and medicine editor for Time magazine. His apparent purpose was to alert his readers to the dangers of the high birth rate of central Appalachia, pointing out that the semi-literate surplus was overrunning the industrial midwest. Postwar U. S. was sliding back to normal, Hyland claimed, except in Leslie County.

. . . There is always a baby boom in Leslie County. In fact its mountaineers are probably, in this respect, the busiest people on earth, multiplying at a birth rate (48.5) about double that of the U. S. as a whole and equal to that of the swarming hordes of China and India. Families of 10 or 12 are common enough, but the modest average runs to six or seven.<sup>1</sup>

The growth prevailed, Hyland said, despite the fact that birth control information and contraceptives were available at a lower price than in the north.

. . . So the most striking fact about Leslie County is not how many babies its people have but how much they enjoy having them. In the two-room cabins along Hell-For-Certain Creek, Greasy Creek, and Thousandsticks Mountain, the gospel of planned parenthood has fallen on deaf ears. "You find some women who are just as happy as larks having a baby every year," I was told by a somewhat baffled nurse who had, in earnest and in vain, preached the gospel throughout Leslie County. "If you tell them that they don't have to have more," the incredulous nurse went on, "they rear back insulted and say, "I'm goin' to have my number out."<sup>2</sup>

After pointing out that professionals had cut back their birth rate, Hyland added that while the Kentucky mountaineer

. . . has, on occasion, been praised as a proud, intelligent, independent member of the "Old American frontier

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<sup>1</sup>Ibid.

<sup>2</sup>Ibid., p. 61.

stock," he had also been damned as a "degenerate, inbred, shiftless congenital moron. His proliferation has been called a "disgusting perversion of evolution" and (with some venom) "a biological joy ride to hell."<sup>1</sup> . . . Since creek beds and bridgeless mountain trails form the basis of the highway system, Leslie County probably now has more jeeps per capita than any other part of the U.S. . . .

However, there is not one tractor in the county. Some of the farmers do not even use those prehistoric inventions, the wheel and the plow.<sup>2</sup>

Leslie County had just heard of the GI Bill of Rights, according to Hyland. Ten percent of the population were illiterate. He quoted a school superintendent as saying,

. . . "Now we've got all these big, dirty old men of thirty and forty sittin' there in third and fourth grade right beside their own children. All they want is that \$120 a month--we call it rockin' chair money."<sup>3</sup>

Most Leslie County girls, Hyland said, married at the age of sixteen or seventeen, right out of grade school, although fifteen was not an uncommon marriage age.<sup>4</sup>

Concerning FNS he wrote:

. . . Leslie County children get some of the best medical care in the U.S., and it is one of the safest places to have a baby. They owe their pampering to Mrs. Mary Breckinridge, a small, graciously domineering lady of 68, and the obstetrical cavalry squadron which she calls the Frontier Nursing Service. Packing their midwives' equipment in saddlebags, her 29 nurses trek up the creeks and over the mountains in all sorts of weather to deliver babies in the most isolated cabins.<sup>5</sup>

Hyland told how Breckinridge persuaded

. . . a horde of well-to-do friends, admirers and cousins to pay the bill. With pride and passion she lectures them, "The Southern mountains are not only,

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<sup>1</sup>Ibid., p. 63.

<sup>2</sup>Ibid., p. 64.

<sup>3</sup>Ibid., p. 60.

<sup>4</sup>Ibid., p. 63.

<sup>5</sup>Ibid., p. 64.

like other rural sections, a feeder for the city but a nursery of the finest flower of the old American stock . . . her publicity masterpiece is probably her "courier system," which has made Leslie County the debutante's Foreign Legion . . . .

. . . many of the nurses are foreign missionaries who stay and work a year to pay for their training before going back to deliver little Zulus and Hindus . . . .

. . . When the road was cut through the forest, her nurses stood by to insist that the bulldozers leave the trees untouched, trees seem to rank second only to babies in the Breckinridge scheme of values.<sup>1</sup>

Breckinridge believed, Hyland said, that the birth rate would fall when economic conditions improved. She also doubted, according to Hyland, that birth control was the reason for small upper class families. The urban, educated citizen was incapable of producing a large family because, Hyland quoted he, as saying,

. . . mental and spiritual endowment is of the same like stuff as physical fertility, the mind that raised man above savagery came through the limitation of his reproductive capacity.<sup>2</sup>

The Hazard Herald was so angry it devoted the two-page inside spread to refuting the story. The paper was particularly annoyed by Hyland's apparent lumping of the entire mountain region with Leslie County.<sup>3</sup>

The article infuriated Breckinridge, particularly since she had tried to make certain Hyland used accurate facts and figures.

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<sup>1</sup>Ibid., p. 64.

<sup>2</sup>Ibid., p. 65.

<sup>3</sup>"Life Magazine Comes to Our Mountains with a Pack of Lies About Us and Our Way of Living," Hazard Herald, 1 January 1950, pp. 4-5.

In a letter to the Hazard Herald Breckinridge wrote, . . . The thing that Mr. Hyland has wrong in his birth rate for Leslie County, and he knew it was wrong, is his taking the 1948 birth rate in relation to the 1940 census. Unlike Clay and Perry counties, Leslie County did not have its coal developed in 1940 in a large commercial way. With the return of the veterans from the war (and the setting up of their families) to work in coal mining and trucking the coal, there has been a large increase in the population and birth rate. It is not scientific to give the birth rate minus this explanation.<sup>1</sup>

In her letter to the Hazard Herald she explained that when Hyland visited Leslie County she asked to have the Frontier Nursing Service omitted from the article. Hyland refused but promised to let her blue pencil the story. Months passed and she received no article. Then the photographers arrived and she told them, "no pictures unless I can see the article." Finally, she said, a digest arrived but several references to the FNS which appeared in the final article were not in the digest.<sup>2</sup>

Shortly before the publication of the Life story Breckinridge wrote Hyland to suggest that he write the Kentucky State Department of Health for exact Leslie County birth rate figures.

. . . I have not looked at them for some years, but they ran about the same as other mountain counties, which was only a fraction above the birth rate of the rural sections of America as opposed to the birth rate for cities. I should not think for one moment

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<sup>1</sup>Letter from Mary Breckinridge to Hazard Herald, January 2, 1950.

<sup>2</sup>Ibid.

that the mountain birth rate was one of the highest on the earth, or that it would begin to compete with oriental birth rates.<sup>1</sup>

Prior to publishing "The Fruitful Mountaineers," Life representatives phoned FNS several times to check facts and then disregarded what they were told. Since one of Breckinridge's idiosyncracies was never to talk on the phone, the calls were handled by staff.

Were there any tractors in Leslie County, the Louisville Life representative phoned to ask. Yes, certainly, there were several, Lucille Knechtley, Breckinridge's secretary replied. Was it true that many GIs had started back to grade school in the fall of 1949 and why didn't they start until then. Knechtley answered that she only knew of one man who had started grade school after the war and that had been several years ago.<sup>2</sup>

Although the article enraged Breckinridge she felt it was best to "let it drop, rather than write a letter to the Life Magazine editors. As she wrote to the editor of the Hazard Herald concerning the article,

. . . such things, however, are ephemeral. They pass away and are forgotten. Personally I prefer not to notice the, even when illusion is made to us.<sup>3</sup>

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<sup>1</sup>Mary Breckinridge letter to T. S. Hyland, dated November 19, 1949.

<sup>2</sup>Lucille Knechtley memo to Breckinridge, dated December 13, 1949.

<sup>3</sup>Mary Breckinridge letter to Hazard Herald, dated January 2, 1950.

Because the article included several photographs of FNS nurse, quite a few people blamed FNS for its contents. "You know how people talk. Folks can read so little and can misinterpret so much," the Bowlingtown center nurse wrote. But, she added, one of the committee members had commented that the birth rate figures were unfair because many people came to Leslie County from outside to have their babies with FNS nurse-midwives.<sup>1</sup>

Following the publication of the Life article the FNS was inundated with letters. A Washingtonian wanted to know how to contact an old Leslie County army buddy, several wanted birth control advice or information about the midwifery school, a religious crank wanted a job, and a forty-five year old woman wanted to know if she was too old to have a baby.<sup>2</sup>

In the early days of FNS Breckinridge welcomed publicity and in her autobiography she commented that newspaper reporters had been uniformly kind and had included the "personal touch" of such people as John Finley of the New York Times and Mrs. Ogden Reid of the New York Herald Tribune. The press, she said, had been particularly helpful in publicizing fund raising events. But feature articles, she wrote,

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<sup>1</sup>Vera Chadwell memo to Breckinridge dated January 1, 1950.

<sup>2</sup>Information taken from FNS file titled "post-Life article correspondence."

. . . have been of little value to us. Not five hundred dollars in money for the support of our work has come to us from all the countless people who read them, and not a single person, equipped to help us in any department of our work, has joined us because of them. On the nuisance side, we get letters every time an article appears--from old men who want to correspond, from young women who ask me to be their mother.<sup>1</sup>

Ever since the Life disaster FNS and Leslie County alike have attempted to avoid reporters and writers unless they could control what they wrote.

#### Wide Neighborhoods

In the fall of 1949 Harper and Brothers, Publishers, asked Breckinridge to write the story of the Frontier Nursing Service. She signed a contract agreeing to finish the book by March, 1951, and a legal conveyance turning over the royalties and subsidiary rights to the FNS.<sup>2</sup>

Breckinridge was then sixty-eight years old. The task was more difficult than she had foreseen and the work delayed by a virus infection so the final proofreading was not finished until January, 1952. Wide Neighborhoods went on sale April 14, 1951 at \$4.00 and eventually went into three printings.<sup>3</sup>

Breckinridge told the board that she would have to reduce her outside fund raising trips, which she estimated would cost FNS \$50,000. The board promptly voted to start a

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<sup>1</sup>Breckinridge, Wide Neighborhoods, pp. 320-21.

<sup>2</sup>Minutes of the Executive Committee, October 25, 1949.

<sup>3</sup>"Harper & Brothers Announcement," Quarterly Bulletin 27 (Winter 1952), p. 3.



25th anniversary fund, of which the first \$50,000 was to be used to free Breckinridge half a year to work on the book, the balance to go toward the endowment.<sup>1</sup> The board eventually raised \$54,430.93 for the silver anniversary fund.<sup>2</sup>

Gerald Heard, a religious writer had suggested the book to Harpers after learning of Breckinridge and her work from a mutual friend, Margaret Gage.<sup>3</sup> It was Heard and Gage who persuaded Breckinridge to write the history in a personalized style. Heard wrote Breckinridge,

. . . Please let us have the full scale story . . . these are the lives which make life worth living because they inspire us to attempt to live, at least within the compass of our power and through the same grade of God, not unworthily.<sup>4</sup>

To write the book Breckinridge established a routine which would have exhausted many women half her age. She rose at four and rewrote the dictation of the previous day between 5:00 and 7:00 A.M. She relaxed between seven and eight and at exactly 8:00 A.M. her book secretary came for dictation. After lunch she read her mail and went outdoors to feed the chickens or poke around her garden. Then she went over her mail with her secretary and read the newspaper. From two to four she worked again on revisions or boned up on material for

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<sup>1</sup>Minutes of FNS Executive Committee, October 29, 1949.

<sup>2</sup>"Beyond the Mountains," Quarterly Bulletin 27 (Winter 1951):45.

<sup>3</sup>Gerald Heard letter to Breckinridge, November 30, 1949.

<sup>4</sup>Ibid.

the next chapter. She quit for four o'clock tea and usually was in bed by eight. She tried to complete 5,000 words a week.<sup>1</sup>

Breckinridge found it extremely difficult to finish Wide Neighborhoods following the death of her nephew, John Cabell Breckinridge, U.S.M.C., killed in action in Korea on October 9, 1951. First Lieutenant Breckinridge was posthumously awarded the silver star for conspicuous gallantry.

Breckinridge wrote her spiritual confidant, Margaret Gage:

. . . For the third time in my life I have encountered death in a form that has completely shaken me from my accustomed moorings. As you may recall, the first time was when I lost my young husband. I never made a spiritual adjustment to that, but I effected a reconciliation with life by learning how to be of use to other people. The second time was Breckie's death. After that, for the seven years until I met Adeline, I had no inner peace at all. But, again, I effected a reconciliation with life by throwing myself into work for other children, to keep them alive, to make them happy. In the course of time through Adeline, I began to travel inward as well as without.

Oddly enough, my religious life has not drawn me emotionally at any time, not even in the beginning. It has always been what old writers call arid, except when I went through darkness too thick for a knife to cut . . . however, it did not seem unbearable until I started writing this book. If there can be such a thing as a morass in a desert, I fell then into a veritable morass of self-centeredness.

The life I had embraced before I started writing this book was one in which I had to be outpouring constantly, in behalf of others, whether I were working in the mountains or speaking beyond the mountains. But in writing this book, I had to go through a mass of personal records and to throw myself back into my own past, and into my life, and into my own heart . . . and I have not been competent enough to stand the strain.

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<sup>1</sup>"Field Notes," Quarterly Bulletin 26 (Summer 1950):59.

She had been ill, Breckinridge added, and it was hard after that to go through the strain,

. . . but that didn't nearly kill me, it was the self-centeredness. . . .  
 . . . Twice since Johnny was killed, I have been fully conscious of his presence near me. The first time was at evensong in our chapel. All I was conscious of then was that he was there. This made it hard to carry on, but I could. The second time was in my own room days or weeks later. It was then that Johnny got over to me the fact that sudden death was an awful shock to him. He got over to me, insistently, that I must tell this to his mother, his brother, his sweetheart. I told him that I couldn't write it, but I would tell them--and I shall. . . .

. . . Johnny, who has been like another son to me, ardently wanted to live his life, too, until it was a completed thing. The three deaths that have broken me to pieces have been deaths of the young--never deaths of the old, no matter how dear.<sup>1</sup>

Her nephew's death nearly killed her, Browne, the then assistant director, said. "It's the only time I ever saw her lose her faith."

She wouldn't eat or talk to anyone for forty-eight hours so Browne called the physician and had her sedated. The next morning, Breckinridge was furious. "You put me to sleep last night; I should have stayed awake and seen John and helped him get over to the other side."<sup>2</sup>

Breckinridge devoted the first 156 pages of Wide Neighborhoods to personal history, her family, her days in France and as a student, and the balance of the 366-page book to the Frontier Nursing Service.

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<sup>1</sup>Mary Breckinridge letter to Margaret Gage, January 10, 1952.

<sup>2</sup>FNS interview with Helen E. Browne.

Most of the FNS portion was a fairly objective history of the Service. Chapter 32, describing Breckinridge's theories related to obstetrics and population, was one of the most imaginative.

Breckinridge pointed out that more than ninety-nine percent of FNS mothers had borne their children without the help of forceps. Of the 8,596 maternity cases delivered by FNS at the close of its fiscal year, April 30, 1951, there had been only fifty forceps cases or six-tenths of one percent. The number of women delivered by Caesarian section was even smaller--forty. Breckinridge found an equally low proportion of women needing forceps assistance or Caesarian sections in the Hebrides.

She suggested that the two areas had three common characteristics which led to the high number of normal child-births. She found no woman in either area who had not been a breast fed baby. A flattened pelvis due to rickets was a rare phenomenon, she said, among women who had been breast fed. A diet of herring in the Hebrides and days in the sun in Kentucky had put plenty of Vitamin D into the breast milk; phosphorous and lime had been added by the milk and eggs eaten by most women.

A second common characteristic for both groups was a complete lack of ancestral obstetrical care. Thus, she believed, through a severe process of natural selection Kentucky mountain and Hebridean women inherited a pelvis through which a baby could pass unaided.

Breckinridge felt the most important reason Kentucky mountain and Hebridean women could deliver their babies themselves was because both belonged to a homogenous population.

. . . In such a population a baby's head is racially designed to go through the mother's pelvis . . . so many marriages have taken place between people of so many different racial stocks that obstetricians are called upon to pull a Mediterranean head through a Nordic pelvis. Such a head was not designed to go through such a pelvis.<sup>1</sup>

In 1931 Breckinridge wrote an article for Harper's Magazine suggesting a research project to determine how much the "prolongation of childhood and the higher mental activities of women were responsible for the decrease in the birth rate of intelligent people."<sup>2</sup>

She explained her proposal in Wide Neighborhoods and hypothesized as follows:

. . . The fertility of the race is in inverse ratio to its intelligence, plus the prolongation of the period of education past the adolescent age. This conforms to what we may observe in Nature from microbes to man, but Nature, including human nature and its history, cannot be comprehended in a law so simply stated. We know that those who live close to her are more fertile than city dwellers, that physical causes of infertility, some of them remedial, exist in both men and women, that excessive luxury may inhibit breeding even in animals--variations and exceptions world without end.<sup>3</sup>

Breckinridge, who was seventy when she finished Wide Neighborhoods, devoted its final chapter to her hopes and plans for FNS.

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<sup>1</sup>Breckinridge, Wide Neighborhoods, pp. 314-15.

<sup>2</sup>Ibid., p. 317.

<sup>3</sup>Ibid.

"Our aim," she wrote, "has always been to see ourselves surpassed, and on a larger scale."<sup>1</sup> Thus her first plan to continue to welcome professional visitors from other rural areas for on-the-spot study of FNS work.

Secondly, Breckinridge hoped to start a training program in rural district nursing analogous to the course in midwifery.

Next, Breckinridge wished to add young physicians to the staff and to imbue them with the FNS love of rural areas and people so that some of them might be willing to settle in country districts.

Her fourth plan involved the writing of textbooks on such subjects as obstetrical nursing. Finally, she hoped to expand the hospital and double the number of its beds.<sup>2</sup>

As at the beginning, her main interest was children.

. . . We have never done enough for children, even though the emphasis of all our years of work has lain with them. We must find a way in which we can help to bring about a normal emotional life for more of them, during those tender years when wounds are made which leave scars forever.<sup>3</sup>

Breckinridge ended her book with a final mention of Sister Adeline,

. . . because her part in the Frontier Nursing Service has been the most significant of all. She knew, as

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<sup>1</sup>Ibid., p. 359

<sup>2</sup>Ibid., pp. 259-362.

<sup>3</sup>Ibid., p. 363.

only a spiritual genius can know, that I had been sent to her so that she could carry the Frontier Nursing Service in her prayer.<sup>1</sup>

#### District Nursing and District Committees

The FNS districts and their nurses reached their peak during the forties and fifties. Despite the out-migration, the number of district patients rose from 9,753 to 11,112 or 13.9 percent during the fifties. The number of families cared for by the nurses increased from 2,155 to 2,405 or 10.3 percent. Midwifery cases, however, fell 2.6 percent, from 414 to 403, possibly due to the departure of young families.<sup>2</sup>

During most of the fifties each family paid an annual fee of \$2.00 for complete health care; hospitalization and midwifery cost extra. FNS charged adult patients a \$10 per day hospital fee provided they could pay, there was no hospital charge for children. The regular midwifery fee including prenatal, birth and postpartum care was \$75.00.<sup>3</sup>

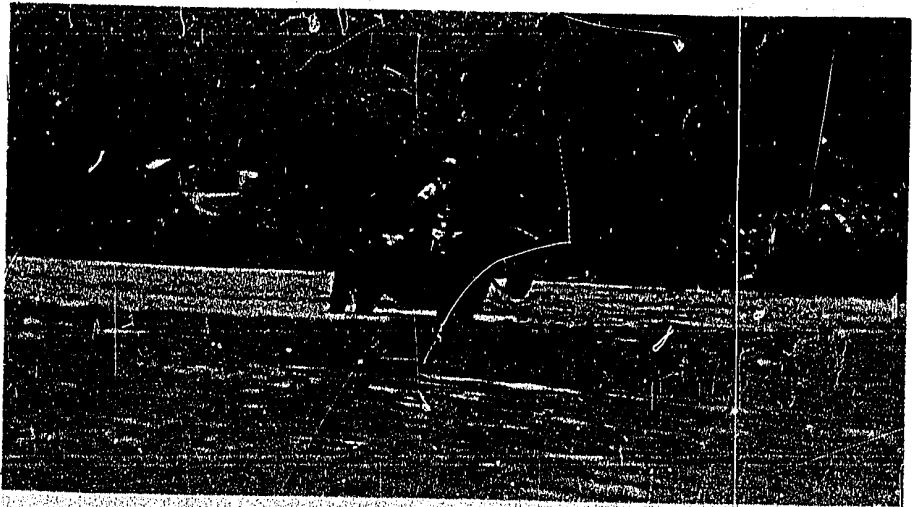
Patient fees covered about twenty percent of FNS costs, the balance came from donations and the endowment. To attain the necessary funds Breckinridge spent at least one quarter of her time "outside" giving speeches and raising money from wealthy philanthropists.

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<sup>1</sup>Ibid., p. 366.

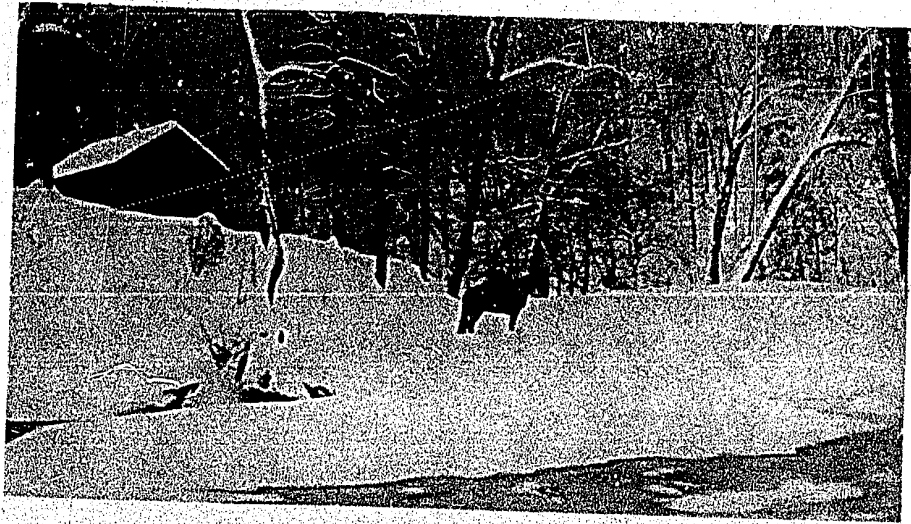
<sup>2</sup>See appendix F.

<sup>3</sup>Minutes of FNS Executive Committee, November 4, 1957.



A Frontier Nurse and Her Horse

Fig. 4.



A FRONTIER NURSE AND HER HORSE  
In the Kentucky Mountains



During FNS fiscal year 1959-60, a typical year, total field expenses were \$206,407.60 for which FNS received \$44,443.13 in patient payments or 21.5 percent of total costs. The balance was paid from endowment income (\$66,022.14 or 31.9 percent), donations and miscellaneous income from such sources as Wide Neighborhood royalties and the Wendover post office.<sup>1</sup>

During the forties and fifties the FNS nurse-midwife handled most obstetrical and routine medical problems in the patient's home or at the district clinics. The small FNS cottage hospital with its lone physician was utilized for emergencies and acute illnesses.

The nurse-midwives knew all of the families in their districts, their health problems, their economic situation, whether they had gardens, latrines and running water.

They continued to concentrate on helping families attain and maintain good health, as opposed to treating ailments after they had developed as was the practice of most physicians and hospitals.

The nurse-midwives did this through prenatal and postpartum care, the routine examination of babies and children, and the encouragement of sound sanitation and nutrition. Much of their health education was accomplished during midwifery home visits.

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<sup>1</sup>For the detailed fiscal report see appendix G.

Because the district nurses were often several hours from the help of the FNS physician (telephone connections were extremely unreliable) they were given a good deal of authority as outlined in the 1953 Medical Routine. The general instructions read:

The medications and treatments as set forth in this routine are authorized by the Medical Advisory Committee of the Frontier Nursing Service for the use of the Nurses. If a situation should arise which is not covered in the routine, a nurse must consult the Medical Director. In a grave emergency a nurse may use her own judgment regarding treatment of the patient but she must report the condition and her treatment of it, in writing to the Medical Director as soon as possible.

The revision authorized the nurses to administer aspirin, approved cough syrups and laxatives for internal use and various ointments and liniments externally. The use of antibiotics and narcotics was restricted to specific ailments with special instructions for their use.<sup>1</sup>

During much of the fifties the district nurses used both jeeps and horses which had its advantages as illustrated by a story Olive Bunce, the Bowlingtown district nurse, wrote for a 1954 Quarterly Bulletin.

The day begins early here at Bowlingtown. I like to get up at 5:30 A.M. or thereabouts and ponder about the day's work over my early morning tea. Leatherwood Creek, with several routine calls to make, plus a sick visit or two and one or two old people to see--I must confess for my enjoyment as much as for theirs. . . .

It doesn't take long to light a fire in the kitchen stove and prepare breakfast. Ten minutes to

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<sup>1</sup>Medical Routine, authorized January 1953, pp. 7-10, as quoted by Terpak, The Frontier Nursing Service, p. 195.

wash the dishes and find out the latest news from dear old Aunt Hannah who comes every morning to milk Flossie the cow. Then it's time to feed the animals. First Corky the parrot--to the music of pure jungle sounds; then the horses, Missy and Lacy. Next Mable the rabbit, and finally my flock of chickens. . . .

By now it is broad daylight and I prepare the saddlebags for the day's work. Syringes to boil, salves and pills to check, and all the little necessities that people ask me to bring the next time I'm up the creek.

Missy feels good in the mornings and those miles of level road to the first call go by quickly. Barnabas, my dog, trots alongside, leaving us only to chase imaginary rabbits. Jess and Tilda are waiting for me, smiling as usual. Both are getting on in years but are not at all old in spirit. While I am giving his weekly injection to Jess, we have a wordy tussle--which is the tougher, Jess or the needle . . . A brief discussion on our gardens follows and then I leave them to journey another mile to an old lady. An injection of hormone is enlivened by a discussion on her cow, due to calve in two weeks. A brief inspection of the animal in question and then on to the Saul Post Office. Here I weigh a lovely little stranger that I was privileged to bring into the world only two weeks ago. . . .

The next part of my road lies on a beautiful bridle path--rather rough but so pleasant after the dusty road. One more baby visit to a seven-month-old child, very healthy and a bundle of energy, and I arrive at the home of the Spurlocks, loved, I think, by all the Service. Lunch is ready and I join them. A few of Jim's tall stories and I am ready to ride up the creek a little farther to visit an old man who had not been more than a mile from his homestead in fifteen years. A bad accident with a mule and a sled put him in the bed. Oh, will I ever get those windows open! One of the children has cold blisters. These are swiftly treated, and then we aim for home. Missy is anticipating her evening feed, and Barnabas his hambone, so we pause only for a moment to chat with the school children on their way from classes.

We arrive at the barn where Missy has a good rub-down and goes into the pasture to cool off before her feed. With my mind on tea I start toward the house only to find a note on the door. Could I make a visit? Mother is "bad off." Luckily the call can be made by jeep, and twenty minutes driving on quite a reasonable road brings me to the house. The patient has a severe cold and is "a amotherin' to death." She is soon given treatment and made a little happier and, with a promise

to call tomorrow, I once more head toward the nursing center and at last tea. The animals are now fed and the records attended to. Then a light meal to cook and clear away, and then the livestock to water, and bed down for the night.

By eight-thirty P.M. I'm ready for bed and hoping to stay there, but who knows? Ellen's baby may come tonight.<sup>1</sup>

The FNS nurses were very popular and greatly respected during the forties and fifties, oral history respondents reported. They showed a lot of people how to do sanitary cooking, how to save their food and how to fix nutritious meals instead, for example, of the customary starch breakfasts of bread and gravy.<sup>2</sup>

Most area women had all of their babies with FNS nurse-midwives, usually in their homes. Mrs. Nancy Barnes, who had been a maid at Bowlingtown center, described her experiences with FNS. She enjoyed her job at the center and only left to marry at the age of sixteen. She remembered with particular pleasure riding with the nurse on calls and eating breakfast with her on the porch.

Barnes had complications with her first child so Virginia Frederick, the nurse-midwife, sent a neighbor by truck to get Dr. Barney at the hospital. This was in 1949 and there were no telephones. After the baby was born Frederick rode her horse through the snow every day for a week to visit

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<sup>1</sup>Olive Bunce, "The Day's Work," Quarterly Bulletin 29 (Spring 1954):3-5.

<sup>2</sup>FNS interview with Carolyn Gay.

her, Barnes remembered. "She was a good nurse, we were good friends."

Nurse Margaret McCracken came by jeep to deliver her second baby. "She was a character," Barnes said. She knew her job and would bawl you out if you didn't suit her but was "quite likeable" as long as you did what you were supposed to do; eat properly, get enough rest and exercise, and bathe and feed the baby according to instructions.

Barnes was very ill following the birth of her third child and remained in bed for a month. The nurse, an Irish woman, Ivaliean Caudill, came every day including Sundays to give medications and take her temperature. "She was a good friend, really the closest friend I ever had," Barnes said. Nurse Caudill forced her to take walks to regain her strength. "I always thought it was her help that pulled me through."

One of Barnes' children had rheumatic fever. She remembered with gratitude McCracken arranging for a visiting Cincinnati physician to come to her house to give the child an electrocardiogram.<sup>1</sup>

The FNS oral history transcripts contain numerous similar stories. There was some slight suspicion of district nurses during FNS' early years and occasional criticism of high charges during recent times, but the author has neither seen nor heard anything but compliments about the nurse-midwives during FNS' middle years.

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<sup>1</sup>FNS interview with Nancy Barnes.

Some typical feelings were:

"Now those girls in the old days got to know the family, they had a family tie."<sup>1</sup>

"The nurses were real good with children. There was an English nurse who would come to our house when our youngest boy was sick, she would bring a pop-up-book and read to him."<sup>2</sup>

A committee member said that everyone was impressed by the devotion of the nurses to duty. Not only did they care for the mother and newborn, they also took care of the elderly, they would help anyone in need.<sup>3</sup>

A member of the FNS advisory committee remarked, "We were spoiled, that was a free thing Mrs. Breckinridge got going, it was a charity thing because she wanted the mountain women taken care of so badly. She saw such a need and there was a need."<sup>4</sup>

Each FNS center had a committee whose function was to work with the nurse-midwives on problems related to the center. Members were "sort of an elite group," the daughter of a Flat Creek committee member commented, and included teachers, post-masters, storekeepers, a county clerk and the owners of the Leslie County telephone company.<sup>5</sup>

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<sup>1</sup>FNS interview with Glenda Davis.

<sup>2</sup>FNS interview with Sadie Stidham.

<sup>3</sup>FNS interview with Alden Gay.

<sup>4</sup>FNS interview with Georgia Ledford.

<sup>5</sup>Ibid.

The nurses relied on individual members for advice on such matters as where to buy horse feed, whom to employ to mend fences, and how tactfully to see to it that certain families obtained sufficient food or made their children attend school. As a group the committee helped with approach road problems (the roads washed away after every major storm) and center maintenance.

Some committees were more active than others. In 1954, for example, the Red Bird committee sewed thirty-seven adult nightgowns, thirty-six infant gowns, one quilt and twenty-one kimonos for the hospital.<sup>1</sup>

The Wendover district committee sponsored a "working" to repair the swinging bridge spanning the Middle Fork over which mail, food and other supplies were carried during spring tides.<sup>2</sup>

The Hyden committee sewed, helped at the sales of secondhand clothes donated to FNS<sup>3</sup> and furnished refreshments for the annual FNS surgical clinic for physicians and nurses.<sup>4</sup> The Hyden committee raised over \$3,000 to convert the old nurse's quarters for hospital use.<sup>5</sup>

49. <sup>1</sup>"Field Notes," Quarterly Bulletin 30 (Winter 1955):

<sup>2</sup>"Field Notes," (Summer 1954):53.

<sup>3</sup>Author interview with Lottie Roberts.

<sup>4</sup>"Field Notes," (Autumn 1954):61.

<sup>5</sup>Minutes of the Executive Committee, March 30, 1950.

Breckinridge and key staff visited each center annually and met with committees. Following a dinner prepared by the committee she reported on the FNS financial status and discussed maintenance and other center problems. She also usually talked about such health subjects as prenatal care, typhoid inoculations and parasites.<sup>1</sup> Minutes were taken by the FNS secretary and kept at Wendover.<sup>2</sup>

The meetings weren't like those of the current FNS advisory committee, Lottie Roberts who has been a member of the old and new style committees, reported. "She made the decisions."<sup>3</sup>

Frank Bowling from the Red Bird Committee felt that Breckinridge liked

. . . to get their ideas about things, she was an awful person to want to get your ideas about things . . . she may not agree with you but I always thought that that was the way she would decide things . . . get everybody's ideas and then take them back and get off by herself and think it over.<sup>4</sup>

Carolyn Gay, daughter of the chairman of the Brutus Committee remembered what she termed an annual rally day. One of the men cooked two sheep over an outside fire for dinner. After eating Breckinridge gathered all of the children around and told them stories. Later there was

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<sup>1</sup>FNS interview with Georgia Ledford.

<sup>2</sup>FNS interview with Glenda Davis.

<sup>3</sup>Author interview with Lottie Roberts.

<sup>4</sup>FNS interview with Frank Bowling.



supper. People mainly socialized, she said, since there wasn't much business.

Breckinridge always had her scotch with her and then had wine with dinner, according to Gay. But nobody minded, everyone respected her, "They would have with anyone else but of course she was from England, she was different."<sup>1</sup>

Although confused about her background Gay had a great respect for Breckinridge and her work.

. . . She never put people down if they were poor, dirty or anything like that. Everybody was treated the same. . .<sup>2</sup> She had a strong will, she had to do what she did.

#### The Hyden Hospital and Its Physicians

FNS used its hospital for seriously ill patients, abnormal obstetrical cases and periodic surgical clinics. Nurse-midwives cared for routine ailments and normal deliveries in the home. The medical director was the only FNS physician and was on call twenty-four hours a day, seven days

<sup>1</sup>Author's note: The story is included as an example of what strange ideas Leslie Countians acquired about Breckinridge, FNS staff and other outsiders.

Gay was only six or seven years old when she attended the meeting. Hard liquor was never permitted on FNS property nor were FNS staff permitted to drink while on duty. It was contrary to Breckinridge's character to do something she forbade her staff. However, she loved ice tea which her nurses all knew. Possibly one of the district nurses had made ice tea specially for Breckinridge. Sherry was served at Wendover which may be another source for the rumor.

The tendency to assume that outsiders come from a European country such as England is common to the area. The author has been called British several times. The fact that FNS had numerous British nurses may be relevant.

<sup>2</sup>FNS interview with Carolyn Gay.

a week. There have seldom been more than one or two additional physicians in the area.

In a 1947 Quarterly Bulletin Dr. Maurice O. Barney described the medical director's job. He visited the six district centers regularly, held clinics at the hospital three times a week, lectured at the midwifery school twice a week, made emergency home visits, did minor surgery and devoted any spare time to record keeping and correspondence. The most prevalent problem was worms,

. . . hookworms, roundworms, pinworms; in some families every member of the family has worms with the exception perhaps of the nursing baby. Many of the women had bad varicose veins of the legs due to multiple pregnancies and hard domestic labor necessary to raise a large family, such as carrying coal, wood and water. Gallbladder disease is also prevalent because the folks down here are fond of foods fried in grease, also they eat quite a bit of pork. There is quite a bit of thyroid disease. Then, of course, the tuberculosis rate is high, due to the fact that many of these people live in crowded quarters; I have even seen some cabin homes without windows. Episiotomies,<sup>1</sup> I found, are necessary only in rare cases here, due to the fact that the women marry early and have large families.<sup>2</sup>

On a typical clinic day the physician and his two nurse assistants saw fifty to sixty patients. Ailments ran the gambit from bullet wounds and fractures to the ever-common flu, diabetes, high blood pressure and arthritis. The hospital had no pharmacist, x-ray technician nor lab

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<sup>1</sup>An incision between the vagina outlet and the anus made during childbirth to avoid undue tearing by the baby's head as it passes through.

<sup>2</sup>Maurice O. Barney, M.D., "A Piece of Grace -- Twice a Year," Quarterly Bulletin 23 (Autumn 1947):3-6.

technician. Nurses sorted, counted and dispensed pills and did the minimal laboratory work done at the hospital; the remainder was sent to a Lexington laboratory.<sup>1</sup>

During much of the fifties and early sixties the FNS had trouble keeping physicians because of low salaries (\$7,000 in 1955,<sup>2</sup> \$12,000 in 1963<sup>3</sup>) and the lack of opportunity for professional education and advancement. As a selling point FNS advertised many perks that went with the job: a free completely furnished house, the use of a jeep and a horse and their upkeep, and free milk from Bang's-disease-tested cows.<sup>4</sup>

By urban standards the Hyden hospital was extremely informal. There were no specified visiting hours, relatives often stayed the night with sick patients. Margaret Field, a hospital nurse told of one seriously ill patient who was in the hospital several weeks. Every night a member of his family remained with him. One young man was particularly thoughtful. If a patient called and Field was in the other ward and didn't hear, he alerted her. He shoveled coal whenever necessary and helped Field lift an elderly patient. He even assisted with the last rites of the same elderly woman.

A prenatal patient who was in the hospital for a long time spent her evenings talking and reading to a lonely

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<sup>1</sup>Mary E. Mihalevic, "General Clinic," Quarterly Bulletin 27 (Winter 1952):27-28.

<sup>2</sup>Minutes, Executive Committee, November 30, 1955.

<sup>3</sup>Ibid., October 10, 1963.

<sup>4</sup>"Field Notes," Quarterly Bulletin 24 (Spring 1949):63.

little girl, away from her mother for the first time. Other prenatals made themselves useful in the early morning.

. . . Everything comes due at six o'clock and the night nurse could never finish her work some days if it were not for the friendly efficient help of these women. Some of them have "adopted" babies who were in the hospital a long time because they were malnourished and who needed their morning feeding just when the nurse was busiest.

Field was particularly impressed by the patience and gratitude of most of her patients. One woman had a long, long labor and was finally given a sedative at close to midnight. She said to the student midwife, "Now I'm going to try to be quiet so you can rest. You must be plumb tired out, you've been with me all day."<sup>1</sup>

A Red Bird center committee member credited the hospital nurses with saving his son's life. The boy had been severely burned and remained in the hospital three months. "They give him extra care," Bowling said. "The care he got there I don't believe he would have got anywhere else," and, he added, they didn't charge a cent.<sup>2</sup>

#### FNS Social Work

The FNS social service department was financed by the Alpha Omicron Pi national sorority fund and staffed by a young college graduate. A master's degree in social work was not required because, as the executive secretary wrote

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<sup>1</sup>Margaret M. Field, "My Hat is Off to Them," Quarterly Bulletin 22 (Winter 1947):10-12.

<sup>2</sup>FNS interview with Frank Bowling.

regarding a job application,

. . . we find they aren't adaptable enough to work under the conditions here. We usually have found it easier to get somebody that we can train.<sup>1</sup>

FNS tried to help when government social service agencies could not, because of time consuming red tape. Often Hyden's three government social workers referred families to FNS who needed emergency assistance. The FNS would step in with a \$20 grocery order, always spelling out that the money could not be spent on candy, pop or cigarettes.

In the spring the FNS donated seeds to families who couldn't afford to buy their own, since canned foods from the vegetable gardens were an important part of the diet.<sup>2</sup>

Much of the FNS social work related to health. Grants from the New Eyes for the Needy made it possible to provide glasses for children with eye problems. The agency donated frames and money, the FNS took them to Hazard where Dr. C. L. Combs gave them free examinations and, when necessary, fitted them for glasses. In 1950, for example, district nurses gave eye tests to all of the children in their areas. Fifty children with problems were then taken to Dr. Combs for further examinations and glasses.

The New Eyes for the Needy also distributed through the FNS social service department old age (magnifying) glasses.

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<sup>1</sup>FNS interview with Mary Ann Quarles Hawkes.

<sup>2</sup>Ibid.

These were especially in demand at election time when old people wanted to study the ballots.<sup>1</sup>

The social service secretary spent a large portion of her time chauffeuring patients to and from hospitals, dentists and physicians. Quarles described a typical trip.

At 6:00 A.M. with a station wagon full of children she started for Lexington, 130 miles away. Quarles begged the children to tell her if they felt nauseated, but they never did, they were too shy. When she smelled vomit she halted and washed out the car. She made three such stops before reaching Lexington. There she dropped off a boy at the Good Samaritan Hospital, left a volunteer courier with two children at Crippled Children's Clinic, took a polio victim to the shoe shop for new shoes and then to the brace shop. Then she picked up a well pump part for the executive secretary and bought the ground oyster shells Breckinridge liked for her chickens. The group headed home at 3:00 P.M., after dropping off the children along the way, Quarles reached Wendover at 7:00 P.M.<sup>2</sup> (The curvy, hilly coal road to Lexington was slow going.)

One of the social service secretary's jobs was to help certify fathers for aid to dependent children assistance.

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<sup>1</sup>Mary Ann Quarles, B.A., "Hurrah for Eyeglasses," Quarterly Bulletin 25 (Spring 1950), p. 21, and Mary Jo Clark, "New Eyes for the Needy," Quarterly Bulletin 26 (Winter 1951): 32.

<sup>2</sup>FNS interview with Mary Ann Quarles Hawkes.

This meant they had to be physically or mentally unable to work.

Often, Quarles said, men went into the mines, acquired a physical ailment such as an ulcer or sprained back, and although their ailments were cured, were never able to work again. She quoted one fairly typical physician's report. After stating that he could find nothing physically wrong with the patient, who complained of a bad back, he wrote, "It is unrealistic to think that this man will ever be able to go back to a paying job."<sup>1</sup>

Quarles referred many of her aid to dependent children assistance applicants to a neurological clinic in Lexington or a mental health clinic in neighboring Harlan but usually little could be done to help them.

Sometimes, Quarles suggested, FNS may have given too much. "We sometimes got annoyed at Mrs. Breckinridge and her lady bountifulness, particularly at Christmas time." At first, Quarles said, the toys and warm clothes were needed, but later people began selling them. So the nurses urged Breckinridge to abandon the annual Christmas appeal for toys, but she refused.<sup>2</sup>

Quarles wrote the author,

. . . I am sure in someways Mrs. Breckinridge's largesse to the local people hampered their own initiative. Or more properly, it did this to some families. I used to get so annoyed at people like the B. H.'s on Muncie's creek who came every spring for garden seeds and always

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<sup>1</sup>Ibid.

<sup>2</sup>Ibid.

went away from grab sales burdened down. When I hesitated to give them anything L. would say, "We'll just go to Mrs. Breckinridge."<sup>1</sup>

During a typical year, 1960, FNS gave aid to 180 families.

This included paying for x-rays, doctor and dental bills, buying coal and food for destitute families and providing seeds, school clothes, school lunches, a monthly allowance for three high school students and college fees for one student. The Social Service secretary made over seventy trips taking patients to clinics and hospitals in such places as Hazard, Harlan, Lexington and Cincinnati.<sup>2</sup>

#### Construction, Fires and Floods

The FNS had two perennial headaches; construction and natural disasters. The problems faced in the building of the Margaret Voarhies Haggin Quarters on hospital hill in 1949 and 1950 were typical.

Hyden was so isolated and the slide prone mountain so difficult to build on no contractor would take on the job without a prohibitive fee. So FNS, under the supervision of Agnes Lewis, did its own contracting.

Chris G. Queen, chief engineer of the Ford Motor headquarters on Red Bird River, advised on the excavation and retaining wall; the Combs Lumber Company provided an architect,

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<sup>1</sup>Mary Ann Quarles Hawkes letter to author, November 24, 1979.

<sup>2</sup>For detailed report see appendix I.



and Oscar Bowling and his crew who had worked on many of the earlier FNS buildings gave up their jobs elsewhere for the project.

During one twenty-four hour period a dump truck went over the precipice--no one was hurt but the truck was damaged; another truck caught fire, and the high loader reared too high in the air, threw its driver and broke his arm.

At another point there was a delay because one of the stone masons was involved in a shooting incident. Two men had been killed, the stone masons feared a revenge shooting ambush so quit work for several days.

Next came a landslide. A huge boulder and tons of mud and muck rolled into the back wall of the building. The Conley Morgan Coal Company saved the day by loaning a coal truck, at no cost, to haul away the debris.

The nurses' quarters were eventually completed in April 1950, making it possible to convert the hospital wing, where the nurses had lived, to office space.<sup>1</sup>

Forest fires became common after the area was lumbered off. The most serious occurred in 1952 following a bad drought. The ridge behind the hospital caught fire four times. Finally in desperation Hobert Cornett, the Wendover foreman, and Alonzo Howard, the hospital foreman, built back-fires just above the hospital water tanks, to meet the fires and the

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<sup>1</sup>Agnes Lewis, "We Are Our Own Contractors," Quarterly Bulletin 25 (Spring 1950):8.

hospital buildings were saved. Before the backfires were started several nurses, student midwives, instructors and Howard fought the fire all one night. The next night when the fire broke out again, Wendover secretaries and couriers joined the hospital staff and fought until the early morning hours.

The technique was to rake free of dry leaves and debris a two foot path between the fire and hospital and then watch for and put out any sparks that fell.

Twice, fires crept dangerously close to the Beech Fork center. Because the fire warden was short of men, Wendover secretaries and couriers were again asked to help.<sup>1</sup>

The January, 1957 flood was the worst in the area's history. It had rained three days and the Middle Fork of the Kentucky River was high. Then, in the early morning hours of January 29 there was a terrific thunder storm and by daylight the flood had begun.

Fifty Leslie County homes were completely destroyed and hundreds more damaged beyond repair. Nearly every home on the Middle Fork between Hyden and Elkhorn Creek some twenty miles down river washed away or was flooded.

The local Red Cross, chaired by Eugene Howard, immediately established relief centers in the churches, high school and courthouse. FNS staff helped at the canteens and with the

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<sup>1</sup>"Field Notes," Quarterly Bulletin 28 (Autumn 1952): 51.

distribution of clothes contributed by local citizens and the hospital.

On February 1 a Red Cross team and thirty Army engineers arrived. The engineers immediately started rebuilding the swinging bridges crossing the Middle Fork, all of which had been washed away. Truck loads of food and clothing came in from individuals and the Harrods Creek, Kentucky, Volunteer Fire Department hauled to the Hyden hospital eighty-seven boxes of clothing, which the FNS distributed through its district nurses.<sup>1</sup>

FNS centers were situated high above the river so suffered only minor damage to wells, pastures and gardens except for the Confluence buildings. Water flowed into the Confluence barn, the horses were evacuated to the pasture and hay heaved into the loft.

Neighbors came to see if the nurses needed assistance and helped haul buckets of coal from the flooding cellar. They were about to lift the refrigerator onto chairs when the river stopped rising.

One of the Confluence center nurses later wrote,  
. . . Our attention was almost constantly directed toward the river. Of course there was much flotsam, but when someone exclaimed, "there's a house coming" everyone hurried to a window or door to see whose house . . . houses, barns, stores and schools passed at frequent intervals--most of the dwellings belonged to people we knew.

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<sup>1</sup>Agnes Lewis, "A Postscript," Quarterly Bulletin 32 (Winter 1957):17-19.

The Center's neighbor, Sizemore's store and post office, was one of the first to float away.

The following day everyone began cleaning up.

. . . They used the fast-running mountain stream to scrub and wash and drink. There was no self-pity, anywhere. They just got on with the job. The homeless were readily taken in by kinfolk and neighbors. We stopped by, going to our patients, and helped de-mud one kitchen. Water had reached the ceiling and had ruined everything in the house.<sup>1</sup>

With the swinging bridge gone, Wendover was cut off from Hyden for several days. Although pastures were flooded and two cows almost drowned, the administrative headquarters suffered no serious harm.

Hyden escaped with relatively little damage since the houses which had piled up at the highway bridge just above the town blocked the water to some extent. Electricity was knocked out which worried the hospital staff because of a critically ill patient. With no electricity the pumps couldn't work and there was no water. The evening following the flood Governor Chandler drove through with a military convoy enroute to Hazard, which had suffered disastrously. He immediately arranged for emergency electric power from the TVA. Hyden hospital and the town had electricity that night.<sup>2</sup>

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<sup>1</sup>Carolyn Banghart and Molly Lee, "Confluence Flood Waters," Quarterly Bulletin 32 (Winter 1957):11-14.

<sup>2</sup>Jane Furnas, "Water, Water, Everywhere," Quarterly Bulletin 32 (Winter 1957):6-10.

Two District Centers Close and One Opens

The Bowlingtown center closed December 20, 1956 and the Confluence center April 1, 1960, following construction of Buckhorn Dam. The area which they served became a lake and state recreational park visited by over one million persons annually.<sup>1</sup> The federal government reimbursed FNS \$24,825<sup>2</sup> for the Bowlingtown center and \$21,500 for Confluence.<sup>3</sup>

When the citizens of Cutshin, a community near the Hyden-Hazard road, heard of the Bowlingtown closing they asked FNS to build a center there. The area had never been served by FNS, although its people often used the Hyden hospital. FNS bought land and a house on Wolf Creek, which flows into Cutshin Creek, and converted it into a new center at a cost of \$12,135.51.<sup>4</sup> Betty Lester, an assistant director, opened the center and immediately built up a large caseload. The Bowlingtown nurse, with much of her equipment, was transferred to help Lester and on February 8, 1959, nurse-midwife Josephine Finnerty had the honor of "catching" the first Wolf Creek baby.<sup>5</sup>

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<sup>1</sup>Karen and Mather, Atlas of Kentucky, p. 155.

<sup>2</sup>Minutes of Executive Committee, November 11, 1958.

<sup>3</sup>Ibid., April 15, 1959.

<sup>4</sup>Ibid., April 12, 1960.

<sup>5</sup>"Field Notes," Quarterly Bulletin 34 (Winter 1959):46.

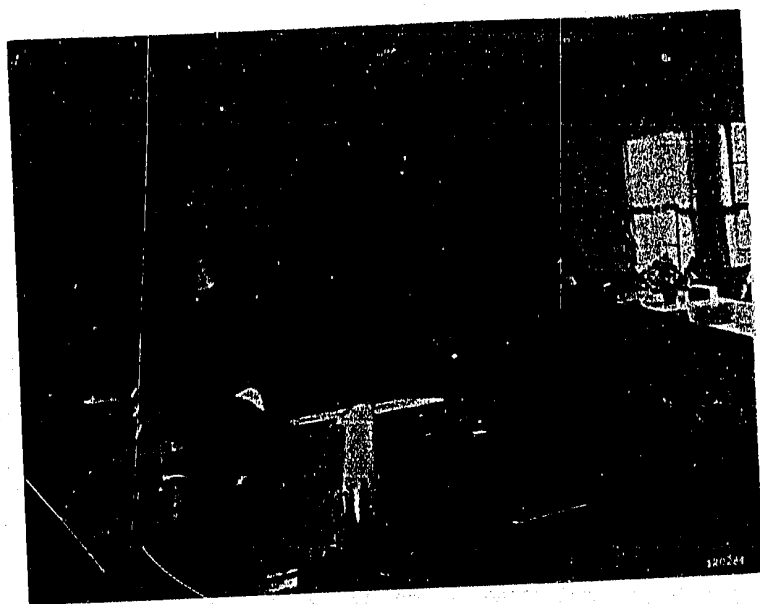


Fig. 5. District center living room.

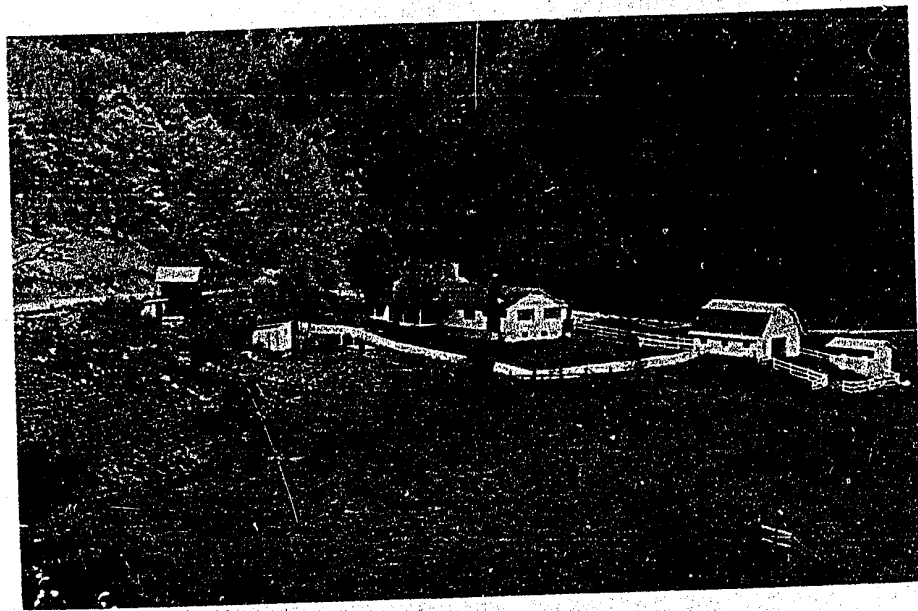


Fig. 6. Wolf Creek center

### Breckinridge's Death

Breckinridge died May 16, 1965, at the age of eighty-four. As her health failed, her production slowed and FNS operations stagnated.

There was a constant turnover of staff and the Service was several times without a medical director. Breckinridge stopped making trips outside and district meetings were held at Wendover with mixed reactions from the participants. Some resented the long drives over rough roads to Wendover. Others enjoyed the Wendover atmosphere and food. A Red Bird Committee officer remembered attending a meeting in the big house living room. Three or four committee members at a time went upstairs to visit Breckinridge in her bedroom but she did not attend the meeting.<sup>1</sup>

During her last years Breckinridge and her staff received numerous honors. In September, 1962, Leslie County held the first of a series of Mary Breckinridge Days with a parade led by Breckinridge on horseback, and speeches by Leslie County officials, ex-staff and board members.<sup>2</sup>

The following summer Mary Breckinridge Park on Buckhorn Lake was dedicated. She was honored by Berea College and visited by the British ambassador, the right honorable Sir David Ormsby Gore,<sup>3</sup> and Kentucky Governor Edward T. Breathitt

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<sup>1</sup>FNS interview with Glenda Davis.

<sup>2</sup>Peggy Elmore, "Mary Breckinridge Day," Quarterly Bulletin 38 (Autumn 1962):29.

<sup>3</sup>"Field Notes," Quarterly Bulletin 37 (Spring 1962):43.

who had proclaimed October 3, 1964, the Third Annual Mary Breckinridge Day.<sup>1</sup>

On June 11, 1964, the Right Honorable the Lord Harlech, British Ambassador to the United States, presented Helen E. Browne, the FNS assistant director, the insignia of the Officer of the Most Excellent Order of the British Empire (OBE) as a token of England's respect and affection for FNS and its nurses.<sup>2</sup>

Breckinridge began losing her eyesight about ten years before her death. Staff first knew of it following an annual meeting in Lexington. After the guests had left, Jean Hollins, the resident courier, and Peggy Brown, a nurse-midwife, approached Breckinridge to see if she was ready to go to the hotel. Breckinridge stuck out her hand and said, "Oh, how nice to see you." She obviously didn't recognize them.

Later she informed her associates that oculists had told her that she was losing her middle vision. She hadn't told the staff, Breckinridge explained, because she hated being dependent and had started using a cane so that by the time she became blind she would be able to walk the Wendover property with the aid of her cane.

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<sup>1</sup>Kate Ireland, "Mary Breckinridge Day," Quarterly Bulletin 40 (Autumn 1964):9.

<sup>2</sup>Helen E. Browne, "The Investiture," Quarterly Bulletin 40 (Summer 1964):30.



It was sad, the executive secretary said, because reading was Breckinridge's life. As her sight failed, she started listening to the radio and letting staff members read to her.<sup>1</sup>

With age Breckinridge became quite conservative, particularly concerning financial matters. Although FNS achieved a one million dollar endowment in 1958<sup>2</sup> and consistently ended the year with a fiscal surplus she hesitated to raise salaries. As a result, by 1963 salaries were fifty percent below government and industrial levels.<sup>3</sup> On several occasions Breckinridge requested board permission to increase salaries but then failed to make more than token raises.<sup>4</sup>

According to the then assistant director, Helen Browne, it became so noticeable that Dr. J. Rogers Beasley, the medical director, warned, "If the FNS doesn't do something it will fall flat on its face."<sup>5</sup>

Change was abhorrent to Breckinridge during the last five years of her life, Browne said.

. . . There was no one on the staff to spur her on. Agnes Lewis (the executive secretary) and I were too close to her and it was all we could do to keep the work going. It was sad.

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<sup>1</sup>FNS interview with Agnes Lewis.

<sup>2</sup>Minutes of Executive Committee, November 11, 1958.

<sup>3</sup>Ibid., April 20, 1963.

<sup>4</sup>Ibid., November 11, 1961 and April 28, 1962.

<sup>5</sup>FNS interview with Helen E. Browne.

Impending government control may have had something to do with it, Browne added. The Children's Bureau approached her and "she threw them out."

During her later years Breckinridge was sometimes against progress, Browne said. A good example was a bridge over the Middle Fork dubbed "Mrs. Breckinridge's folly." The bridge logically should have been built near Confluence, but Breckinridge persuaded the authorities to locate it at Dry Hill where it goes nowhere. She wanted Confluence to remain cut off so that it could demonstrate how a health agency could serve an isolated community.

Browne said she had begged Breckinridge to build a new hospital rather than the Haggin nurses quarters but Breckinridge refused.<sup>1</sup>

Breckinridge tendered her resignation at the board's spring, 1961, meeting to take effect when in the judgment of the executive committee and upon recommendation of her senior colleagues, it was deemed advisable. The board accepted unanimously.<sup>2</sup> Earlier, at Breckinridge's request, the board had designated Browne as first assistant director to take over in case of her death or incapacitation.<sup>3</sup>

In July, 1963, Breckinridge was operated on at St. Joseph Hospital in Lexington for the removal of three

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<sup>1</sup>Ibid.

<sup>2</sup>Minutes of Executive Committee, April 22, 1961.

<sup>3</sup>Ibid., September 24, 1952

low-grade malignant tumors in the bladder. After four days she was transferred to the University of Kentucky Medical Center hospital for radium treatments.

As had been her custom she wrote frankly of her illness in the Quarterly Bulletin for she felt obligated to keep her staff and donors informed of her health since it so seriously affected the FNS.<sup>1</sup>

Breckinridge lived for almost two years after the operation and wanted to keep control until the day she died. Her mind was as clear as a bell in the morning. Most of the support we gave her, Browne explained, "was to keep her informed. She like to feel she could make decisions and we asked her to make decisions."<sup>2</sup>

Breckinridge looked forward with pride to the Fortieth Anniversary celebrations scheduled to be held in Lexington June 8, 1965, and wrote a special piece in the Quarterly Bulletin about the first forty years.

. . . What began as the first demonstration in America of the use of nurse-midwives, under medical direction, to care for the lonely rural mother in rough country, has now become a demonstration of use to countless rural people in isolated parts of the world. From the beginning this was part of our plan and most of you, our readers, helped to bring it about. We believed, and still believe, that the best way to make work grow is to start it like a tiny plant in one piece of ground, with the support of local leading citizens.

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<sup>1</sup>Mary Breckinridge, "Before We Step in the Wings," Quarterly Bulletin 39 (Summer 1963):21.

<sup>2</sup>FNS interview with Helen E. Browne.

In time the plant will become a banyan tree, "yielding shade and fruit to wide neighborhoods of men."<sup>1</sup>

She died Sunday, May 15, 1965. Friday had been a working day as usual. She held her regular morning conference and discussed the bulletin which she was editing and listened to accounts of the day's work and problems. Afterwards she and her close friend, Margaret Gage, edited a Bulletin article. She enjoyed her lunch and then had her mail read to her. She asked for fresh new lettuce leaves for tea but at dinner time refused to eat and complained of feeling very tired. Browne went up to see her and immediately called Dr. Beasley. She fell into a deep sleep. Members of the staff stayed with her until she died at 1:48 P.M. the following day.<sup>2</sup>

Her death was "so peaceful," Browne said, "I was so glad; it would have killed Agnes if it had been difficult."<sup>3</sup>

Her funeral combined the simplicity which she loved with what might almost be termed the semi-military aspects of her heritage.

Monday afternoon Breckinridge, dressed in her blue-gray winter riding uniform, lay in state at the funeral home. A steady stream of Leslie Countians passed by her body from 1:00 P.M. until 10:00 P.M. as FNS staff stood watch in relays.

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<sup>1</sup>Unsigned, "Frontier Nursing Service, First Forty Years, 1925-65," Quarterly Bulletin 40 (Winter 1965):4.

<sup>2</sup>Petty Lester, "The Trumpets Sounded," Quarterly Bulletin 40 (Spring 1965):3

<sup>3</sup>FNS interview with Helen E. Browne.

On Tuesday at 8:45 A.M. the district nurses, dressed in their riding clothes, assembled at the funeral home. The casket was closed and covered with a blanket of ivy and mountain laurel which an FNS employee had picked in the mountains early that morning. At the last minute, Martha Cornett, the county's public health nurse, wove into the blanket little yellow rose buds, taken from the Wendover garden.

. . . Slowly the cortege wended its way from Hyden to the high school, the district nurses driving their jeeps and the white-clad hospital nurses in the station wagon. At the bridge across the Middle Fork River, her horse, saddle empty and boots reversed in the stirrups, took up her position behind the hearse. Two couriers led him, and Anne Cundle, in her riding uniform, walked beside him. Mrs. Breckinridge would have loved it.

The Episcopal Service for the Burial of the Dead was read by the Reverend William Burns assisted by the Reverend Benton P. Deaton, two old friends.<sup>1</sup>

Many older Leslie Countians remember attending the service. "We felt like we had lost a good friend, we sort of wondered what was going to happen."<sup>2</sup>

"The funeral impressed many with its simplicity. There were just two bouquets," a district committee member commented.<sup>3</sup>

That afternoon the Bishop of Lexington conducted funeral services at Christ Church in Lexington and Breckinridge

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<sup>1</sup>Lester, "The Trumpets Sounded."

<sup>2</sup>FNS interview with Georgia Ledford.

<sup>3</sup>Ibid.

was buried next to her relatives in the Lexington cemetery.<sup>1</sup>  
 The executive committee met immediately after the funeral and named Helen E. Browne director.<sup>2</sup>

The Frontier Nursing Service kept a clipping book of obituaries. One of the most poignant appeared in the Hazard Herald from neighboring Perry County under the caption: "She Hath Done What She Could (Mark 13:8)."

She shunned personal publicity, yet even before she died her name was a legend in the hills.

She came from one of America's most distinguished aristocratic families, yet she lived the greater portion of her days among Kentucky mountaineers.

She reached the age of twenty-five unskilled for any life but that of a society debutante, yet before she died she had contributed more than any other person to the advancement of modern medicine in the isolated Kentucky mountains.

She learned to ride a horse as one of the standard luxuries of young ladies of affluence, then turned that skill to practical use, carrying on horseback needed medical care to shacks and cabins where sickness ruled, or where women labored through the pangs of childbirth.

She was educated at the best schools in the United States and Europe, studying the arts and all the social graces that refined and polished young women of her high social standing.

Yet one of her greatest accomplishments in later years was to establish the Frontier Graduate School of Midwifery, where her own students study not the gracious arts but the very practical science of child delivery.

Her efforts in the mountains of Kentucky resulted in the safe delivery of over 12,000 babies between 1925 and 1955, yet her own life was one of personal tragedy when both her children died young.

A woman frail of body, her physical exploits on Kentucky's mountain frontier make the exploits of earlier pioneers pale in comparison. Fording swollen streams on horseback was all in her day's work, as

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<sup>1</sup>Lester, "The Trumpets Sounded."

<sup>2</sup>Minutes of the Executive Committee, May 18, 1965.

were riding down those same streams in leaky boats, bearing the sick and injured. Riding alone on horseback through dangerous mountain coves and hollows where dangerous men lurked outside the law was her common hazard . . . .

. . . She came from that line of distinguished men, yet none of their distinction outshone hers, nor were their contributions in high national and international offices greater than her own in little Leslie County . . . .

. . . For while the deeds of her famous ancestors live on in musty history books, her deeds live on in whole generations of living people, who, whether they know it or not have their own distinguished ancestor in Mrs. Mary Breckinridge, founder of the Frontier Nursing Service. Truly, she was the guardian angel of the Kentucky mountains.<sup>1</sup>

The Courier-Journal of Louisville ran a six column obituary written by one of its star correspondents, Alan M. Trout, who wrote:

. . . But with all her attainments, Mrs. Breckinridge loathed personal publicity. She fought against it with the ferocity of a tigress at bay. In a large sense, she died a stranger in the state that nurtured her distinguished lineage. The irony is, the work of her life outshines that of any male in her line.<sup>2</sup>

Laudatory stories about Breckinridge also appeared in such papers as the New York Times, Washington Post, Chicago Tribune, Cincinnati Enquirer and San Francisco Examiner. Senator John Cooper inserted Trout's obituary in the Congressional Record.<sup>3</sup>

<sup>1</sup>"She Hath Done What She Could," Hazard Herald, 17 May 1965.

<sup>2</sup>Alan M. Trout, "Nurse and Angel of Frontier Dies," Louisville Courier-Journal, 17 May 1965.

<sup>3</sup>FNS clipping scrapbook.

Breckinridge has been dead fifteen years, yet older members of the staff and Leslie Countians still talk of her, quote her maxims and tell funny stories about her.

The author has never read or heard one derogatory remark about Breckinridge in the over one hundred oral history interviews made with Leslie Countians.<sup>1</sup>

Most Leslie Countians did not know her well, since when not "outside" making fundraising speeches Breckinridge was tied to her desk at Wendover. The only time many people ever saw her was on her annual visits to the district centers. Some typical comments about Breckinridge follow.

Lawrence Bowling, who worked for the Red Bird district center almost twenty years, said,

. . . I don't know what people would have done without her, how they would have raised their children. I don't know what I would have done.<sup>2</sup>

Cecil Morgan from Camp Creek said,

. . . She was sure fun. She had a good sense of humor. I don't reckon I've ever heard any person say anything against Mrs. Breckinridge in my whole life. She was good with children.<sup>3</sup>

Mrs. Biggerstaff, daughter of a county judge remarked,

. . . Some of the people who come in (to the mountains) have this superiority . . . they're devoting their lives to these poor, ignorant mountain people . . . there's

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<sup>1</sup>The author has not read all of the FNS oral history transcripts and has skimmed others so may have overlooked a critical remark.

<sup>2</sup>FNS interview with Lawrence Bowling.

<sup>3</sup>FNS oral history interview with Cecil Morgan.



a lot of that at Berea--"sacrificial"--but not with FNS, it's not a condescending sort of thing, not a sacrificial thing at all.<sup>1</sup>

Breckinridge "never talked down," Georgia Ledford said.<sup>2</sup> She was looked up to by the community, Alden Gay said.<sup>3</sup> Frank Bowling, who helped supervise some of the Wendover construction, commented,

. . . She was the smartest woman I've ever talked to. Every time you came (to Wendover) she wanted to know what you were aiming to do and how. She wanted it done the right way.<sup>4</sup>

Robert Cornett, the Wendover maintenance foreman, remarked that Breckinridge was no politician (one of Leslie County's principal diversions) and that she never let anybody criticize a person because of his or her politics.<sup>5</sup>

Actually Breckinridge loved to discuss national and international politics with her staff. A staunch Democrat, President Roosevelt once asked her to serve on the National Democratic Committee, but she turned down the offer because she feared it might offend some of her Republican donors.<sup>6</sup> There was an unsubstantiated rumor that she had been asked to run for state or U.S. senator, it was unclear which,

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<sup>1</sup>FNS interview with Mrs. Biggerstaff.

<sup>2</sup>FNS interview with Georgia Ledford.

<sup>3</sup>FNS interview with Alden Gay.

<sup>4</sup>FNS interview with Frank Bowling.

<sup>5</sup>Interview with Robert Cornett, May 1975.

<sup>6</sup>FNS interview with Helen E. Browne.

but felt she lacked the time to both administer FNS and enter politics.<sup>1</sup>

Cornett worshipped Breckinridge.

. . . The winter before she died Mrs. Breckinridge asked me to watch the crab apple tree and tell her when it was the prettiest. She wanted to walk down and see it. That was her last walk. I don't see why a person like that can't live forever.<sup>2</sup>

Breckinridge respected the mountaineers and considered it an honor to win their friendship. She told one young Ohio woman who left the staff to teach in a Leslie County school, "You should feel honored that they will let you teach them." This was her feeling about the FNS, the secretary added, "one of humbleness that the mountaineer would let her work amongst them."<sup>3</sup>

Staff and couriers, particularly younger women, were sometimes frightened or awed by Breckinridge, but Leslie Countians never were. She was great with local people, Browne commented.<sup>4</sup>

She expected perfection of her staff but with other people was remarkably tolerant. Couriers detested chauffeuring her, for she was always in a hurry and continually urged them to drive faster, no matter how rough or dangerously icy the road might be.

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<sup>1</sup>FNS interview with Margaret Gage.

<sup>2</sup>Interview with Cornett.

<sup>3</sup>Author interview with Lucile Knechtley.

<sup>4</sup>FNS interview with Helen E. Browne.

But with non-FNS drivers Breckinridge was a patient passenger. A secretary who often accompanied her on "outside" trips told this story.

The young daughter of a Boston committee member was sent to a downtown hotel to pick up Breckinridge and her secretary and drive them to an afternoon meeting in the suburbs. Boston's streets were being torn up for a major repair job and the chauffeur lost her way on the poorly marked detour. Breckinridge, who prided herself on promptness, was over an hour late to the meeting but never in any way indicated to the young driver her concern. Instead, she told amusing stories and endeavored to put the girl at ease.<sup>1</sup>

Breckinridge achieved the impossible and expected her staff to do the same. When she came to Leslie County she knew nothing of engineering, plumbing, electricity, carpentry, masonry or the other trades needed in hospital construction. But she learned, and supervised the construction of Hyden Hospital. Later she sent equally inexperienced nurses to Beech Fork to build the center. She had succeeded, she expected them to succeed and they did.

Agnew Lewis joined the FNS as chief of the records office. Soon, however, Breckinridge put her in charge of maintenance and construction. Lewis protested that she knew nothing of construction. "Neither did I," replied Breckinridge, "You can do it child." (Child was her favorite form of

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<sup>1</sup> Author interview with Lucile Knechtley.

endearment for younger staff members.) Lewis did and ended up supervising the construction of the garden house, the nurses' quarters and midwives' quarters as well as handling the maintenance problems of the centers, hospital and Wend-over.<sup>1</sup>

Breckinridge had the ability to attract a superlative staff and to bring out the best in them. Several, including assistant director Dorothy Buck, resident courier Jean Hollins and hospital superintendent Ann P. MacKinnor died in the Service. Others, such as assistant directors Helen E. Browne and Betty Lester and executive secretary Agnes Lewis were so imbued with her spirit that they determined not only to keep the Service going after her death, but to enlarge and improve it.

She always had time for the staff, listened to their problems and took a personal interest in them. According to Lester:

. . . She would always listen and put you right in a very short time. If you had a worrying case or a family with problems you could discuss them with her and she'd tell you what to do. Then you would go back later, tell her what had happened and she'd rejoice with you.<sup>2</sup>

Some people considered Breckinridge dictatorial. She certainly had strong ideas. It was almost hopeless to

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<sup>1</sup>FNS interview with Agnes Lewis.

<sup>2</sup>FNS interview with Betty Lester.

argue with her. As a secretary remarked, "You might as well give in early as late, because she wasn't going to."<sup>1</sup>

She had a tremendous head for details and knew everything that was happening. Although she delegated authority she expected staff to report to her. When she was at Wendover she checked and double checked. When she was away she turned things over to the staff and knew they would do their best. She never questioned what they had done in her absence or said you should have done so and so.<sup>2</sup>

A close friend and confidante of Breckinridge said:

. . . She was certainly one of the greatest women I ever knew. She was so human, she had her times when she was angry and upset. It used to drive her crazy if anyone thought she was saintly. She would do something very naughty so they wouldn't think so. She was great fun. She was such an ebullient person and so full of interesting conversation and jokes . . . .  
. . . She was one of the most remarkable women I've ever known. She had the mind of the man and the heart of a mother.<sup>3</sup>

Browne probably knew Breckinridge as well as anyone on the staff. She wrote of her feelings in an article for Nursing Outlook.

. . . Her own experiences of grief having made her most understanding of others in trouble, she listened willingly to anyone who sought her counsel. A hard worker herself, she had no patience with the laggard and no time for the idealist. Two favorite expressions

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<sup>1</sup> Author interview with Lucile Knechtley.

<sup>2</sup> FNS interview with Agnes Lewis.

<sup>3</sup> FNS interview with Margaret Gage.

were: "Ideas, not ideals are what matter in the world," and "Don't give me theories, give me facts."<sup>1</sup>

Professionally, Breckinridge was a pioneer, years ahead of her time, preaching and practicing programs and ideas which are just now being studied and adapted by national and international agencies. She realized there would never be many physicians willing and able to work in rural areas such as Leslie County and saw the need of developing a feasible method of delivering adequate health care to rural populations. She chose the nurse-midwife as the purveyor and created a decentralized system focusing on the nurse-midwife and district center with a small hospital and physician providing backup.

She saw the need of treating the family as a unit, teaching family members how to care for each other, how to maintain good health through proper nutrition and sanitation. She was primarily interested in preventing illness, not just treating it.

Long before statistics became fashionable with educational and government institutions Breckinridge understood the importance of keeping careful records of her work in order to prove its effectiveness. Years before the era of the

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<sup>1</sup>Helen E. Browne, "A Tribute to Mary Breckinridge," Nursing Outlook (May 1966):54.

feasibility studies Breckinridge made opinion, manpower and demographic surveys of the area where she planned to work.<sup>1</sup>

### Summing Up, the First Forty Years

During Breckinridge's forty years as director the FNS expanded from a one-clinic program to a twelve district center service covering a 1,000 area with a population of approximately 18,000. Facilities included a forty-bed hospital, administrative headquarters and five outpost centers.<sup>2</sup>

The caseload increased from 953 general patients and 43 midwifery patients in 1925<sup>3</sup> to 1,303 hospital patients, 369 midwifery patients and 10,446 clinic and home care patients in 1965.<sup>4</sup>

Annual expenses rose from \$6,622.92<sup>5</sup> for the first year to \$350,000 in 1965.<sup>6</sup> The original staff of the

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<sup>1</sup>The author, who spent over twenty years with Agency for International Development (AID) health and development programs, found Breckinridge's 1925-35 plans indistinguishable in breadth and vision from the most sophisticated AID and United Nations (UN) program documents, the only difference being Breckinridge's were more literate.

<sup>2</sup>"Fortieth Annual Report," Quarterly Bulletin 41 (Summer 1965):2-16.

<sup>3</sup>"Kentucky Committee for Mothers and Babies Report," Quarterly Bulletin II (June 1926):21.

<sup>4</sup>"Fortieth Annual Report," p. 11.

<sup>5</sup>"Statement of Expenses," Quarterly Bulletin II (June 1926):8.

<sup>6</sup>See appendix J for comparative fiscal reports for 1925, 1935, 1945, 1955, 1965 and 1975.

Director and two nurse-midwives increased to thirty-three professionals.<sup>1</sup>

By February, 1956, the Frontier Graduate School of Midwifery had trained 285 nurse-midwives who were working in the United States, the Philippines, New Guinea, India, Thailand, South Korea, Canada, France, the Middle East and in parts of Africa and South America.<sup>2</sup>

Most important, Breckinridge demonstrated that in an area with only one or two physicians available to care for 18,000 people, primary care could be effectively delivered by the specially trained nurse-midwife with the support of a physician.

During its first 25 years, FNS delivered 8,596 registered midwifery patients and had a gross maternal death rate of 1.2 per thousand.<sup>3</sup> More than three-quarters of the women were delivered in their homes which in nearly all cases had no electricity, central heating nor indoor plumbing. More than half of these deliveries occurred prior to 1940.<sup>4</sup> In comparison the maternal death rate of the United States was from three to six times as high as that of the FNS. The U.S. 1930

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<sup>1</sup>"Fortieth Annual Report," p. 58.

<sup>2</sup>Ibid., p. 13.

<sup>3</sup>Booz-Allen & Hamilton, Management Consultants, "Family Nurse Practitioners in Kentucky, Frontier Nursing Service, Inc., Wendover, Kentucky," March, 1969, pp. 31-32.

<sup>4</sup>Ibid., p. 31.



## CHAPTER VI

### 1965-75, AN ERA OF MODERNIZATION

#### Changes in Leslie County

##### Communications

Media Blitz

##### The War on Poverty

CEO Projects

Water and Sewage Project

The Appalachian Regional Development Act

The Schools Consolidate

##### Coal Mining

The Hurricane Disaster

##### Economic Problems and the Welfare Syndrome

Black Lung

#### FNS

Helen E. Browne Takes Over

The Mary Breckinridge Hospital and Health Center

Family Nursing Added to Midwifery Course

##### Government Input

Peace Corps Training Projects

CEO/FNS Comprehensive Health Clinic

The Hospital Emergency Administration Radio Network

Medicare and Medicaid

##### The Old and the New

A Day in the Life of a District Nurse

##### Research and Evaluation

Family Planning

Community Study

Decentralized Care and Hospitalization

University of Wisconsin Study of the Family Nurse

The Primex Study

Mary Breckinridge Hospital Opens

Fiftieth Anniversary and the End of an Era

1965-75, Summing Up

maternal mortality rate was 6.7 per 1,000 live births and 3.8 per 1,000 live births in 1940.<sup>1</sup>

There were no maternal deaths among the births attended by FNS nurse-midwives after 1952.<sup>2</sup>

A further indication of the value of the FNS prenatal and newborn care was suggested by the neonatal and infant mortality rates for Leslie County which were well below the state and national infant mortality rates. The Leslie County infant death rate for 1966 was 6.0 as compared to 40.9 for Kentucky and 23.7 for the U.S.<sup>3</sup>

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<sup>1</sup>Ibid., pp. 31-32.

<sup>2</sup>Ibid., p. 32.

<sup>3</sup>Ibid., p. 32 and Exhibit xii following p. 32.

## CHAPTER VI

### 1965-75, AN ERA OF MODERNIZATION

The Leslie County of the seventies had little resemblance to the Leslie County Breckinridge first rode into in 1923. Hyden was now approached via the Daniel Boone Parkway, which connected U.S. Interstate 75 (the snowbird route to Florida), with Hazard. A four mile "spur" off the Daniel Boone tollway led into Hyden.

The old FMS hospital had been converted to apartments and offices and replaced by a modern three story 40-bed hospital situated on flat bottomland about a hundred yards off Main Street. A new grammar school stood near the hospital with playing fields between the two buildings.

#### Changes in Leslie County

Hyden's Main Street, which had been widened and paved, was lined by two department stores, a recently remodelled bank, two jewelry stores, two hardwares, two supermarkets, a drug store, post office, welfare office and the County Courthouse. Two beauty parlors, two legal offices, a dentist and several government agencies rented space above the stores.

The metered parking slots were almost always filled. During the first few days of the month when welfare recipients spent their checks there was no parking space whatsoever and

pickup trucks and vintage sedans lined the approaches to Hyden for a half a mile or more.

Clothed in stylish jeans, slacks and neat work clothes, most of Hyden's pedestrians looked like pedestrians in any other part of the United States. Those in the food stamp line, however, tended to be overweight and sloppily attired, some wearing old fashioned bib overalls or dated shabby dresses.

Leslie County's main roads and highways were bordered by clusters of mobile homes. There was virtually no rental housing available so young couples had no alternative but to buy a mobile home and place it on a relative's land or a few rented feet along the highway. By the end of 1974 it was estimated that nearly half the population of Kentucky's coal counties lived in mobile homes.<sup>1</sup>

The number of Leslie County housing units rose from 2,379 in 1960 to 3,277 in 1970 according to U.S. Census figures.<sup>2</sup> Although the population increased from 10,941 to 11,623, the average number of persons per household decreased from 4.7 in 1960 to 3.9 in 1970.<sup>3</sup>

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<sup>1</sup>Harry M. Caudill, The Watches of the Night (Boston: Little, Brown and Company, 1976), p. 196.

<sup>2</sup>U.S. Bureau of Census figures cited by Ralph J. Ramsey and Paul D. Warner, Kentucky County Data Book (Lexington: Cooperative Extension Service, University of Kentucky, 1974), p. 75.

<sup>3</sup>Ibid., p. 92.

Almost all homes were electrified. By 1970, 82 percent had washing machines, 14.7 percent dryers and 43.2 percent home freezers (used primarily for storing garden produce).<sup>1</sup>

With scant gardening space, modern labor savings devices and smaller families, the young women of the seventies had little to do compared to their mothers and grandmothers. Perhaps for this reason the percentage of Leslie County women in the work force increased from 7.7 percent in 1960 to 17.1 percent in 1970.<sup>2</sup>

As elsewhere in southern Appalachia, fundamentalist, sectarian churches continued to be popular in the more isolated areas of the county. Buildings were shabby and often painted with "Jesus Returns," or similar slogans. Most of these churches were located up the hollows and bore such names as "Church of Christ" or "Church of God."

Many of the lower middle class were Baptists.<sup>3</sup> The more prosperous business people and professionals tended to attend the Presbyterian church in Hyden, which had a membership of about one hundred.<sup>4</sup> The largest church in Leslie

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<sup>1</sup>Ibid., p. 105.

<sup>2</sup>Ibid., p. 141.

<sup>3</sup>Nathan L. Gerrard, Churches of the Stationary Poor in Southern Appalachia quoted in Bruce Ergood and Bruce E. Kuhre, eds., Appalachia: Social Context Past and Present (Dubuque: Kendall/Hunt Publishing Company, 1976), p. 274.

<sup>4</sup>FNS interview with Leonard Hood, Presbyterian minister.

County with a membership of about four hundred, was the Hurt's Creek Church of Christ.<sup>1</sup>

Federal and State input had a great impact on Leslie County and FNS. The State built the Daniel Boone Parkway which enabled Leslie Countians to reach Lexington in two-and-a-half easy driving hours and Cincinnati in five hours.

Government funds expanded the food stamp program, built a water supply and sewage disposal system for Hyden and financed school consolidation and improved educational facilities. Government funding also played a key role in the construction of the new FNS hospital and expansion of its training program to include family nursing.

#### Communications

Improved communications, particularly the ownership of television sets, appeared to have quite an influence on the area. The percentage of Leslie Countians owning TV sets rose from 5 percent in 1960 to 21 percent in 1970. The percentage having a telephone available increased from 1 to 9 percent and the number owning automobiles from 12 percent to 16 percent.<sup>2</sup>

Leslie County TV and telephone ownership was low partly because many families could not afford these luxuries,

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<sup>1</sup>Source, Dale Deaton, Director, FNS Oral History Project.

<sup>2</sup>Ramsey, Kentucky County Data Book, p. 105.

but mainly for technical reasons. TV reception in the mountainous coal mining area was so poor that until cable television was introduced in the late seventies owners had to run expensive lines to the top of the nearest mountain. Everytime there was a wind or electrical storm the lines were damaged and had to be patched, an arduous chore on the densely wooded mountain sides.<sup>1</sup>

Because of the financial and engineering problems the telephone company could not meet the demand for new phones. Applicants often had to wait six to twelve months for a telephone and then were usually placed on an eight to ten family party line.

Research has indicated that TV often broadened the viewers' horizons, added to their knowledge and raised their expectations.<sup>2</sup> There are signs that this was true in Leslie County.

In 1973 Dr. Marian Pearsall, University of Kentucky social anthropologist, made a health attitudinal survey in Wooten, a small community between Hazard and Hyden. Over half of the respondents watched TV entertainment programs related to health as follows: Medical Center, 43.1 percent; Emergency, 27.5 percent; Doctors, 7.8 percent, and Dr. Welby,

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<sup>1</sup>The author's TV line was about two-thirds of a mile long. It took a minimum of two hours to run (local slang for inspect) and repair the line following a storm.

<sup>2</sup>Robert M. Goldenson, The Encyclopedia of Human Behavior: Psychology, Psychiatry, and Mental Health, 1970, S.V. "Television Effects."

7.8 percent (Note, in several cases respondents watched more than one program). Almost four percent said they acquired health information from TV programs, an additional 17.6 percent had watched health documentaries.<sup>1</sup>

Dr. Hawkes noticed that following the spread of TV to Camp Creek, many Wendover maintenance men became fascinated by baseball, which had never interested them before, and fanatical followers of the Cincinnati Reds, whose games were shown on the local station.<sup>2</sup>

The author remembers accompanying a nurse on a home visit early in 1941. The patient and her family knew nothing of the war rumors and obviously didn't care. Twenty years later the author made another home visit on an elderly patient with hypertension. This time the patient asked the nurse to postpone her examination until after the noon news was over so he could see what was happening in Asia where a young relative was stationed.

As elsewhere TV probably served as an opiate to the ill and unemployed. The author remembers visiting a darkened three room cabin up a poor hollow on a beautiful spring morning in 1973. Most of the patient's neighbors were out planting their gardens. An obese woman in her thirties and

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<sup>1</sup>Gertrude Isaacs, "Community Study Conducted by Dr. Marian Pearsall," Table 27.

<sup>2</sup>FNS interview with Dr. Mary Ann Quarles Hawkes.



three overweight children slouched in front of the TV set watching a soap opera. The family nurse had been struggling for years to help the family. As she took the mother's blood pressure she asked, "Why isn't Bob (a ten-year old) in school?"

"He didn't feel like school today."

"I thought Ann and Jo were going to enroll in the vocational school," the nurse said.

"They're too shy, maybe they'll go next week," the mother answered.

#### Media Blitz

In the fall of 1963 the New York Times sent Homer Bigart to southeast Kentucky to see if Harry M. Caudill had exaggerated the region's plight in his expose, Night Comes to the Cumberlands. Bigart's front page article told of poverty, dependency, backwardness and inertia and was the first of an avalanche of media coverage.

In November 1963, President John F. Kennedy, a regular New York Times reader, summoned Kentucky Governor Bert Combs to the White House and after Combs confirmed the facts of Bigart's story JFK pledged forty-five million dollars from his executive funds to provide winter relief for the area. He also promised to jog the moribund President's Appalachian Regional Commission (PARC) into some kind of action and said that he would visit Kentucky after returning from his scheduled trip to Texas.

Although President Kennedy never reached Kentucky, his expressed interest sparked a year-long trek of reporters, commentators, authors and TV cameramen to the area.<sup>1</sup>

Newspaper reporter John Fetterman described the onslaught.

Along Highway 80, which slashed through the saddened hills from Manchester to Hyden to Hazard to Hindman, the newsmen flock. Their purpose: "I'm here to get some poverty stuff, Mac." And the brakes of their cars squeal day after day at the same "picturesque" spots where shabby little cabins perch and grubby children play.

"Jesus Christ, stop and let me get a coupla shots of that."

"Boy! That's real poverty stuff there."

And on the highway from Jenkins to Whitesburg and from Whitesburg to Harlan, the small motels now serve a cosmopolitan clientele. The taciturn motel manager watches you unload a typewriter and a pair of cameras, sees you are alone and says disparagingly, "Had a whole N.B.C. crew here last week."<sup>2</sup>

Even Pravda got in the act with a front page picture spread of a shack full of unwashed children and their unkept mother.<sup>3</sup> Following a Christmas Eve CBS program, Christmas in Appalachia, the area was flooded with checks, money orders and outmoded clothes.<sup>4</sup>

The intense media coverage deeply annoyed many southeast Kentuckians. Mrs. Carolyn Gay, daughter of the FNS Brutus district committee chairman, said she became furious when

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<sup>1</sup>Harry M. Caudill, The Watches of the Night (Boston: Little, Brown and Company, 1976), p. 6.

<sup>2</sup>John Fetterman, Stinking Creek (E. P. Dutton & Co., Inc., 1967; Dutton Paperback, 1970), p. 18.

<sup>3</sup>Caudill, The Watches, p. 9.

<sup>4</sup>Ibid., p. 7.

people assumed Clay County was backward (FNS covers a portion of Clay County). She pointed out in her oral history interview that a governor and several senators came from Clay County and that more young people went to college from her creek than from any area in the state.

Gay's sister lived in California and wrote that she'd seen a television program about eastern Kentucky which included a sequence on one of the FNS centers. It burned her up, it depicted us "just like we were poor heathens."<sup>1</sup>

Not everyone in southeast Kentucky is of the same economic status. As a general rule the further up the creek the poorer the family, with the wealthier and better educated inhabitants living on the agriculturally rich and more accessible bottomland.

When speaking of the poorer families Gay said, "We didn't really look down on them, they just didn't have the same ideas as us." For example, she explained, "They didn't see the importance of education."

Gay told of one family who piled up some old chicken bones on the table, dressed in old clothes and persuaded a national magazine photographer to take pictures of them. As a result they received truck loads of clothes and numerous checks.<sup>2</sup>

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<sup>1</sup>FNS interview with Mrs. Carolyn Gay, housewife.

<sup>2</sup>Ibid.

## The War on Poverty

On March 16, 1964, President Lyndon Baines Johnson called for "total victory" in a "national war on poverty." Four months later he signed the Economic Opportunity Act and appointed R. Sargent Shriver to head the new Office of Economic Opportunity (OEO).<sup>1</sup>

What to do about Appalachia was a key campaign issue during the 1964 presidential election which was won handily by President Johnson. On March 9, 1965, President Johnson signed a \$1.9 billion program (The Appalachian Regional Development Act) of federal-state economic aid to Appalachia.<sup>2</sup>

A proliferation of projects followed. Employment and manpower power training, food stamps, school lunch, black lung, water supply, sewage and waste disposal programs were introduced and other welfare programs expanded.<sup>3</sup>

### OEO Projects

A Leslie County Development Association consisting of business leaders, ministers and county officials had been established in 1961. With the founding of OEO the Association immediately sought funds for a project writer.<sup>4</sup>

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<sup>1</sup>Trager, The People's Chronology, p. 1102.

<sup>2</sup>Ibid., p. 1108.

<sup>3</sup>C. Milton Coughenour, Quality of Life of County in Families in Four Eastern Counties: Change and Persistent Problems (University of Kentucky College of Agriculture, 1961 and 1973), p. 9.

<sup>4</sup>Author interview with Rufus Fugat, County Extension Agent.

OEO approved funds for a county director that spring and followed with grants for a county health screening program and for the organization of a four-county community action program called LKLP after the counties concerned-- Leslie, Knott, Letcher and Perry.<sup>1</sup>

By October 1966, \$981,439 had been spent in Leslie County over an eighteen month period for: a head start program for 690 children; an adult education program for 995 people; a neighborhood youth corps program through which 427 received work experience; a rural loan program for 3 persons; and the salaries of VISTA personnel.<sup>2</sup>

LKLP soon absorbed the function of the development association. Their major programs were: outreach services, including home visits; medical transportation and the use of a cannery located near Hazard; an energy/weatherization project for the homes of the poor and elderly; a manpower program to provide work experience for low income people; and head start designed to meet the development needs of pre-school children.<sup>3</sup>

A related program dubbed the "Happy Pappies" by George Wooten, Leslie County judge, paid \$1.25 per hour for community road building and construction programs.<sup>4</sup>

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<sup>1</sup>Thousandsticks News, 21 January 1965.

<sup>2</sup>Ibid., 27 October 1966.

<sup>3</sup>LKLP Community Action Council, OEO/CSA: 15th Anniversary, 1978.

<sup>4</sup>Caudill, The Watches, p. 72.

Rufus Fugat, who as county extension agent was instrumental in founding the community development association and helping implement several county programs, felt that the head start and work programs were particularly effective. Head start, he said, provided many children their first socialization. Program directors insisted that middle class children be included, thus exposing the children from isolated homes to a broader culture.

The work program repaired many roads which the county didn't have the funds to mend, Fugat said. The workers were required to attend adult education classes which Fugat approved of since he was often invited to lecture the men on agriculture subjects.<sup>1</sup>

Another program which Fugat believed effective was the community action program which provided contacts in small communities responsible for helping people determine their needs, and directing them to sources for solving their needs. These men and women helped organize meetings to discuss such questions as poor bridges, pot-holed roads and lack of transportation.

VISTA personnel funded through OEO helped with the community action programs. Because some of them dressed sloppily in dirty blue jeans, they were not always popular with Leslie Countians, but several were well accepted.

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<sup>1</sup>Author interview with Rufus Fugat.

One young man stimulated the Grassy Creek community to build a community center which Yale architectural students helped design. He was an excellent VISTA worker, Fugat said. "He got down there and lived with the people and worked at it." There was another boy who ended up on Governor Wendall Ford's staff. "I don't know what he accomplished but he sure got into community activities," Fugat said.<sup>1</sup>

Several VISTA volunteers succeeded in getting people to attend meetings and to start discussing and analyzing their problems. As the people talked, their vague grudges against county courthouse officials hardened and they began to complain, for example, that their children were growing up dumb because the schools were "no account."

The riled courthouse officials and coal operators wrote their congressmen and senators, who in turn pressured the White House to direct the VISTA personnel into more useful and prudent channels such as coaching ball teams or promoting picnic grounds. Some VISTA volunteers quit. Others concentrated on cleanup campaigns and other worthy projects. By the end of 1967, the VISTA program was for all practical purposes dead in Eastern Kentucky.<sup>2</sup>

#### Water and Sewage Projects

In November 1966, a \$1,305,000 grant and \$261,000 thirty-five year loan at 4.12 percent from the U. S. Economic

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<sup>1</sup>Ibid.

<sup>2</sup>Caudill, The Watches, pp. 33-39.

Development Administration was approved to construct a sewage and water system in Hyden. It took over two years to obtain the grant because Leslie County was undercounted in the 1960 census. Because of the low population count the original approval was for a 50 percent grant and 50 percent loan. Local officials sent 4-H youths to visit and count the inhabitants of each Hyden home. They backed these figures with data from the active voting lists and health department births and deaths reports. George Wooten, the county judge; Rufus Fugat, county extension agent; Denver Adams, Hyden lawyer; and Denver Mattingly, telephone company owner, took the new figures to Frankfort and obtained a 90 percent grant with only a 10 percent loan.<sup>1</sup>

#### The Appalachian Regional Development Act

In 1965 the Federal government initiated a regional development Act (ARD Act). The Act established the Appalachian Regional Commission (ARC) and authorized a number of public investment programs with heavy emphasis on highway construction. The Act further authorized the certification of local development districts by state governments.<sup>2</sup>

The ARD district covering Leslie County, known as the Kentucky River Area Development District, Inc. (KRADD), was headquartered in Hazard and covered eight counties. The

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<sup>1</sup> Author interview with Rufus Fugat.

<sup>2</sup> Frank S. Riddel, Appalachia: Its People, Heritage, and Problems (Dubuque, Iowa: Kendall/Hunt Publishing Co., 1974), p. 305.



ARD districts assisted local governments and other agencies in economic and social development and helped prepare the state's annual development plan. Each ARD was governed by a board consisting of the county judge, mayor and a citizen's representative.

Over seventy-five percent of the initial \$1,092,400,000 was spent on highways. Other projects included health demonstration programs, vocational education facilities, restoration and environmental development and supplements to the wide-ranging federal grant-in-aid programs.<sup>1</sup>

KRADD funds were used to help build the Leslie County vocational school, establish a district garbage landfill, publicize local tourist attractions and assist the Kentucky Housing Corporation to bring badly needed housing into the area.<sup>2</sup>

#### The Schools Consolidate

Southeast Kentucky county school boards were a major political power since they controlled a large number of jobs. I'll appoint your daughter a teacher, the elected county superintendent often promised, if your family will vote for me.

Teachers were hired through family influence, not qualifications. Outsiders were seldom welcomed, for they had no votes to deliver. The qualities needed to be a teacher,

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<sup>1</sup>Ibid., p. 306.

<sup>2</sup>Author interview with Rufus Fugat.

according to Harry Caudill, were to have been born in the county, to have received a few credits from local institutions and to have numerous relatives whose votes one could deliver.<sup>1</sup>

With the resurgence of interest in Appalachia, ivy league idealists deluged rural school districts with applications. Ph.D.'s, retiring naval and airforce officers, corporate officials quitting the rat race applied and were turned down.

One superintendent wrote a retired West Point mathematics instructor that he could not teach algebra, arithmetic and geometry in a mountain school because he lacked the required credits in "methodology."<sup>2</sup> The application of an army officer's widow who held a degree from the Sorbonne in French literature and had studied music in Vienna was rejected by three county superintendents, each of whom had vacancies for language and music teachers.<sup>3</sup>

Eastern Kentucky schools were a closed system, James L. Ogletree wrote in 1968 in Appalachian Schools, A Case for Consistency. School administrators were interested in survival, not improvement. Most children failed to see the value of school nor did the community understand the importance of education as illustrated by the fact that east

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<sup>1</sup>Caudill, The Watches, p. 50.

<sup>2</sup>Ibid., p. 52.

<sup>3</sup>Ibid., p. 51.

Kentucky tax assessments were far below the state average and only paid about fifteen percent of school costs.<sup>1</sup>

In 1960 the state legislature levied a three percent sales tax and earmarked sixty-five percent of the proceeds for its education foundation.<sup>2</sup> At that time Leslie County had fifty one-room schools, ten two-room schools, four three-room schools and six six-room schools.<sup>3</sup> The county procured attractive bottomland along centrally located roads and constructed five consolidated schools. By 1975 Leslie County had ten schools, one of which was a two-room school on Abner's branch, an isolated area, too far for children to be transported to consolidated schools.<sup>4</sup>

The new consolidated schools contained from eight to ten classrooms, a kitchen, dining area, laboratory and library. New school buses bumped up and down the creeks morning and evening. Since the foundation paid the school from a formula based on school attendance, school boards closed the schools whenever it snowed and the roads were impassable for the lumbering buses.<sup>5</sup>

In 1952 only 29 out of Leslie County's 129 teachers had college degrees. Teachers' salaries slowly increased in

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<sup>1</sup>Quoted in Riddel, Appalachia, p. 172.

<sup>2</sup>Caudill, The Watches, p. 205.

<sup>3</sup>Brewer, Rugged Trail to Appalachia, p. 41.

<sup>4</sup>Ibid., p. 40.

<sup>5</sup>During the winters of 1977-78 and 1978-79 Leslie County schools were closed for all of January and February because of icy roads.

the sixties and standards improved so that by 1965 all but one of Leslie County's 164 teachers were college graduates.<sup>1</sup>

U. S. Public Law 89-10, the Elementary and Secondary Education Act of 1965, had quite an impact on rural Appalachian schools. The law provided funds for audio-visual and library equipment and for the educationally disadvantaged. Acquiring the funds was no automatic and taught the school administrators how to analyze and plan. Before their requests were considered, the administrators had to prove a need, show that their proposals would help solve the need and that their plan included provisions for evaluating the program.<sup>2</sup>

A great deal of money was involved. In 1966, for example, Leslie County received \$287,833.83 for library science, art, music and remedial reading.<sup>3</sup> A Leslie County remedial reading teacher described her excitement when chosen to work with the program for she saw great potential in the use of audio-visual materials and special textbooks. But, she said when the politicians realized how much money was involved in procuring the materials, she was taken off the project.<sup>4</sup>

Educational statistics for the years 1960 to 1970 indicated that Leslie County did a poor job of teaching its

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<sup>1</sup>Brewer, Rugged Trail to Appalachia, pp. 40-41.

<sup>2</sup>Ogletree, Appalachian Schools quoted in Riddel, Appalachia, p. 175.

<sup>3</sup>Thousandsticks, 17 March 1966.

<sup>4</sup>FNS oral history interview with retired teacher.

children and motivating them to continue their schooling although there was some improvement during the decade. The median educational level for Leslie Countians 25 years and older rose from 6.9 to 8.2 during the years 1960 to 1970. This compared to the median levels for the state of 8.7 for 1960 and 9.9 for 1970.<sup>1</sup>

In 1970, 44.7 percent of Leslie County high school graduates went on to college and 6.1 percent went to trade school, as compared to 61.7 percent going to college in 1960 and 4.9 percent to trade school.

Leslie County had no merit scholarship semi-finalists during either years. Of those examined 59.4 percent passed the Armed Forces qualifying tests during the years 1968-69 and 1970 as compared to 86.7 percent for the state. This was the lowest rate in the state, but may be an unfair figure since possibly only the poorly qualified applied.<sup>2</sup> Perhaps one reason Leslie Countians stopped schools is that most of them did not aspire to professional and white collar jobs.

A 1976 study indicated that east Kentucky male senior high school students had lower vocational expectations than students from other parts of the state as illustrated in the following table.<sup>3</sup>

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<sup>1</sup>Ramsey, Kentucky County Data Book, p. 25.

<sup>2</sup>Ibid., pp. 23-26.

<sup>3</sup>Donald W. Bogie, The Occupational and Educational Aspirations and Plans of Rural Kentucky High School Seniors (Lexington: Department of Sociology, University of Kentucky, College of Agriculture, Agricultural Experiment Station, RS-50, 1976), p. 11.

TABLE 2  
 OCCUPATIONAL EXPECTATIONS  
 OF MALE HIGH SCHOOL STUDENTS

Region	<u>Occupational Level</u>			Total
	Profes- sional	White Collar	Manual and Farm	
	(Percent)			
East (n=300)	25.3	10.0	54.7	100.0
Central (n=269)	35.7	18.2	46.1	100.0
West (n=274)	39.8	18.6	41.6	100.0

#### Coal Mining

When the TVA expanded in the mid-fifties into steam generation as a supplement to hydroelectric power, it insisted upon paying low rates for coal, which the mining companies still recovering from the post-World War II collapse, were forced to accept. Steel and power companies demanded the same cheap coal. To meet the lower prices the coal companies sacrificed safety precautions and reduced wages. Cheaper to operate strip mines replaced many of the old mines.<sup>1</sup>

The strip mines and surviving deep mines prospered until the recession of 1970-71 when the free-market mines with no long range contracts with the large factories and

<sup>1</sup>Ibid., p. 61.

power companies were badly hit. The industry revived in 1974 when the energy crisis forced power companies to convert to coal. In 1973 Kentucky overtook West Virginia and became the nation's largest coal producer, a title it retained during 1974 and 1975. Kentucky mines produced over 130 tons during 1973.<sup>1</sup>

Auger, bulldozer and similarly skilled heavy equipment operators staffed the new strip mines leaving few openings for the semi-literate laborers of the old deep mines. With no job opportunities the unemployed miner either went on welfare or migrated north.

#### The Hurricane Disaster

On December 30, 1970, two adjoining mines on Hurricane Creek, about three miles above Wendover, exploded. Of the thirty-eight men trapped inside only one survived, making it the second worst mining disaster in Kentucky history.<sup>2</sup>

The year-old mines, owned by Charles and Stanley Finley, were typical small east Kentucky truck mines. The owners had leased the land from Fordson, a subsidiary of Ford Motor Company,<sup>3</sup> bulldozed a road to the mountain side, blasted a few holes, installed a conveyor belt and some rebuilt coal-cutting and loading machinery and hauled the coal out as

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<sup>1</sup>Ibid., p. 188.

<sup>2</sup>Thomas N. Bethell, The Hurricane Creek Massacre, (New York: Perrenial Library, Harper & Row, Publishers, 1972), p. ix.

<sup>3</sup>Caudill, The Watches, p. 120.

quickly as possible. The two mines employed about one hundred men working in two shifts none of whom had received any formal safety instruction. They had learned what little they knew as apprentices. The miners grossed an average of \$24.00 a day, low by union standards, but high for Leslie County.<sup>1</sup>

The mines, which produced about 1,400 tons a day, had failed several state and federal inspections for such violations as poor placement of roof bolts, poor ventilation, inadequate equipment maintenance, no safety training and a long list of other problems. Prior to the disaster there had been two bad accidents in the second of which two men were killed.<sup>2</sup>

The two mines had been drilled into the hillside parallel to each other. On the day of the accident, Walter Bentley, the explosives man, was assigned to blast a "boom hole" so that a conveyor belt could be installed connecting the two mines. The hole was so named because it accommodated the loading boom on the end of the conveyor belt.<sup>3</sup>

The sole survivor, A. T. Collins, had known that the "boom hole" would be blasted during his shift and suspected that Bentley would use illegal dynamite. So he invented an errand and left the mine to pick up needed supplies. He

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<sup>1</sup>Bethell, The Hurricane, p. 10.

<sup>2</sup>Ibid., pp. 7-30.

<sup>3</sup>Ibid., p. 34.



started back, shortly after noon and was within ten to twelve feet of the entrance when the explosion occurred. A black blast of smoke and hot air tossed him to the road some fifty or sixty feet from the mine.<sup>1</sup>

The community responded immediately. The Mine Safety people sent a rescue team, FWS dispatched Dr. Beasley and nurses, who quietly went through the crowd helping the families of the miners when they could. Young couriers carried gallons of coffee to the shivering bystanders. A merchant near the mine opened his store and sent food to the relatives and rescuers, a Red Cross canteen arrived from Lexington late that night and Hyden women opened the kitchen at the Presbyterian Church for waiting families. Governor Louie B. Nunn and Congressman Tim Lee Carter rushed to Hyden to express their sympathy.<sup>2</sup> Even President Nixon expressed concern and announced that he planned to come to the scene of the accident but was deterred because nearby airports were closed by the weather. (A check by a New York Times correspondent showed that all neighboring airports were open at the time).<sup>3</sup>

A temporary morgue was set up at the Hyden elementary school. Rescue was delayed because of the presence of carbon monoxide. The last of the bodies was not brought out of the mine until the next day.

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<sup>1</sup>Ibid., p. 36.

<sup>2</sup>Peggy Elmore, "Disaster," Quarterly Bulletin 46 (Winter, 1971): 9-11.

<sup>3</sup>Bethell, The Hurricane, p. 43.

The insensitivity of the media intensified the tragedy. Many wives had rushed to the site as soon as they heard of the explosion without taking time to dress properly for the cold. Several wore bedroom slippers or sandals. The TV cameramen thought this odd and implied in their coverage that everyone in Leslie County wandered around in bedroom slippers.

One of the young women had only been married a year and was over eight months pregnant. The TV cameramen zoomed in on her worried face constantly, and when her husband's body was carried out from the mine, attempted to take closeups until a nurse deliberately inserted herself between the cameramen and bereaved woman.<sup>1</sup>

Dr. Beasley accompanied the bodies to the morgue and gave each miner a superficial examination in order to determine the cause of death, since there was no qualified medical examiner at the scene. He believed that six of the men may have survived the concussion and apparently died of carbon monoxide. It was possible the men could have survived if they had been provided the self-rescuer small gas masks required by law.<sup>2</sup>

A severe snowstorm hampered communications and transportation, but food and clothing soon began arriving by the truckload. Loretta Lynn started a campaign to raise funds to

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<sup>1</sup>Author interview with retired nurse-midwife.

<sup>2</sup>Bethell, The Hurricane, p. 40.

educate the children of the miners to which Colonel Harland Sanders donated \$10,000.<sup>1</sup>

A committee composed of personnel from the health and welfare agencies handled the distribution of clothes. At the request of interested citizens in Hazard and Hyden the FNS agreed to be the sponsoring agency for the Miner's Relief Fund, because, as one cynic put it, "the FNS was the only institution everyone trusted."<sup>2</sup>

Subsequent investigation revealed that an illegal dynamite, primacord,<sup>3</sup> had been used for blasting.<sup>4</sup> Legal disputes concerning the cause of the disaster and compensation continue to this day.

A great deal was written about the disaster. Many people wondered why the men had worked in the Hurricane mines if they knew the mines were dangerous. Joe Creason, a popular Louisville Courier-Journal columnist, pointed out that they had no alternative. There were almost no other jobs in Leslie County and the miners were untrained for northern industrial jobs. Which, Creason said, explained the fatalistic attitudes miners and their families develop.

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<sup>1</sup>Caudill, The Watches, p. 120.

<sup>2</sup>Peggy Elmore, "Disaster," Quarterly Bulletin 46 (Winter, 1971):8. The cynical statement was made by a retired FNS nurse-midwife who would prefer not to be quoted.

<sup>3</sup>Primacord, with its long open flame shooting through inflammable coal dust, was considered unsafe.

<sup>4</sup>Bethell, The Hurricane, p. 51.

. . . They live with danger and they steel themselves to expect the worst.

I came eyeball to eyeball with this fatalism the first time I went into a mine more than 20 years ago. At noon, the men broke out their lunch boxes and the man I was with, a miner for 35 years, spread two or three thick sandwiches, a raw onion and a piece of pie on his lap. When he ate his piece of pie first, I wondered why.

"'Cause," he said simply but eloquently, "the roof might fall."<sup>1</sup>

### Economic Problems and the Welfare Syndrome

Despite the Appalachian Area Development, OEO and other government programs, Leslie County remained economically deprived with large numbers of its citizens unemployed. Many left for jobs in the north, others went on one form of welfare or another.

During the decade of the sixties 2,048 persons left Leslie County,<sup>2</sup> an estimated additional 400 persons departed from 1970 to 1974.<sup>3</sup>

In 1970 Leslie County boasted the highest dependency ratio in the state, 430 nonworkers for 100 workers. Neighboring Clay County, also part of the FNS territory, was a close second with 426 nonworkers for 100 workers. The national dependency ratio was 145 and Kentucky's 170.<sup>4</sup>

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<sup>1</sup>"Joe Creason's Kentucky," Louisville Courier-Journal, 11 January 1971.

<sup>2</sup>Ramsey, Kentucky County Data Book, p. 6.

<sup>3</sup>Kentucky Deskbook of Economic Statistics (Kentucky Department of Commerce, 1975), p. 41.

<sup>4</sup>Ramsey, Kentucky County Data Book, p. 41.

In 1974 Leslie County's unemployment rate was 7.8 percent compared to 4.5 for the state.<sup>1</sup> The per capita income for Leslie County in 1973 was \$1,852, the third lowest in the state.<sup>2</sup>

The median family income for Leslie County rose from \$1,838 in 1960, to \$3,517 in 1970;<sup>3</sup> 55.32 percent of the County's families had incomes below the poverty threshold in 1970. Families living below the poverty threshold received their income from earnings, 42.23 percent; social security, 36.04 percent; and welfare, 36.34 percent.<sup>4</sup>

In the early sixties food commodities consisting of canned meat, chicken, beef barbecue, pork and beans, apple sauce, cheese, peas, green beans and peanut butter were distributed to the needy. The same foods were given to one-room schools assuring the children of a health meal even though many were tired of eating the same foods they ate at home.<sup>5</sup>

The food stamp program was introduced to Leslie County in August, 1965; 3,373 persons from 676 families were declared eligible for the program.<sup>6</sup> Program participants

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<sup>1</sup>Kentucky Deskbook 1975, p. 56.

<sup>2</sup>Ibid., p. 65.

<sup>3</sup>Ramsey, Kentucky County Data Book, p. 53.

<sup>4</sup>Ibid., p. 58.

<sup>5</sup>Fetterman, Stinking Creek, p. 107.

<sup>6</sup>Thousandsticks News, 19 August 1965.

bought food stamps at a discount of their face value. The discount varied from year to year and was dependent on the recipient's income. In cases of extreme need the stamps were provided at no charge.

The key to obtaining a welfare check was to be declared totally disabled by a competent physician. Many welfare applicants were young men who had never seen their fathers work. They were accustomed to welfare, their goal was to receive the same checks as their father. When they reached eighteen and the monthly support check stopped the young men panicked. Some were enticed into vocational classes and the OEO-sponsored meaningful work programs. Others were eventually declared psychologically incapable of working and went on the dole.

### Black Lung

The introduction of improved undercutters, loaders and conveyor belts speeded mining operations but also kicked up so much dust that after a few years most miners contracted pneumoconiosis, commonly known as black lung or "smothering." Their lungs became so coated with coal dust they could scarcely function. Young men looked middle aged and middle aged men ancient. Many black lung victims lacked the strength to handle such simple chores as carrying in kindling wood.<sup>1</sup>

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<sup>1</sup>The author knows several black lung victims. Descriptions of the crippling effects of the disease are not exaggerated. Several of the author's friends cannot even walk twenty feet without becoming exhausted.

By the early sixties the Appalachians contained nearly a quarter million ruined coal miners. Kentucky law recognized black lung as a compensable disease in 1948, but few claims were honored. Instead the wheezing miners were diagnosed as suffering from miner's asthma or accused of smoking too much.<sup>1</sup>

Soon the welfare rolls ballooned as the black lung victims, who obviously could not work, were granted eligibility. In 1969 Congress officially recognized the disease with a law which required greater mine safety and cleanliness and provided compensation to the pneumoconiosis victims.

The legislature directed the Social Service Administration to examine claims which had been voided under state statutes of limitations. X-ray evidence of the disease was required.

Ex-miners immediately mobbed social security offices but most of their claims were turned down for lack of evidence. Over 40,000 claims were refused in Kentucky alone.

In 1972 the act was amended and liberalized. The requirement for radiological evidence was removed and increased stress placed on breathing tests. But most important of all, the act now presumed that a man who had worked fifteen years in or around a coal mine and who had pneumoconiosis had incurred the disease during his employment and must be

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<sup>1</sup>Caudill, The Watches, pp. 145-46.

compensated. Payments ranged from about \$190 per month for a single childless man on up. In many cases claimants also drew compensation from social security as a disabled person. By 1974 the claims of most of Kentucky's 40,000 miners who had originally been turned down had been reprocessed and in most cases approved.<sup>1</sup>

Most working Leslie Countians looked down on the permanent welfare recipients although the majority felt that ex-miners receiving black lung payments deserved anything they got. Cecil Morgan of Camp Creek commented that he saw no reason for people being on welfare. Morgan, who had a huge vegetable garden and sold handmade furniture said, "There's always something for people to do if they are willing to work."<sup>2</sup>

#### FNS

The decade following Breckinridge's death was a period of rapid change and modernization. A forty-two bed two million dollar hospital was built and family nurse training added to the midwifery school. Four physicians, a comptroller, laboratory and x-ray technicians, and pharmacists were added to the staff.

With the coming of medicare FNS was forced to abandon its annual fee system and shift to payment for treatment thereby raising the cost to the patient.

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<sup>1</sup>Caudill, The Watches, pp. 149-52.

<sup>2</sup>FNS interview with Cecil Morgan.



FNS community relations changed with the times. Leslie Countians took over most of the clerical and administrative jobs formerly handled by outsiders. Many FNS staff moved out of the hospital and Wendover dormitories into rented homes. Several built their own houses.

As they moved into the community, staff began to participate in community affairs. A FNS nurse-midwife was the driving force behind the founding of the Leslie County Humane Society. Other staff members held offices in the Mental Health Association, the newly organized volunteer fire department and the Community Development Association. Wives of FNS physicians served as Leslie County librarians.

#### Helen E. Brown Takes Over

The executive committee unanimously elected Helen E. Browne director of the FNS at a special meeting held in Lexington on May 18, 1965, immediately following Mrs. Breckinridge's funeral.<sup>1</sup> Brownie, as she was known by her staff and the community, had served as associate director since 1957.

Browne was born in Bury St. Edmunds, England, on February 3, 1911. After completing her nurse's training at St. Bartholomew's Hospital School of Nursing in 1934, she studied midwifery at the British Hospital for Mothers and Babies, where she then served as midwifery supervisor.

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<sup>1</sup>Minutes of Executive Committee, May 18, 1965.

Browne joined the FNS in 1938 and after two years on the district became Hyden hospital midwife, a position she held from 1940 to 1947. She was appointed hospital administrator for a year and then came to Wendover as assistant director. Breckinridge groomed Browne for the directorship for many years. She took her on speaking tours and meticulously trained her in all aspects of the Service's administration.<sup>1</sup>

Browne told the board that she couldn't run FNS without their help. It was finances she was most scared of since she knew nothing about investments.<sup>2</sup>

Mrs. Marvin Patterson, chairman of the executive committee, and Breckinridge's neice, took over more responsibility.<sup>3</sup> The Articles of Incorporation and the by-laws were amended to provide that the affairs of the corporation be conducted by a board of governors, to the extent specified by the trustees.<sup>4</sup> Previously, Breckinridge had handled most of the work. Browne was named an ex-officio member of the board. Later the board was divided into eight standing committees: a nominating committee, an executive committee, a financial and investment committee, a development (fund

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<sup>1</sup>"Helen E. Browne, O.B.E., R.N., S.C.M.," Quarterly Bulletin 40 (Spring, 1965), insert.

<sup>2</sup>FNS interview with Helen E. Browne.

<sup>3</sup>FNS interview with Kate Ireland, chairwoman of FNS Board.

<sup>4</sup>Amended Articles of Incorporation of FNS, Article III.

raising) committee, a personnel committee, a long range planning committee, an education committee and a building and grounds committee.<sup>1</sup>

Browne and the Executive Committee agreed that unless immediate efforts were made to broaden the FNS it might stagnate and die. At the fall meeting following Breckinridge's death, the Executive Committee resolved that a memorial to Breckinridge "shall be the Mary Breckinridge Hospital, perpetuating her pioneer work in bringing the benefits of modern medicine to the people of this mountain area."<sup>2</sup>

One of Browne's first acts was to secure acceptable staff salaries. Senior nurses were then paid a good deal less than the national average and the income of new nurses was less than the federal minimum wage and below the poverty level. Browne also obtained approval for a retirement plan which provided an income of seventy-five percent of the salary when added to social security.<sup>3</sup>

In the meantime, Browne and Lester visited all of the district committees to ask if they wanted FNS to continue. There was always a dead pause, Browne said, they were so

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<sup>1</sup> Author interview with Peggy Elmore, FNS administrative assistant.

<sup>2</sup> "The Mary Breckinridge Hospital," Quarterly Bulletin 41 (Autumn 1965):8.

<sup>3</sup> Minutes of Executive Committee, June 8, 1965, and October 8, 1965.

shocked; then usually a woman answered, "Of course we want you to stay."<sup>1</sup>

1965 was a difficult year. Browne had to cope with the natural and other disasters to which FNS had been prone since its beginning. The mountain moved under Joy House, the physician's home, resulting in cracked walls, sloping floors and a stairway pulled away from the wall. The Hyden hospital well failed again and produced less than half of its normal water.

Worst of all was an accident to a British nurse and her visiting sister. On Friday afternoon, July 30, 1965, Molly Lee, a senior nurse-midwife, and her sister Nora, were jeeping to visit a patient when they struck a booby-trap on a one-lane dirt road about seven miles from Hyden. Their jeep blew up and both women were seriously injured.

Luckily two men working at the bottom of the hill heard the explosion and rushed to the scene. Molly, who was the least injured of the two, realized the extent of her sister's injuries and instructed the men to phone for the doctor, morphine and an ambulance.

The women were taken to the Appalachian Regional Hospital in Harlan where it was found that Molly Lee had severe lacerations on one arm and both legs and a crushed foot and ankle. Nora Lee was blinded in one eye and lost both legs.

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<sup>1</sup>FNS interview with Helen E. Browne.

The accident was never officially solved although mountain rumor claimed the Lee sisters had driven into a trap set for law enforcement officers in retaliation for a bootleg arrest. The road was seldom used and the FNS nurses were not expected.

Hyden church women immediately collected donations to help with the expenses of the long treatment. They were upset to have one of their nurses hurt and even more disturbed to have a foreign visitor so badly injured.<sup>1</sup> The following fall Governor Edward T. Breathitt collected \$9,550 for the sisters at a \$100-per-place fund-raising dinner. He explained that the dinner was held "not only to honor two members of the service who almost gave their lives for the benefit of the people of our state but in a way to pay tribute to the service itself."<sup>2</sup>

#### The Mary Breckinridge Hospital and Health Center

The new hospital and expanded training center were inseparably interrelated. New health regionalization regulations prohibited the construction of a hospital for the small population of approximately 15,000 FNS covered. However, an enlarged hospital was needed for clinical training and classrooms. It was by documenting the need for training primary

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<sup>1</sup>"FNS Nurse and Sister Critically Injured by Crudely Made Bomb," Thousandsticks News, 5 August 1965; "Field Notes," Quarterly Bulletin 41 (Summer, 1965):49-50.

<sup>2</sup>"Nurses Hurt in Blast Get \$9,550 Donation," Thousandsticks News, 2 December 1965.

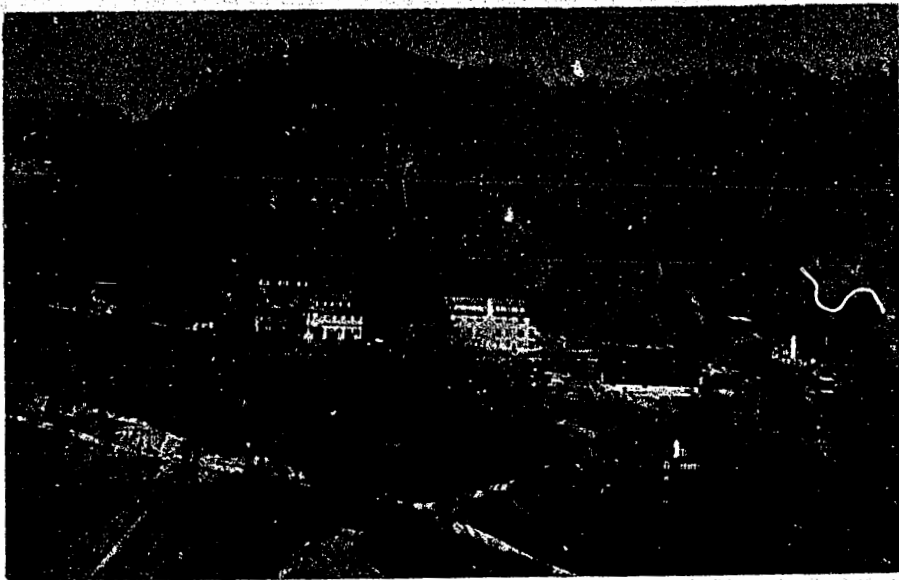
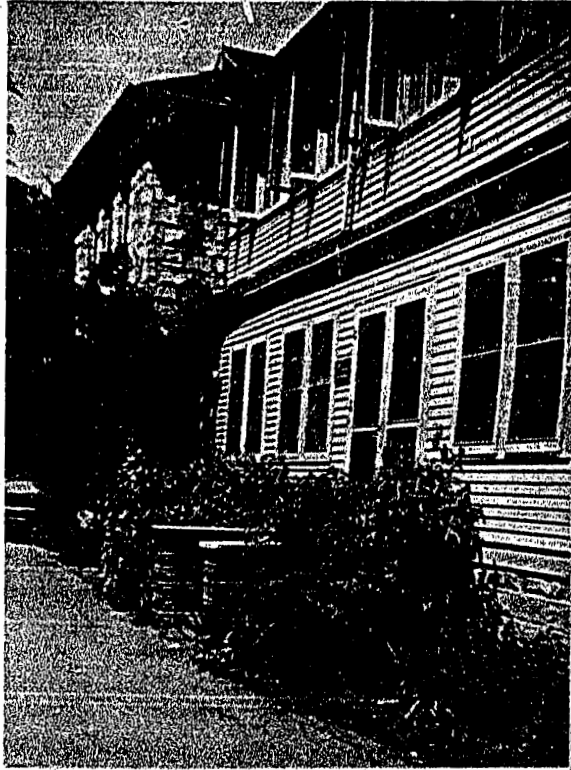


Fig. 7. Two views of Old Hospital.

health care personnel that FNS was able to justify the construction of the combined hospital and training center.

FNS staff had long desired a new hospital. The number of clinic patients had risen from 10,000 to 18,000 and there was insufficient space to treat them. Pharmacy, laboratory and other modern equipment was badly needed but there was no place to put it.<sup>1</sup>

The fund raising campaign began with a local drive managed by a committee of district representatives. W. Roy Sizemore, the Hyden postmaster, was the overall coordinator. Using such techniques as "buy a brick for the hospital floor" and suggesting that everyone with an FNS baby (delivered by a FNS nurse) contribute \$35 for each child, they quickly met their \$25,000 goal.<sup>2</sup> They promptly doubled their goal and by the fall of 1970 had raised over \$40,000.<sup>3</sup>

The national fund raising campaign was officially launched in 1967 and proved remarkably successful. The fact that citizens of one of the poorest areas in the United States raised \$25,000 demonstrated obvious local support for the new hospital and helped spark the national drive. Earlier the board formed a development committee with Kate Ireland and

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<sup>1</sup>"Mary Breckinridge Hospital," Quarterly Bulletin 42 (Spring, 1967):15.

<sup>2</sup>FNS interview with Helen E. Browne.

<sup>3</sup>"Mary Breckinridge Hospital and Development Fund Over the Goal," Quarterly Bulletin 45 (Spring, 1970):14.

Brooke Alexander co-chairmen.<sup>1</sup> Jane Leigh Powell, a former courier, was appointed development director.

The committee hired a professional fund raising firm, Marts and Lundy of New York, to study the Frontier Nursing Service and prepare a plan to raise the \$2,800,000 needed for the hospital.

Marts and Lundy analyzed the FNS donor's file, visited the city committees and suggested a breakdown of the number and kinds of gifts required to meet the goal. They were far from optimistic and prophesied that FNS would never raise more than \$1,750,000 and that it would take over two years to do so. Instead it took the service less than a year to raise \$2 million. Most campaigns figure on roughly ten percent of the pledges not being honored. Only seven of the hospital campaign's pledges weren't honored equalling .38 percent of the whole. Two of these were from donors who died before their pledges could be paid.<sup>2</sup>

Marts and Lundy recommended that FNS try to reach its goal mainly through large contributions and suggested the following breakdown.<sup>3</sup>

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<sup>1</sup>"Mary Breckinridge Hospital," Quarterly Bulletin 42 (Autumn, 1966):23.

<sup>2</sup>Jane Leigh Powell, "Come Blow Your Horn With Us," Quarterly Bulletin 45 (Spring, 1970):4.

<sup>3</sup>"Mary Breckinridge Hospital Progress Report," Quarterly Bulletin 44 (Summer, 1968):23.



TABLE 3  
SCALE OF GIVING REQUIRED FOR \$2,800,000

Number of Gifts	Size of Gifts	Totalling
1	\$500,000	\$500,000
1	300,000	300,000
2	250,000	500,000
3	150,000	450,000
3	100,000	300,000
5	50,000	250,000
5	25,000	125,000
8	10,000	80,000
11	5,000	55,000
40	1,000	40,000
Hundreds	under 1,000	200,000

The gifts FNS received were not in the denominations recommended by the fund raisers. Many were small and there were no \$500,000 and \$300,000 donations.

Following is a breakdown compiled in the fall of 1970.<sup>1</sup>

TABLE 4  
GIFTS AND PLEDGES RECEIVED

Size of Gift	Number of Donors
Less than \$50	785
\$50-\$99	247
\$100-\$499	501
\$500-\$999	105
\$1,000-\$9,999	215
\$10,000 and over	59

<sup>1</sup>"Mary Breckinridge Hospital and Development Fund," Quarterly Bulletin 46 (Autumn, 1970):14.

In September 1970, the Andrew W. Mellon foundation approved an \$80,000 grant which put the FNS over its goal. The total in pledges was \$2,803,633.<sup>1</sup>

Much of the credit for the successful campaign be-  
longed to the city committees and a documentary film, The Road, produced for FNS by Lee R. Bobker of Vision Associates, which the committees utilized to explain the FNS. The Road received several awards and was sold to numerous libraries. By the spring of 1969 it had been shown over fifty-six TV stations in fifty-one cities. The United States Information Agency distributed it in seventy countries; ex-staff members saw it in Africa, Asia and several other remote corners of the world.<sup>2</sup>

Earlier the FNS had applied for a \$1,246,000 grant from the U.S. Public Health Service and the Appalachian Regional Commission to meet construction costs for the new facility, which would be used, FNS explained, to increase health manpower in the Appalachian area. The plan was to use the private donations to add teaching and clinical staff, raise salaries and operate the new health center.<sup>3</sup>

The grant was approved May 27, 1970, and ground was broken October 3, 1970, by Mrs. Jefferson Patterson, the

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<sup>1</sup>"Mary Breckinridge Hospital and Development Fund," Quarterly Bulletin 46 (Autumn 1970):14.

<sup>2</sup>"The Road," Quarterly Bulletin 44 (Spring 1969):51.

<sup>3</sup>"Mary Breckinridge Hospital and Development Fund, Progress Report," Quarterly Bulletin 44 (Spring 1969):12.

national chairman.<sup>1</sup> The State Agency and the Atlanta Regional Office of the U.S. Public Health Service approved plans for the new hospital a year later and work finally got under way in December, 1971.<sup>2</sup>

The forty-bed three-story facility was dedicated in January, 1975. With its comfortable training facilities, air conditioned two- and four-bed wards and well-equipped surgery, laboratory, physiotherapy, x-ray and pharmacy, it was quite a contrast to the old twelve-bed hospital, which had remained virtually unchanged since its construction forty-eight years earlier.

The original hospital was divided into sections for general and obstetrical patients. One nurse handled each section and in addition to routine care did the lab work for her patients, instructed the kitchen regarding their diets, acted as physical therapist, formula nurse for infants, circulating nurse in surgery and manned the telephone switchboard at night.

The x-ray room was so small that film was dried outside on sunny days. The stairway leading from the ground floor clinics, x-ray department and offices to the second floor wards was too narrow to accommodate stretcher cases so an outside stairway was added to handle such patients.

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<sup>1</sup>"FNS Awarded Construction Grant for the Mary Breckinridge Hospital," Quarterly Bulletin 45 (Spring 1970):3.

<sup>2</sup>"A Piece of Good News," Quarterly Bulletin 47 (Autumn 1971):11.

Whenever anyone needed to be taken to x-ray the nurses had to round up maintenance men to carry him up and down the outside stairs, which could be a real ordeal on cold, snowy days.

#### Family Nursing; Added to Midwifery Course

As fund raising progressed, staff and ex-staff concentrated on planning a family nurse training program. The family nurse had more responsibility than the registered nurse; she had to make decisions, to act on her own. She diagnosed and initiated some treatment. She usually followed some kind of written instructions, such as the FNS Medical Directives, but she didn't have a physician or intern hanging over her shoulder telling her what to do. It was not a new profession. FNS and British nurse-midwives, among others, had been doing it for years.

In 1967, Dr. Beasley wrote a proposal for the establishment of a school of district nursing, which was immediately incorporated into the plans of the Service.<sup>1</sup> Dr. Beasley had left the FNS in 1965 to attend the School of Hygiene and Public Health at Johns Hopkins University and wrote his thesis on the nurses' extended role.

The following year the board hired the management consultant firm of Booz, Allen and Hamilton to help identify the FNS role in training and developing health manpower to

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<sup>1</sup>"Mary Breckinridge Hospital Progress Report," Quarterly Bulletin 42 (Spring 1967):16.

meet the needs of Kentucky.<sup>1</sup> Dr. Beasley, who was then in India with the U.S. Agency for International Development (AID), flew to Kentucky to help with the report.

Kentucky was one of seven states to which the Appalachian Regional Commission allocated funds for the development of comprehensive health care. The aim was to develop service networks through construction of a hierarchy of medical facilities built around a central Regional Hospital complex.<sup>2</sup>

The board felt that FNS was well qualified to train health manpower, specifically the family nurse, to staff this complex. The Booz, Allen report was used to document their claim and incorporated in the \$1,246,000 grant proposal which helped finance the hospital construction.

Booz, Allen and Hamilton focused on the serious shortage of physicians and professional nurses, particularly in the low income rural areas of the state. The eight county region to which Leslie County belonged had, the report stated, 40.7 physicians for 100,000 persons as compared to 134 per 100,000 for the nation during 1967.<sup>3</sup> The ratio for nurses in the region was 113 to 100,000 compared to 325 for the U.S.<sup>4</sup>

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<sup>1</sup>Booz, Allen & Hamilton, Family Nurse Practitioners in Kentucky (Frontier Nursing Service, Inc.), p. i.

<sup>2</sup>William H. Miernyk, Economic Characteristics of Appalachia and Potential for Financing Health Care Improvements quoted in Robert L. Nolan, ed., Rural and Appalachian Health (Springfield, Ill.: Charles C. Thomas, 1973), p. 53.

<sup>3</sup>Booz, Allen, Exhibit iv following p. 4.

<sup>4</sup>Ibid, Exhibit vi following p. 6.

The consultants argued that even if more physicians and nurses were trained, not many would be willing to move to deprived rural areas. A possible solution, they said, would be to train a new type of health worker to assist the physician by performing routine and less complex tasks which did not require a physician's professional knowledge and judgement. The proposed new worker would bridge the gap between the physician and nurse.

The FNS had proved its ability to train nurse-midwives and already had the basic structure for a broadened curriculum, Booz, Allen and Hamilton stated, and recommended that a certificate family nursing program be developed and then modified into a master's degree program affiliated with a university.<sup>1</sup>

While FNS awaited government reaction to its proposal it prepared for an expanded role. It instituted a new accounting and recordkeeping system, hired a hospital administrator and enlarged the school by accepting more students and adding an internship at the neighboring Harlan Appalachian Regional Hospital and the Homeplace Clinic in Hazard. Dr. Beasley was persuaded to return as medical director of the proposed educational program.<sup>2</sup>

In May, 1969, ex-staff holding nursing education or planning jobs were invited to a workshop with staff to plan

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<sup>1</sup>Ibid., p. v.

<sup>2</sup>"Mary Breckinridge Hospital and Development Fund," Quarterly Bulletin 44 (Spring 1969):14.

the new curriculum. After much discussion the group defined family nursing as:

. . . an expanded concept of public health nursing which will include treatment. It involves a completely different system of delivering health services in a community. The family nurse practitioner will access the needs of the patient; she will be THE nurse for a specified number of families; she will give bedside nursing care as well as be the coordinator of health team service, thus preventing fragmentation of the care.<sup>1</sup>

The group recommended employing a nurse as co-director. That summer Gertrude Isaacs, R.N., C.N.M., B.S., M.S., D.N.Sc., agreed to return to the FNS as the nursing director of the Family Nurse Practitioner project.

A graduate of the Frontier Graduate School of Midwifery, Dr. Isaacs joined the FNS in 1947 and remained until 1950. Prior to returning to the FNS she served as a consultant with the National Institutes of Health. Dr. Isaacs earned her B.S. and M.S. degrees from the University of Minnesota and was the first nurse to be granted a Doctor of Nursing Science degree by Boston University.<sup>2</sup>

In the summer of 1970 the FNS began the revision of its education program by admitting four students to an experimental course in diagnosis and management of common health problems, Family Nursing I, which became a prerequisite for admission to the School of Midwifery.

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<sup>1</sup>"A Nursing Seminar to Discuss the Family Nurse Practitioner," Quarterly Bulletin 45 (Summer 1969):30.

<sup>2</sup>"Family Nurse Practitioner Project, the Co-Directors," Quarterly Bulletin 45 (Summer 1969):32.

Classes were held in a trailer squeezed between the chapel and hospital. The students were on the FNS staff and spent two hours daily in class and the balance of their time on the wards, in the outpatient clinic or on home visits.

The Service obtained additional housing for new staff by converting the old hospital horse and cow barn into apartments.

By the summer of 1971 the family nurse practitioner program had completed its developmental year and the Frontier School of Midwifery and Family Nursing offered a one-year certificate program. The new school enrolled twenty-four students and accepted all levels, including nurses with diplomas, associate, baccalaureate or master's degrees.

In December, 1971, the National Center for Health Services Research and Development of the Department of Health, Education and Welfare (HEW) approved a three-year \$300,000 Primex (primary care) grant for the family nurse training program and its evaluation.<sup>1</sup>

As one means of evaluating the family nurse program the FNS developed a document termed an encounter form, which the nurse was required to complete for every visit. FNS coded the encounter form data and then sent it to the University of Kentucky Medical Center for computer processing.

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<sup>1</sup>"Family Nurse Program," Quarterly Bulletin 47 (Winter 1972):39.



In 1973 HEW's Division of Nursing approved a grant proposal for an affiliation with the University of Kentucky. The grant was not funded until September, 1974.<sup>1</sup>

To meet its broadening educational role the FNS organized two seminars during the summer of 1971 for physicians and nurses of southeast Kentucky. These concerned family planning and diabetes. In response to numerous requests from agencies and universities for information about its training program, the FNS sponsored a workshop on family nursing the following summer.<sup>2</sup>

Most of the training efforts of the Service, however, focused on developing and refining its own program. The basic philosophy behind the new course was stated in the school's catalog.

Families that live in stressful environment, whether in Appalachia, the inner city, or developing countries, need additional assistance to help them cope. This type of care is broader in concept than that of the traditional system. It incorporates the physical environment; inter- and intra-familial relationships; the cultural patterns of living, including economic, legal and political aspects; and the inter-relationships of the various helping organizations such as health, education, welfare, and religious institutions and agencies. This requires that health be closely coordinated with community development programs and that the practitioner concentrate on the social and mental aspects of health as well as on the physical . . . .

. . . It is the blending of nursing with selected medical and public health functions that makes the role of the primary health care nurse distinctive. By broadening the traditional nursing role to include basic

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<sup>1</sup>"Field Notes," Quarterly Bulletin 50 (Summer 1974):48.

<sup>2</sup>"Family Nursing Workshop," Quarterly Bulletin 48 (Summer 1972):37.

diagnostic, treatment and preventive skills, the nurse becomes a very important and meaningful member of the health care team in helping the family with their day to day problems of health and illness. But first and foremost, she remains a nurse.<sup>1</sup>

(Traditionally the job of the registered nurse is confined to care, i.e., making a patient physically and emotionally comfortable. She follows doctors' instructions, administers medications, special diets and other treatment as directed, but she initiates no treatment and makes no diagnosis, nor is she expected to do preventive health.)

The curriculum was designed to teach diagnostic skills and a knowledge of promotional, preventive and interventive measures.

The course included three fifteen-week trimesters with a fourth in the planning stage. A student could terminate after any trimester. The first trimester focused on diagnosis, assessment and management of common health problems; the second on beginning midwifery, family planning and child health care, and the third on advanced midwifery. A proposed fourth trimester would cover community nursing, community health and family therapy.

Dr. Anne Wasson, chief of clinical services and the physician responsible for much of the clinical training, summed up the benefits of the course in a 1972 graduation talk.

. . . Miss Browne has said several times that "medicine cures and nursing cares." It has always

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<sup>1</sup>Frontier School of Midwifery and Family Nursing (Hyden, Ky.: Frontier Nursing Service, 1974), p. 4.

distressed me to hear this but I have come to believe that this is true. Medicine needs to learn to care as nursing does, for much of what we see as physicians cannot be "cured" in the true sense of the word and "caring" or understanding, makes the difference to the patient, providing hope in many chronic situations. We have made a beginning, with the broadening of this course to bring medicine and nursing together as a team to care for families as a unit, to solve the problems of living. As nurses you have, with training, improved your skills to allow you to become the extended arm of the physicians. As a team we can better provide the needed services so lacking in much of the practice of organized medicine today. You have accumulated knowledge and skills needed for handling the problems of living which are the background for the common ailments which many people must learn to handle and live with.<sup>1</sup>

The course gave its graduates added self confidence. As Dr. Wasson often commented, many nurses had never been taught to make decisions, much less discuss treatment or argue with a physician.

From the beginning the FNS midwives had to make decisions, to take action, because there was no alternative; often no help was available. The family nurse course formalized what FNS nurses had been doing for years. It also gave her added skills and knowledge upon which to base her decisions.

One nurse with three years district experience prior to taking Family Nursing I and II remarked, "The course gave me a lot more self confidence, but I also have a lot more work." Nurse Smith (she preferred not to be quoted by name) explained that her new knowledge gave her faith in her decisions. Formerly, she made many unnecessary home visits to

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<sup>1</sup>"Curing and Caring," Quarterly Bulletin 48 (Winter 1973):11.

check her diagnoses, but after finishing the class she diagnosed and prescribed with less strain.

After taking the course Smith could do many procedures for which she formerly sent the patient to the hospital such as physical examinations, drawing blood for tests to be made in the hospital laboratory, and Papanicolaou tests (pap smears). This increased her clinic load at the same time making these services more readily available to her patients. Before taking the course Smith's Saturday morning clinics typically included a few patients with colds and minor scratches and bruises. Afterwards the clinics, which officially ended at noon, often lasted until two p.m. with a steady flow of patients seeking family planning advice, physical examinations and treatment for a variety of ailments.<sup>1</sup>

Another graduate found the course particularly strong on counseling, helping people maintain good health. She explained that when she detected illness she became interrelated with the physician, who often drew up a plan of treatment which he gave to her. She then used the plan in helping the patient understand the diagnosis and the treatment. She explained:

. . . Nurse practitioners as a whole are not that interested in practicing medicine. We're trying to add a new dimension to health care, that of teaching and prevention, of spending more time with the patient, helping them to understand their diagnosis and treatment. Because as it is now doctors are too busy, they

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<sup>1</sup>Author interview with FNS district nurse.

see a patient and diagnose and treat, and the patient walks out not knowing where he's at.<sup>1</sup>

The Primex and university affiliation grants enabled FNS to increase and upgrade the staff. By 1974 it included five physicians and thirty-nine nurses. Among the physicians was a board licensed thoracic surgeon, a board licensed family physician, a pediatrician and obstetrician.

Many of the new personnel doubled in service and training, for FNS believed that the best teacher was continually involved in the subject she was teaching. The education director supervised the training program and three nurses with master's degrees handled the day-to-day teaching.

A licensed pharmacist, a part-time pharmacist and two assistants managed the well-stocked pharmacy which had replaced the nurse-supervised hospital drug cupboard. The expanded pharmacy inaugurated a system of distributing pre-printed prescriptions and pre-packaged medications through which it could monitor the work of the staff.

The pharmacy supplied each clinic with a set of pre-printed prescriptions on which was listed the international codes of those diseases for which the medication was authorized. The disease codes were grouped according to the level of training of the nurse who prescribed the medication. Under this system, there were certain drugs which the family nurse could prescribe but the diploma nurse could not. Pre-packaged and pre-labelled medications were also supplied.

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<sup>1</sup>FNS interview with Karen Slabough, nurse-midwife.

After the nurse had diagnosed the ailment, she referred to the Medical Directives for the coded number of the diagnosis and instructions for medication. The directions for the medication were repeated on the prescription blank. Each prescription was signed by the nurse and reviewed by monitoring physicians and the pharmacist. Any problems were immediately discussed with the nurse.<sup>1</sup>

The clinic nurses and students handled most of the hospital out-patients. Physicians reviewed their charts and advised on treatment but often never saw patients with minor ailments.

Before beginning the family nurse training program Browne explained the Booz-Allen and Hamilton recommendations at district committee meetings and asked for their approval.<sup>2</sup> Nevertheless many patients became annoyed when they were not seen by physicians and blamed the new training program. They did not realize that their charts were always reviewed by physicians.

#### Government Input

##### Multiphasic Health Survey

In 1965 OEO approved a grant to the Leslie County Development Corporation for a one-year multiphasic health

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<sup>1</sup>"The Use of Drugs at the Frontier Nursing Service by Registered Nurses with Specialist Training in Family Nursing and Nurse-Midwifery," Quarterly Bulletin 49 (Autumn 1973):31.

<sup>2</sup>Nora K. Kelly, "The Lure of the Hills," Quarterly Bulletin 45 (Summer 1969):18.

survey. The corporation contracted with the State Department of Health for two public health physicians, nurses, health educators, nutritionists, social workers and a sanitarian. The program encompassed physical examinations, a mobile dental clinic and weekly mental health clinics.<sup>1</sup>

The plan was to examine 751 members of households. Transportation was provided. Persons with problems were referred to private physicians, FNS, government agencies or the University of Kentucky Medical Center.<sup>2</sup>

Of the 751 household selected for the screening, only 489 participated. Dr. G. David Steinman, one of the public health officers responsible for the program, reported that the principal causes for nonparticipation were: present family illness, 25 percent; preferred their own physician, 14 percent; received no communication about the screening, 7 percent; inadequate transportation, 11 percent; believed their family healthy and did not need an examination, 5 percent; feared the exam would reveal illness, 5 percent; forgot date of examination, 5 percent; disapproved of project, 2 percent; deterred by bad weather, 2 percent; and feared examination would be physically painful, 2 percent.<sup>3</sup>

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<sup>1</sup>"Field Notes," Quarterly Bulletin 41 (Autumn 1965):49.

<sup>2</sup>Thousandsticks News, 6 January 1966.

<sup>3</sup>G. David Steinman, Health Care Barriers in Appalachia quoted by Nolan, Rural and Appalachian Health, pp. 59-60.

### Peace Corps Training Projects

In the fall of 1965 the first of several Peace Corps groups came to Leslie County on work training programs prior to going overseas. Their program was worked out jointly by interested county groups, the U.S. Public Health team and FNS. The volunteers accompanied FNS district nurses on home visits and innoculated as many children as possible against measles and worked on nutritional and sanitation programs.

Whereas the VISTA volunteers were not always popular, the Peace Corps men and women were universally respected by both FNS and local people<sup>1</sup> possibly because they confined themselves to health projects and did not threaten the status quo.

### OEO/FNS Comprehensive Health Clinic

In December, 1972 the FNS embarked on a joint project, a comprehensive health clinic, with the OEO at Wooton on the fringes of its area. Wooton was a densely populated community with approximately 520 households located six miles from Hyden on the road to Hazard. It comprised a primary school, Baptist and Presbyterian churches, a multi-purpose OEO community action center and a half dozen commercial buildings.

The FNS had long provided some health care to the Wooton populace. During World War II a nurse-midwife worked out of the Presbyterian church. Wendover and Hyden district

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<sup>1</sup>Informal author interview with Peggy Elmore, FNS administrative assistant.



nurses made occasional home visits in the Wooton area for years, and residents made frequent use of the Hyden hospital.

In 1972 the Mountain Comprehensive Health Corporation (MCHC), an OEO supported project with headquarters in Hazard, asked the FNS to demonstrate its system of care at Wooton. The FNS assigned two nurses and a young college graduate to the area to make an initial survey and set up records. Under the agreement the FNS provided two nurses, their nursing supervision and medical backup. The MCHC contributed the clinic building, transportation and housing for the nurses, their supplies and ancillary personnel including a dental unit.<sup>1</sup>

The Wooton project, funded with almost \$1 million was a segment of a larger comprehensive health care system which attempted to provide good medical, dental and related care to poor people in Leslie, Knott, Letcher and Perry counties through three distinctive, somewhat experimental centers or models.

The clinic, housed in two adjoining mobile homes, opened in December, 1972. Its staff of fourteen included the two FNS nurses, community health aides, dental aides, dental assistants and a dentist who visited the clinic once or twice a week.<sup>2</sup>

As often happened between government and private agencies, there was some friction. Most of the patients had

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<sup>1</sup>"Field Notes," Quarterly Bulletin 48 (Autumn 1972):35-36.

<sup>2</sup>Wooton Family Health Center (Mountain Comprehensive Health Corporation, Hazard, Ky., n.d.), p. 2.

been enrolled with FNS for years and had FNS charts. Nevertheless, the nurses had to complete new MCHC forms on each patient, which annoyed them.

The project administrators were primarily interested in numbers. They wanted to acquire 750 patients and told the nurses to sign up six new patients per day which left them little time for home health care.<sup>1</sup>

There was bickering among the MCHC staff and four of the senior officers resigned. As OEO began to phase out the project was turned over to the Department of Health, Education and Welfare (HEW).<sup>2</sup>

The FNS emphasis on home visits, particularly for chronic patients, did not fit HEW guidelines which called for the nurses to be in the clinic at all times. So, when the contract came up for renewal at the end of 1973, it was mutually agreed to terminate the partnership.<sup>3</sup>

#### The Hospital Emergency Administration Radio Network

An extremely useful contribution was the emergency radio system funded through the Appalachian Regional Commission. Designed by Motorola, the Hospital Emergency Administration

<sup>1</sup> Author interview with Barbara Moore, FNS volunteer.

<sup>2</sup> "Eastern Kentucky Health Program Shaken by Resignation of Officials," Louisville Courier-Journal, 17 March 1973 and "Troubled Health Program Wins Funds," Louisville Courier-Journal, 10 April 1973.

<sup>3</sup> Gertrude Isaacs, "Frontier Nursing Service Continuing Development 1974" (mimeographed), pp. 15-16.

Radio Network enabled all hospitals within the southeastern Kentucky Regional Health Demonstration Area to communicate with each other to facilitate patients transfers and referrals.

Radio stations KRJ-729-Wendover and KRJ-729-Hyden Hospital went on the air March 10, 1970 and almost immediately used the equipment to locate rabies serum needed for a child with a nasty dog bite on the face. (FNS kept rabies vaccine in stock, but serum was faster-acting.) FNS made an emergency radio call and a hospital in Wise, Virginia, reported having a supply. The Virginia State Police rushed the serum to the border where it was picked up by the area emergency transport driver who brought it to Hyden.<sup>1</sup>

The system also facilitated internal communications of member agencies. FNS' main base station was located on top of the mountain behind Wendover with an alternate station on the hospital roof. District nurses carried portable radios with which they could communicate directly from the home of a patient. Since most houses had no telephone this was invaluable. The Motorola representatives encouraged FNS to use the radio as much as possible so that when an emergency arose personnel would be thoroughly familiar with the system. Soon staff were discussing meetings, supply requirements and other routine business over the radio.<sup>2</sup>

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<sup>1</sup>"Beyond the Mountains," Quarterly Bulletin 45 (Spring 1970):35.

<sup>2</sup>"Field Notes," Quarterly Bulletin 45 (Spring 1970):40.

Medicare and Medicaid

Of all of the government programs, Medicare and Medicaid had by far the biggest influence on FNS. Their impact, in fact, was almost disastrous.

In 1966 the FNS began preparing for Medicare. This necessitated rearranging its records and revising the Service's fee system since Medicare regulations required that all patients, whether on Medicare or not, be charged the same. The annual two dollar fee for nursing care throughout the year had to be abandoned for this was far less than FNS costs. It was illegal to charge Medicare patients FNS costs and other patients only two dollars.

Because fees for patients not eligible for the government programs would increase, Browne thought about it a long time before asking the board's permission to participate in the Medicare and Medicaid programs. At FNS' suggestion district committees surveyed the elderly to learn their reactions. Many said, "We've always paid our bills, we're not going to be beholden to the government."

Browne decided to join the Medicare program because she worried about what would happen to old people who left Leslie County. It took six months or more to get a Medicare card. What would happen if an elderly Leslie Countian fell ill in Ohio? Who would pay the bills?<sup>1</sup>

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<sup>1</sup>FNS interview with Helen E. Browne.

FNS was approved as a participant in the Medicare program in 1966.<sup>1</sup> Under the new system FNS billed Medicare and, later Medicaid, hospital patients at cost, \$20.00 per day. Patients on no kind of welfare received a courtesy discount of \$10.00 on the rate. No charge was made for children except for medications unless the patient had private insurance or was on welfare (Medicaid).<sup>2</sup>

The introduction of Medicaid accelerated the change from home to hospital deliveries since Medicaid did not pay the costs of babies born outside the hospital. This eased the staffing problem, for, with the reduction in home deliveries, it was necessary to have only one of the two district nurses a graduate midwife.

Medicare and Medicaid patients had to be seen by a physician in order for FNS to claim reimbursement. This meant that district nurses could not charge Medicare or Medicaid for clinical or midwifery services. Medicare and Medicaid did pay FNS for home health care implemented by the nurse under a written plan of treatment signed and supervised by a physician. They also reimbursed for hospital outpatients since these persons were seen by, or their charts signed by, a physician. This meant that ambulatory patients had to go to the hospital for treatment. Since many of these

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<sup>1</sup>"FNS Eligible for Medicare Service," Thousandsticks News, 21 July 1966.

<sup>2</sup>Compiled from FNS bookkeeping office records.

people did not own automobiles and Leslie County had no public transportation, such a visit cost a minimum of five dollars in taxi fees.<sup>1</sup> In many cases the nurses treated welfare and elderly patients free of charge rather than force them to go to the hospital where their medical or medicaid cards would be honored.<sup>2</sup>

A mass of paperwork soon inundated the nurses. In the early days of Medicare/Medicaid many FNS claims were rejected because of incomplete charting by the nurses. So clerical personnel were added to the Wendover and Hyden offices and secretaries assigned to each district.

As fees rose many people not on welfare or Medicare postponed seeking medical care because the typical uninsured Leslie Countian earned minimum wages and could ill afford the new charges. Medicare and Medicaid patients, whose cards were good almost anywhere, doctor and hospital shopped, visiting the Appalachian Regional Hospitals in Harlan and Hazard and private hospitals at Red Bird and Manchester.

In May, 1973, the Social Security Administration ruled that Hyden Hospital was not in compliance with the Life Safety Code of 1970 as regards fire safety and halted all Medicare/Medicaid payments except for outpatients.

Over the years FNS tried to implement every suggestion of the State Fire Marshall with one exception, the installation

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<sup>1</sup> Author interview with Ann Browning, chief of patient billing section.

<sup>2</sup> *Ibid.*

of a sprinkler system. The hospital had lacked the water to install such a system until the public water system was completed in 1967. After that date plans for the new hospital were well underway and it seemed a waste to install expensive water sprinklers for only a few years' use.

FNS immediately sought the advice of the State Health Commissioner who referred it to the State Fire Marshall, who in turn sent Frazier Faulconer, the deputy director to Hyden for consultation. Faulconer said that the installation of a sprinkler system would be insufficient to enable the old hospital to meet the standards of the Life Safety Code. Instead he recommended measures which would enable FNS to insure reasonable safety for its patients until the new hospital opened. These included an hourly safety fire patrol, and were immediately implemented. Faulconer arranged for bi-monthly inspections and then recommended that the Social Service Administration rescind its ruling.

At the same time FNS appealed the decision under a clause in the Life Safety Code permitting the Social Security Administration to waive the regulation in cases of unusual hardship when adequate safety precautions had been taken.<sup>1</sup>

It cost approximately \$1,600 per day to operate the Hyden Hospital. FNS was owed almost \$100,000 in back payments from Medicare and Medicaid, which, if paid, would have kept

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<sup>1</sup>"Hyden Hospital and Health Center and the Mary Breckinridge Hospital," Quarterly Bulletin 49 (Autumn 1973):21-24.

the hospital going for two months. But prompt payment was doubtful and FNS seriously considered closing the hospital, since it lacked the reserves to keep it going.

But shutting down the only hospital in an economically deprived county which had no public transportation would have dealt a serious blow to the patients who depended on FNS. It also would have had a devastating effect on the local economy. FNS spent about \$200,000 per year in the area for food, supplies, utilities, telephone, insurance and other services. It employed 220 persons of whom approximately 165 or 75 percent were local citizens. During its fiscal year 1972 the payroll was slightly over \$800,000.

If FNS closed the hospital and terminated some or all of its employees only a few of the Leslie Countians could have been absorbed into the local economy, Browne and her staff felt. Most of the outsiders, including physicians and nurses would have accepted jobs elsewhere, thus making it difficult to staff the new hospital once it opened.<sup>1</sup>

FNS chose to keep the hospital open which meant accepting and treating Medicare and Medicaid patients for nothing since most could not afford to pay even minimal fees. To do so it borrowed from the endowment fund and increased its fund raising efforts. Donors responded generously. A letter

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<sup>1</sup>"Frontier Nursing Service, Inc.," October 27, 1973 (mimeographed).



to ex-couriers, for example, generated over \$10,000.<sup>1</sup> Donations for fiscal year 1973-74 equalled \$350,313 as compared to \$202,909 for the years 1969-70.<sup>2</sup>

### Financial Problems

Even before Medicare and Medicaid reimbursement for hospital patients stopped FNS was in financial trouble. Expenses for 1972-73 were \$1,436,266. Income from patient services amounted to \$421,486, endowment income \$268,471, for a total of \$689,957, and leaving a deficit of \$746,309. Salaries swallowed up almost \$800,000. The deficit was met mainly from unrestricted income from endowment funds, and donations. Nevertheless, there was an excess of expenses over revenues of \$10,026.<sup>3</sup>

FNS financial problems were compounded by the fact that over fifty-five percent of the Leslie County families had incomes below the poverty threshold.<sup>4</sup> Since FNS never turned patients away for inability to pay, it was virtually impossible for the Service to support itself through medical fees. Nor did Medicaid and Medicare solve the problem as they did not pay for preventive care and many kinds of home care.

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<sup>1</sup>From the author's files. The author was a FNS fund raiser at the time.

<sup>2</sup>Compiled from FNS annual reports for 1969-70 and 1973-74.

<sup>3</sup>See appendix K.

<sup>4</sup>Ramsey, Kentucky County Data Book, p. 58.

In one typical month, January 1973, 5,118 patients were seen by the district nurses and in the Hyden hospital clinics. Table 5 shows how these visits were financed.<sup>1</sup>

TABLE 5  
PATIENT PAYMENT SOURCES

<u>Source</u>	<u>Percent</u>
Government third party payments including Medicare and Medicaid	20.9
Blue Cross/Blue Shield insurance	5.3
Other insurance plans	3.8
Midwifery prepayment plan	4.3
Workmen's compensation	1.0
Miscellaneous	3.4
Cash payment from private patients	50.8
No charge	10.6

Many of the private pay patients were medically indigent so FNS discounted their bills up to 90 percent of the total.

Eastern Kentucky salaries were low. So the passage of a new Federal Minimum Wage Law by Congress in April 1974, raising the minimum wage for hospital workers from \$1.60 per

<sup>1</sup>Compiled from Primex encounter from printouts.

hour to \$1.90 per hour compounded the FNS financial problems. At the same time many Wendover and district maintenance and domestic employees, who had previously not been covered, were blanketed under the law. The new wage level cost FNS \$95,000 for the fiscal year.<sup>1</sup>

Operating costs increased from \$1,689,499 in 1974 to \$2,024,278 in 1975. Revenues were \$1,696,088 making a 1975 deficit of \$323,886.<sup>2</sup>

The situation was somewhat alleviated in the spring of 1975 when the Robert Wood Johnson Foundation awarded FNS a three-year one-half million dollar grant to help develop a region-wide, nurse-run health care system.<sup>3</sup>

#### The Old and the New

Although change was catching up with southeast Kentucky, nurses, particularly those planning to work overseas, continued to come to the FNS because of the isolated, relatively primitive area it served. Many of the new nurses were Catholic nuns or Menonites, who imbued with "War on Poverty" idealism came to Appalachia to help the mountaineer. Neither group made any effort to proselytize.

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<sup>1</sup> Author interview with Ann Browning, billing supervisor.

<sup>2</sup> See appendix J.

<sup>3</sup> "The Robert Wood Johnson Foundation Awards Grant to Frontier Nursing Service," Quarterly Bulletin 50 (Spring 1975): 20.

The Catholic nuns wore civiliar garb and worshipped in a small pre-fab church built for FNS Catholics by the diocese. No Leslie Countians attended the masses. The Menonites went to church in a neighboring county. Other FNS nurses attended the Hyden Presbyterian Church or monthly services read by a visiting Episcopalian minister from Hazard.

Many of the problems faced by these nurses were similar to those faced by their predecessors. Cindy Sherwood, a Hyden district nurse described a difficult situation with which she was confronted on a snowy winter day.

A young women met Sherwood at the hospital and asked her to come see Chester, her father, who was "smothering" and had chest pains. She said they'd tried to get him to the hospital on his horse, but he couldn't make it.

Chester lived at the head of Blue John Hollow off Asher's Branch, about a mile from the road. Sherwood jeeped to Asher's Branch and, carrying ten pounds of equipment, struggled a mile up the slushy creek bed. After examining the patient she hiked another half mile to a neighbor's house to phone the hospital for instructions.

"I don't care how you do it but get him in to be seen by a doctor immediately," her supervisor told her.

What to do? Sherwood had observed a coal sled (wooden box fastened onto two wooden runners) at a neighbor's house. She hitched the patient's horse to the sled and with the help of neighbors slid him down the bumpy creek bed to her jeep.

After he'd spent a week in the hospital, Sherwood hitched up the same sled and hauled Chester home.<sup>1</sup>

A few months later an outdoor Sunday basketball game at the Leslie County High School was interrupted by the unexpected landing of an army helicopter. A FNS jeep sped across the field and picked up the copter's passengers, two physicians and a nurse from the Newborn Special Care Unit at Cincinnati Children's Hospital.

The dramatic incident began several hours earlier with the birth of a premature baby at Hyden Hospital. The nurse-midwives had foreseen problems so had assembled a team, including the FNS pediatrician, to help the baby.

The infant was weak and blue when born but responded to oxygen, began to breathe well and brightened to a normal pink. But before anyone could relax he showed signs of Respiratory Distress Syndrome, a disease which strikes many premature infants whose lungs are too unformed to work properly.

The FNS pediatrician promptly phoned the Cincinnati Children's Hospital and within hours a team from the Special Care Unit was picked up by an Ohio National Guard helicopter. That afternoon the baby was flown to Cincinnati.<sup>2</sup>

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<sup>1</sup>Cynthia Sherwood, "Transportation is a Problem," Quarterly Bulletin 49 (Summer 1973):7.

<sup>2</sup>FNS staff, "FNS News" quoted from Leslie County News, Thursday, 21 February 1974, Quarterly Bulletin 49 (Autumn 1973):29.

### A Day in the Life of a District Nurse

There was never a typical day for a district nurse. Usually, however, her day went something like this. She started with a clinic from 8:00 A.M. to 9:00 A.M. If there were no patients, as was often true during the spring and healthy time of the year, she wrote up her charts, a never-ending task, and discussed over the phone some of her problem cases with hospital physicians and senior family nurses.

District residents knew that this was the time the nurse could be reached so there were usually several telephone calls asking that she "stop by."

With luck the nurse started her rounds about 9:00 A.M. As in the old days she planned her work so as to make calls on different creeks on different days in an effort to save time and gas (Jeeps were fuel guzzlers). She was usually home between 3:00 P.M. and 4:00 P.M. in time to chart before dinner.

While working for the FNS the author often accompanied district nurses on their rounds and kept a diary of the day's events. Following is a description of the Wendover district nurse's rounds on a beautiful spring day in 1974.

Our first call was on an old lady with high blood pressure (known locally as "high blood") and diabetes. She lived alone in a neat three-room house with a well-tended garden in the back. The nurse's job was to reassure her patient who was frightened by occasional attacks of dizziness, and impress upon her the importance of proper diet.

The next patient was an almost completely paralyzed woman in her late seventies who had recently suffered a stroke. She lay semi-conscious on a hospital bed, supplied through Medicare, in the middle of the living room, with a needle in her arm for intravenous feeding. Her daughter, grandson and his wife, and four great-grandchildren shared the house with her. The nurse had taught the daughter, who slept on a couch near the patient, and the granddaughter-in-law how to handle the catheter and intravenous feeding. She visited the family twice weekly as well as whenever there was trouble with the catheter.

Treatment was financed by Medicaid and from the patient's social security check. The three-room house had no plumbing but was immaculate and the occupants cheerful. No one seemed inhibited or depressed by the presence of the semi-conscious patient in the living room.

Next we drive up a steep creek road and stopped at the home of a young couple where the nurse had arranged to hold a worming clinic for pre-school age children. The youngsters were healthy and the mothers content. It was a happy session with much exchange of recipes and gardening lore.

We visited a middle-aged country storekeeper whose husband had recently been diagnosed as diabetic and promptly quit his job. Although the couple had three children they were not eligible for Aid to Dependent Children since the government does not consider diabetes a disability. The woman

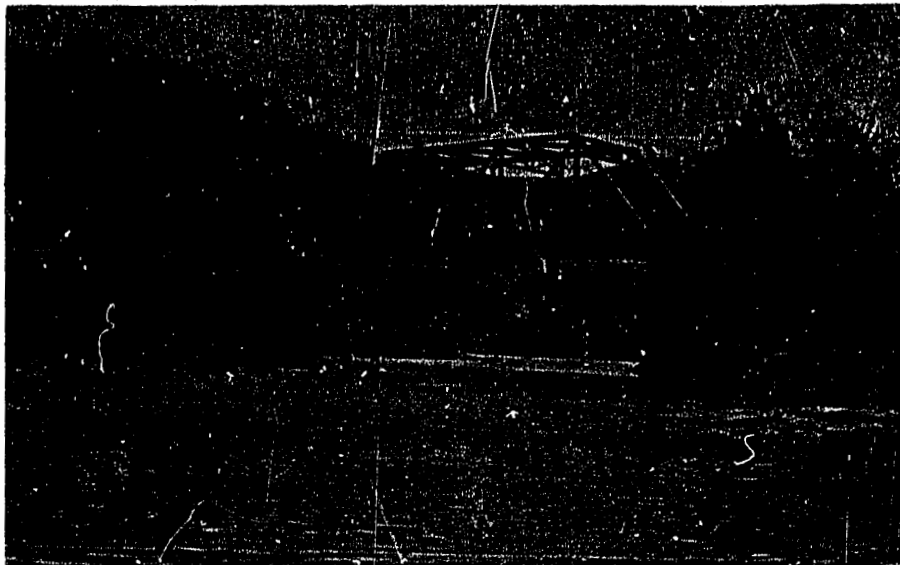


Fig. 8. State highway bridge over the Middlefork above Hyden.



Fig. 9. "Hell-Fer-Sartin" Creek.



requested a refill for her husband's medication and advice on his diet but obviously what she really wanted was to unload her money problems on the friendly nurse.

Then there was an elderly gentleman with a boil which the nurse dressed while talking to his young wife and trying to persuade her to go back to her sales clerk job. As we jeaped to the next patient the nurse told me that the woman was severely depressed, as she had every right to be since she was shut up with her elderly husband and seldom saw another human being.

By then it was noon and we returned to Wendover for lunch. The afternoon was more of the same; several chronic geriatric patients with "high blood" and the dressing of an ugly wound on a teenager's leg acquired in a motorcycle spill.

District nurses usually welcomed company on their daily rounds and the patients seemed to enjoy seeing a strange face. However, there were a few families with mental health problems whom the nurse preferred visiting alone.

Mental health problems in Leslie County were much the same as those found anywhere else in the worls. Serious problems were referred to the hospital or Mental Health Clinic in Hyden. The nurse handled chronic and minor cases, mainly by listening and trying to help the family understand its problems. The Wendover nurse did such a good job that patients phoned her at all hours to discuss each emotional crisis.

## Research and Evaluation

Statistics and research fascinated Breckinridge and she imbued in her staff respect and interest in facts and figures. Following her death there were numerous research and evaluation projects. Foremost among these were family planning studies, a community survey, an analysis of FNS hospitalization rates, and studies of the FNS family nurse and its educational program.

Family Planning

In 1955 Leslie County had the highest reported birth rate in the nation, 39.6 per thousand as compared to 24.9 for the state.<sup>1</sup> Leslie County's birth rate was 38.2 in 1965<sup>2</sup> but had fallen to 22.3 in 1970<sup>3</sup> and 20.7 in 1975.<sup>4</sup>

During the fifties FNS delivered over 500 babies a year as compared to 227 live births in 1973-73.<sup>5</sup> The only family planning methods available during most of the fifties were the traditional diaphragm and jelly. FNS offered mothers with over eight live births tubal ligations but few women requested them.

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<sup>1</sup>1955 Kentucky Vital Statistics Report (Frankfort: Kentucky Department of Health, 1955).

<sup>2</sup>1965 Kentucky Vital Statistics Report.

<sup>3</sup>1970 Kentucky Vital Statistics Report.

<sup>4</sup>Kentucky Selected Vital Statistics 1975 (Department of Human Resources, Bureau of Administration and Operations, Division of Research and Special Projects).

<sup>5</sup>W. B. Rogers Beasley, "Coping with Family Planning in a Rural Area," Obstetrics-Gynecology 41 (January 1973):156.

When Dr. John Rock, who helped develop the pill, visited Wendover in 1958, he offered to include FNS in an oral contraception research program. He donated a limited number of pills and FNS learned that although many women lacked the motivation to practice family planning the nurse-midwife could stimulate them to use the pill.<sup>1</sup>

The U.S. Food and Drug Administration approved oral contraception in 1961 and FNS began a formal postpartum family planning program. The number of women taking the pill increased significantly.

In 1964 the Mountain Maternal Health League introduced intrauterine contraceptive devices (IUD). Since the pills were no longer supplied free of charge, the IUD had a great appeal, particularly to the midwifery student missionaries who were looking for a cheap, effective contraceptive to use overseas.

Soon the entire midwifery faculty and staff accepted the devices as part of the midwifery program and family planning was included in the school's curriculum. By 1969, 27 percent of the FNS midwifery visits were devoted to family planning.<sup>2</sup>

The nurse-midwife did most of the family planning counseling. During the woman's pregnancy the nurse explained birth control. The information was repeated during her

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<sup>1</sup>Ibid.

<sup>2</sup>Ibid., p. 157.

hospital stay. When the mother came for her six weeks' postpartum check the midwives and obstetrician initiated contraception at the same time they immunized the baby.

The nurse-midwives also held weekly family planning clinics at the hospital and offered family planning services and advice in the districts.<sup>1</sup>

The nurse-midwife established excellent rapport with her patients. There was frequent contact during pregnancy and when the midwife suggested something the woman listened and was apt to act on the recommendation.

The author worked for five years in population programs in developing nations and noticed that in many programs, particularly in poorly educated, traditional cultures, acceptors consisted mainly of older women with many children. These women were often in their late forties and not likely to have any more children. So enrolling them in family planning programs did little to reduce the birth rate. Younger women with the potential for large families were often unprepared to accept family planning or were blocked from so doing by their husbands and parents. Of the women who did adopt family planning many used traditional unreliable methods or dropped out soon after starting. Men were usually uninterested; the number of male sterilizations and the use of the condom was low.

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<sup>1</sup>Beasley, "Coping with Family Planning," Obstetrics-Gynecology, p. 157.

The success of a family planning program, then, can be judged by the age and sex of the acceptors, their potential fertility rate, the method they use, and how long they use it. In all categories the FNS rated high.

In 1970 Henry W. Murray, M.D., a Cornell University medical student, spent the summer with the FNS on a student American Medical Association grant evaluating the first ten years of its family planning program (1960-1970).

Murray found that the annual number of births decreased 30 percent. Seventy-two percent of all acceptors had 0-4 children, nearly one-half (47 percent) were under twenty-one years old. The continuation rate for pill users was 42 percent at four years; for IUD's 59.1 percent for the same period. In other words four years after being given the pill, 42 percent of the women still used it and 59.1 percent still had the IUD.<sup>1</sup>

The proportion of pill and IUD users varied according to the availability of these contraceptives. A special study of the 570 women delivered by the FNS during 1970 and 1971 showed that of the 82 percent who returned for the six week postpartum check, 70 percent accepted family planning. Of these 30 percent took the pill, 28 percent used IUD's and 12 percent had sterilizations (32 percent male and 62 percent female.)<sup>2</sup>

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<sup>1</sup>Ibid., p. 157-58.

<sup>2</sup>From the 1970 census as quoted by Marian Pearsall,

Community Study

In 1973, Dr. Marian Pearsall, University of Kentucky Medical Center anthropologist, surveyed the Wooton community under the HEW Primex grant. The study was designed to obtain a health profile for planning and evaluation. Dr. Pearsall spent approximately three months in Leslie County. Two FNS college graduate volunteers assisted with the interviewing.

The Wooton community, situated on the fringe of FNS territory, is fairly typical of much of Leslie County. The median income was \$3,772 in 1970, in comparison to \$7,439 for Kentucky and \$9,586 for the nation.<sup>1</sup> During the same year, 54 percent of the families had incomes below \$3,000; 29 percent derived their major income from social security and 22 percent from public assistance. Most of those employed worked in the mines; only 15 percent of the women held jobs.<sup>2</sup>

Members of the fifty-one representative households, 9.8 percent of the population, were interviewed. Of this group half had telephones and 71 percent owned cars, almost all had relatively easy access to transportation through relatives and neighbors.<sup>3</sup>

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Medical Beliefs, Past Experience and the Use of Health Services in a Rural Appalachian Community, cited in Frontier Nursing Service, Inc., Primex-Family Nurse Training Program in Rural Areas prepared for National Center for Health Services Research, Hyattsville, Md. (U.S. Department of Commerce National Technical Information Services, 1977), appendix H-13.

<sup>1</sup>Ibid.

<sup>2</sup>Ibid., appendix H-18.

<sup>3</sup>Ibid., appendix H-43.

The questions were designed to ascertain the level of acceptance of the family nurse and to learn something of the populations knowledge of and feelings about health.

Generally the attitudes toward family nurses were more favorable than to physicians, although most interviewees said they went to physicians for major problems.

A higher percentage felt that the following applied to nurses more than physicians. Nurses or physicians (1) give them an opportunity to say what is wrong; (2) take a personal interest; (3) tell them honestly when they don't know what is wrong; (4) don't like to prescribe medicine when not needed; (5) like to get a doctor's opinion about the problem; (6) don't tell them there is nothing wrong when they knew there is, and (7) don't make patients wait too long when they come to the clinic.<sup>1</sup>

Interviewees tended to be selective regarding the conditions for which they called physicians or nurses, seeking medical (physician) care for more critical problems, nursing care for such ailments as sore throats, and self care for minor problems.

The interviewees expressed a relatively sophisticated knowledge of health. Of the media television was the most frequently mentioned source of health information with five

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<sup>1</sup>Ibid., Appendix H-55, Table 15. For further details see Appendix L.

<sup>2</sup>Gertrude Isaacs, "Community Study Conducted by Dr. Marian Pearsall" (mimeographed, 1974), p. 4.

specific entertainment programs mentioned 88 percent of the time. Newspapers and magazines were also named but advertising was discounted.<sup>1</sup>

When asked to list local sources of health information, physicians, nurses, families, books, pamphlets and schools were listed in that order.<sup>2</sup>

A review of twenty-five of the interview sheets indicated the importance of personal contact, both good and bad. Although a few persons complained of rudeness, mainly from Hyden Hospital business personnel, there were many complimentary remarks about the kindness of FNS personnel at the Hospital and Wooton Clinic.

One woman commented on the thoughtfulness of the pharmacist who suggested that it would be easier to swallow her medicine if she took it with orange juice. Another remarked about the family physician, Dr. Anne Wasson, "She is so dedicated she traced everything down, she is concerned about you as a patient."

A young mother refused an appendectomy because she remembered that a FNS physician had wanted to tie her tubes. She feared this would be done during the operation.

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<sup>1</sup>Dr. Pearsall has not yet published this complete study (a portion was published with the Primex report). However, she did give copies of 47 tables to FNS and has given the author permission to quote from these. The above is from table 27. For details see appendix M.

<sup>2</sup>Ibid., table 29.



Many interviewees expressed great faith in religion as a healer.

"Nurses are women and easier to talk to," one woman stated.

"The cashier gossips and keeps people waiting," another said.

One woman took Stanback for everything. If that didn't work, she went to the doctor. Another tried Vicks Vapor Rub for her heart ailment before seeking medical help.

Other complaints were:

. . . Hospital clinic nurses rush you through too fast and don't ask how you feel . . .  
 . . . The office staff fixes the charts so their friends get in first . . .  
 . . . The registering office sometimes laughs at people. The first question they ask is how you will pay for it . . .  
 . . . People in the billing office must be pocketing the money from all of the billing mistakes.<sup>1</sup>

#### Decentralized Care and Hospitalization

In a paper titled "Reduced Hospitalization Through Decentralized Care of Chronically Ill," Karen A. Gordon, a graduate student at the Yale School of Public Health, and Dr. Gertrude Isaacs analyzed the treatment of FNS diabetic patients and found that they spent less time in the hospital than diabetics in other parts of the country.<sup>2</sup>

<sup>1</sup>Undated memo, Nancy Dammann, "Wooton Survey" (typed) (In author's personal files).

<sup>2</sup>Karen A. Gordon and Gertrude Isaacs, "Reduced Hospitalization Through Decentralized Care of Chronically Ill" (mimeographed).

During 1974 Diabetes was the third most common illness treated by FNS. The Service cared for 239 patients with the disease. There were twice as many women diabetics as men and their average age was 58.1.<sup>1</sup>

The key to the FNS treatment was the team approach. The physician diagnosed and prescribed, the nurse implemented the therapy in the clinic or in the home. During 1974, 22.3 percent of the outpatient diabetic treatment was done in the hospital clinic, 66.4 percent in the district clinic and 11.7 percent in the home.<sup>2</sup>

Nurses made home visits to follow up on routine problems or to administer specific treatment when the patient failed to keep an appointment or was unable to come to the clinic. Home visit procedures included a partial physical examination, urine check and when needed, discussion of other medical problems and diet. The nurse drew blood samples for periodic tests from permanently home-bound patients.

Sixty-three diabetics were hospitalized during 1974 for an average stay of six days (range 1-22 days). Patients discharged with a single diagnosis of diabetes mellitus averaged 4.3 days compared to the national average of 7.2 days; patients discharged with multiple problems average 8.7 days compared to the national average of 11.2 days.<sup>3</sup> For all of

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<sup>1</sup>Ibid., p. 7.

<sup>2</sup>Ibid., p. 8.

<sup>3</sup>Ibid., p. 5.

FNS' diabetic patients the average hospital stay was 1.6 days per diabetic in 1974 as compared to 5.4 for the nation.<sup>1</sup>

In other words FNS' diabetics spent less time in the hospital than the typical diabetic at a savings to themselves and the FNS. The contributing factor to the low hospital stays seemed to be the FNS' decentralized system whereby the patient was not forgotten when he left the hospital but was followed and treated by the nurse in the home and in the clinic.<sup>2</sup>

University of Wisconsin Study  
of the FNS Family Nurse

In the spring of 1974 the Health Economics Research Center of the University of Wisconsin sent a team to observe FNS' system of primary care. The purpose was to test a research protocol for evaluating the work of mid-level health workers. The study, reported in a paper by Frederick L. Gooladay, et al., at the Primex Research Symposium, June, 1974, was financed by HEW.<sup>3</sup>

The team almost immediately discovered that the work of the district nurse did not fit into their pre-established computer code and was, in fact, almost impossible to code.

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<sup>1</sup>Ibid., p. 10.

<sup>2</sup>Ibid., p. 11.

<sup>3</sup>Frederick L. Gooladay, Marc F. Hansen and Kenneth R. Smith with Esther Davenport and Janet Ullring, "A Non-Experimental Health Services Research Protocol--Some Illustrative Studies of the Frontier Nursing Service" (mimeographed).

Much of the work of the nurse was something indefinable which the researchers eventually described as "socializing."<sup>1</sup>

The researchers reported the problems faced by the nurses rather pessimistically. Welfare checks, they commented, were the principal source of income for many families. Nutrition, sanitation, living conditions and self care were inadequate.<sup>2</sup>

The researchers felt that one of the most important functions of the family nurse was the home visit.

. . . Nurses make home visits to ensure that a patient is getting the right kind and amount of care, to check new problems and mental health, to provide health maintenance, counseling, education and testing, to deliver nursing care and medication, to transmit messages, and to listen and understand.<sup>3</sup>

They were greatly impressed with the rapport the FNS had established with the community.

. . . Through years of service the nurses have gained the confidence of a population which although friendly, is normally reluctant to accept outsiders. The nurses are acknowledged as members of the community and develop very close personal relationships with many of their patients.<sup>4</sup>

The researchers pointed out that through social conversations with friends or gossip at the store or post office the nurse became aware of patient problems and could follow up and treat those problems early.

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<sup>1</sup>Ibid., p. 25.

<sup>2</sup>Ibid., p. 21.

<sup>3</sup>Ibid., p. 23-24.

<sup>4</sup>Ibid., p. 24.

. . . Frequently these problems may be relieved by sympathetic listening or through the life counseling that the Frontier Nurse is willing and able to provide. The nurse tries to deal with the immediate, rather than the underlying problems. For instance, the nurse may talk with a child's teacher or find a warm coat for a mother or clothes for a baby. The basic problems remain but the nurse helps the patients cope with everyday life or alleviates tension temporarily.<sup>1</sup>

The overall findings of the study, which was based largely on observation, was that the FNS nurse was involved in many more tasks than other family nurse practitioners and that she devoted more time to socializing.<sup>2</sup>

#### The Primex Study

The Frontier Nursing Service was one of seven institutions funded by a Primex grant by HEW to evaluate its family nurse training program. It was the only non-university training center in the group. The FNS accomplished the evaluation mainly through analysis of the encounter forms filled out by physicians and nurses on each patient they saw. The form included such information as category of patient, type of payment (Medicare, Medicaid, private, etc.), diagnosis and treatment. One could tell from reading the forms whether the visit was to persuade parents to worm their children, to check on a chronic hypertension case, or to support and advise a family on the care of a senile parent.

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<sup>1</sup>Ibid., p. 25.

<sup>2</sup>Ibid., pp. 28-30.

The 170-page Primex report was submitted to HEW in May, 1977. It contained a wealth of statistical information concerning the FNS educational program as well as other aspects of the FNS work.

The study indicated that the school had met one of its main objectives, to train health personnel for rural areas. Eighty-two percent of its graduates sought rural employment and a high percentage migrated to medically underserved areas.<sup>1</sup>

The Primex document revealed that FNS hospital stays for older persons were shorter and that the percentage of elderly hospital patients lower than the national average, presumably because of its decentralized district clinics and home health care programs. For the years 1972-73, 13.4 percent of the FNS hospital admittances were for the sixty-five and over age group as compared to 18.6 percent for the nation.<sup>2</sup> The average hospital stay for FNS elderly patient was 5.03 days as compared to 12.7 in other hospitals belonging to the national Professional Activity Studies and Medical Audit Program (PAS MAP).<sup>3</sup>

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<sup>1</sup>FNS, Primex-Family Nurse Training Program, p. 82.

<sup>2</sup>Compiled from the Professional Activity Studies and Medical Audit Program (PAS MAP) which FNS joined in 1971, as quoted in FNS, Primex-Family Nurse Training Program, p. 90.

<sup>3</sup>Ibid. Note: PAS MAP membership includes rural and urban hospitals from all parts of the U.S.

### Mary Breckinridge Hospital Opens

Mrs. Jefferson Patterson, chairwoman of the FNS board and Breckinridge's niece, dedicated the Mary Breckinridge Hospital and Health Center on January 5, 1975. Over one thousand guests attended the ceremonies, including FNS babies of all ages, members of the Board of Governors, representatives from government and health agencies, old staff and couriers from fourteen states, and a bus load of friends from Louisville and Lexington.

Congressman John B. Breckinridge was the master of ceremonies and Congressman Tim Lee Carter, M.D., was a key speaker. Betty Lester of FNS and Martha Cornett of the Leslie County Health Department laid the corner stone.<sup>1</sup>

The actual opening of the hospital was delayed by an electrical accident which had occurred several weeks before the dedication. The first patients were transported down the hill from the old hospital into the new facility on February 10, 1975.<sup>2</sup>

The ground floor of the three-story L-shaped building housed the outpatient clinic, business and administrative offices, pharmacy, emergency room, surgical suite, x-ray, laboratory, physical therapy and EKG rooms. The dietary department, cafeteria and central storage were in the basement.

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<sup>1</sup>"All About Hospitals," Quarterly Bulletin 50 (Winter 1975):3-18.

<sup>2</sup>FNS interview with Philip Isaacs, FNS hospital construction coordinator.

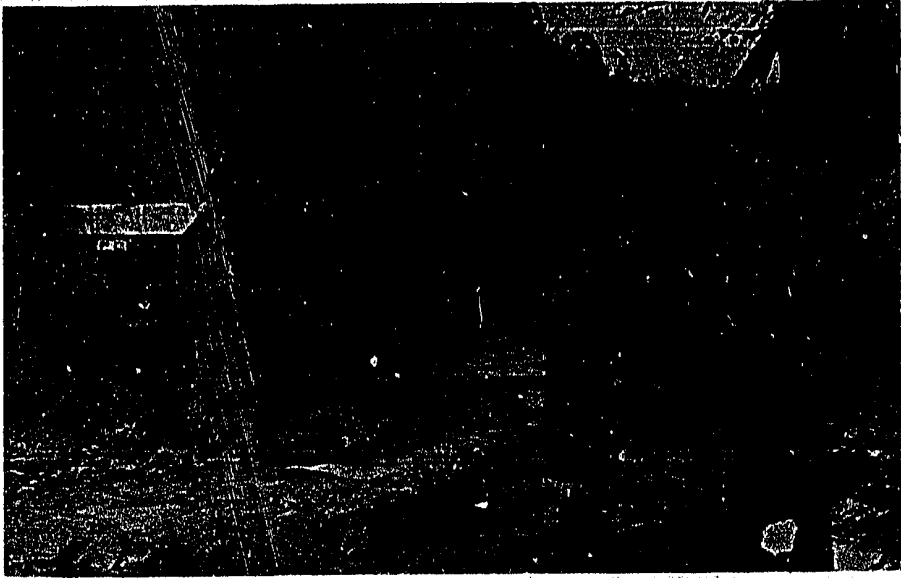


Fig. 10. Frontier Nursing Service Jeep.



Fig. 11. Mary Breckinridge Hospital.



All of the inpatient facilities, the labor and delivery rooms and nurseries were on the second floor. The top floor contained classrooms, nursing and research offices and the dental unit.

Immediately after the Mary Breckinridge Hospital opened the old facility was converted to staff apartments and offices.

The shiny new air-conditioned hospital made an immediate hit with the community. "It's the best thing that ever happened to Leslie County," remarked numerous oral history interviewees.<sup>1</sup>

#### Fiftieth Anniversary and the End of an Era

The FNS celebrated its fiftieth anniversary on May 28, 1975 in Frankfort, Kentucky, the site of the first meeting of the Kentucky Committee for Mothers and Babies, the parent organization of FNS.

Vance Bowling of the Hurt's Creek Church of Christ near Hyden gave the invocation and speakers included Governor Julian M. Carroll and Lady Ramsbotham, wife of the British Ambassador to the United States.<sup>2</sup>

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<sup>1</sup>FNS interviews with Vance Bowling, Mary T. Brewer, Glenda Davis, Tempie Young and several others.

<sup>2</sup>"The Fiftieth Anniversary," Quarterly Bulletin 50 (Spring 1975):3-13.

1965-75, Summing Up

On January 1, 1976, Helen E. Browne retired as director and was replaced by W. B. Rogers Beasley, M.D.

In ten short years under Browne's leadership FNS built a modern hospital, expanded its school, computerized its records and instigated a sophisticated research program. At the same time it managed to maintain its basic ideal of making health care readily available to everyone.

But there were problems, most of which were as much attributable to changing times as changing leadership. As long as Breckinridge lived most Leslie Countians seemed to feel FNS could do no wrong. She had become a legend, whom nobody criticized, nor did they criticize her organization.

Exposure to TV raised the expectations of the mountaineer on everything from housing to health. Most Leslie Countians had relatives in Ohio, who on their frequent visits home told tales about the wonders of shopping malls, urban hospitals and other trappings of modern civilization.

Many mountaineers now expected the same miraculous cures from the same wonder drugs he had seen on TV or heard about from his relatives. When FNS could or would not provide these cures, he doctor and hospital shopped.

The FNS family nurse was taught to use a minimum of anti-biotics. So, for common colds and flu she, like most physicians, suggested aspirin, rest and fluids. But the victim wanted a quick cure by an injection or magic pill so

often then went to a private local physician willing to dispense almost any drug the patient desired. Others visited neighboring hospitals in Hazard and Harlan. A few went to Ohio.

A Camp Creek woman first tried the Wendover nurse, then the local private physician, next the Harlan hospital and finally a Dayton, Ohio hospital for her husband who "smothered." (The poor man had black lung.) She finally settled on a Lexington clinic.<sup>1</sup>

The community no longer revered the FNS nurse. A member of the Hyden committee commented,

. . . We don't trust the nurses now in the degree we did in the old days. We were so isolated then and medical care was cheap (from the FNS), we knew we could get it, we just had more confidence in the nurses then . . . . They don't have the select people that they once had. I'm sure they have some fine people now, but there was a time when they were all select.<sup>2</sup>

Many FNS nurses wore blue jeans under their white lab coats although a few old timers stuck to the blue skirts which had replaced the riding uniforms. When the owner of Hyden's leading department store was asked if FNS nurses had influenced Leslie County styles, she snapped, "Of course not, local people are much better dressed than the nurses."<sup>3</sup>

Several FNS student and hospital nurses rented houses in the community. One or two hospital nurses shared their

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<sup>1</sup>This woman worked for the author.

<sup>2</sup>Author interview with Lottie Roberts.

<sup>3</sup>Author interview with Hyden businesswoman.

homes with men friends. When asked about community reaction to these living arrangements, a young volunteer making a survey in the Wooton area said she believed the community had a double standard about the nurses. Although Leslie Countians often had affairs they did not approve of FNS nurses doing the same. The informant thought that the mothers wouldn't stop taking their children to the nurses, because the good name of other nurses compensated. But she felt that if the nurses asked the mothers to do something they didn't want to do such as having a child's tonsils removed, they might refuse.

The same volunteer felt that the FNS staff, particularly those at the Wendover headquarters and in the hospital were resented for being somewhat elitist. FNS has taken care of the people all of their lives and they are used to them, she said, but some people resent them. Some resented the FNS boast that the community had contributed \$20,000 to the hospital.<sup>1</sup>

A Wooton teacher pointed out that not all FNS nurses were the same. The two Wooton clinic nurses were very humble she said, not condescending like some of the hospital nurses.

They were so well accepted, she said, that local people told them their family problems and sent for them to settle family squabbles. One one occasion a man she had been treating called a Wooton nurse from a Wendover party. The

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<sup>1</sup> Author interview with Barbara Moore, FNS volunteer.

nurse thought he was sick so rushed to his home only to learn that he wanted her to call the sheriff to handle his drunken son.<sup>1</sup>

Regular district clinic hours were established in the seventies and because of Medicare/Medicaid and changed fee schedules the number of home visits reduced. The old people missed the home visits, a Red Bird center committee member said, and people didn't like it when they arrived at the clinic after hours and were turned away.<sup>2</sup>

An elderly woman, born in 1904, commented that prices were higher but the FNS nurses were still good. "They don't go around to the houses now, you have to go to them." But, she said, she had only known one bad FNS nurse, a hospital nurse.<sup>3</sup>

Roe Davidson, another old timer, commented that FNS equipment had improved. He had been hospitalized for fourteen days. "I couldn't look for a better hospital than this over here, it is a good place to be, they were so nice to me."<sup>4</sup>

Although there were problems, as there are in all institutions, FNS continued to demonstrate statistically the soundness of its approach. An intensive study of inpatient and outpatient statistical data for the period February, 1973

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<sup>1</sup>Author interview with Lucile Knechtley.

<sup>2</sup>FNS interview with Mrs. Glenda Sams Davis.

<sup>3</sup>FNS interview with Mrs. Dela Gay.

<sup>4</sup>FNS interview with Roe Davidson.

through July, 1975 revealed only 2 neonatal deaths and 4 stillbirths out of 495 deliveries. This amounted to a neonatal death rate of 4.1 per 1,000 live births and a stillbirth rate of 8.1. The neonatal death rate in Kentucky for 1973 was 12.3 and the stillbirth rate was 13.3.<sup>1</sup>

There were no known incidences of cerebral palsy, an affliction which often results from birth injuries, and no new cases of tuberculosis in the county during 1974 and 1975. Deaths due to cervical and breast cancer were below the state and national averages. There were no reported cases of cervical cancer within Leslie County in 1974 and 1975.<sup>2</sup> These were all conditions deemed manageable through preventive measures. In other words the FNS emphasis on preventive care seemed to be effective.

Home deliveries, for which Medicaid would not pay, were abandoned in favor of hospital deliveries with no comparable decreases in infant and maternal mortality. On the contrary, infant mortality rates rose, possibly because of lack of day-to-day contacts with the nurse-midwife.<sup>3</sup>

Since Medicare and Medicaid would only reimburse FNS for patients seen by a physician or whose chart was signed

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<sup>1</sup>Gertrude Isaacs, "A Universal Model for Health Care or The Dilemma of a Primary Health Care Agency in a Medically Oriented Society" (mimeographed: This paper was presented at the International Health Conference, Arlington, Virginia, October 1, 1975), pp. 4-5.

<sup>2</sup>FNS, Primex-Family Nurse Training Program, p. 130.

<sup>3</sup>Isaacs, "The Dilemma," p. 6.

by the physician more and more people went to the hospital, where the physicians worked. Hospital patients were treated for specific ailments, often by staff who did not know them. These patients no longer received the preventive care practiced by the district nurse, who was not only familiar with their problems, but also those of their families.

The preference for hospital care became particularly marked with the opening of the Mary Breckinridge Hospital in February, 1975. People delayed seeking care until they felt sufficiently ill to justify a trip to the hospital.

A few statistics tell the tale as illustrated in Table 6.<sup>1</sup>

TABLE 6

SITE OF HEALTH CARE FOR  
CHILDREN AGED 15 AND UNDER

<u>Site</u>	<u>1973</u> (percent)	<u>1975</u> (percent)
Hospital Days	10	11
Hospital Clinic Visits	32	49
District Clinic Visits	43	32
Home Visits	15	7
Total Visits	11,175	9,073

<sup>1</sup>Isaacs, "The Dilemma," p. 6.

As can be seen from Table 6, home and clinic visits fell between 1973 and 1975 while hospital visits increased. This was the age where preventive care in the form of immunizations and education on such subjects as nutrition was best given in the district clinics rather than the hospital where the emphasis was on treatment of specific ailments.

As the FNS aged, so did its patients. In 1937, 72 percent of the ambulatory care service was in midwifery, 11 percent in public health, and 3.2 percent in sick care.<sup>1</sup> With the advent of hospital deliveries and family planning, midwifery services dropped to 12 percent in 1970 and the nurses devoted proportionately more time to public health and sick care, particularly of the elderly.

The figures for the FNS fiscal years 1973-74 were fairly typical. There were 22,613 visits to the hospital clinic. The district nurses received or made 33,524 visits of which 41 percent were home visits and 59 percent patient visits to the clinic.<sup>2</sup>

In January, 1974, the breakdown by age of FNS patients was as shown in Table 7.<sup>3</sup>

Many of the patients in the 16-20 and 21-59 age brackets were midwifery and family planning patients.

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<sup>1</sup> Isaacs, "The Dilemma," p. 4.

<sup>2</sup> "Forty-Ninth Annual Report," Quarterly Bulletin 50 (Summer 1974):17-18.

<sup>3</sup> Compiled by FNS from its encounter forms.



TABLE 7  
 AGE DISTRIBUTION OF FNS PATIENTS,  
 JANUARY, 1974

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<u>Age</u>	<u>Percent</u>
0-15	31.3
16-20	38.6
21-59	35.9
60-64	3.7
65 and over	21.8

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The FNS continued to have financial problems throughout the decade partly because it could not explain its program to the government and foundations, for the FNS seemed to speak a different language than most health agencies. This was exemplified by the Wisconsin research team which had no code for much of the work of the FNS family nurse despite the fact that it had already evaluated several other health agencies.

The FNS program seldom fitted into federal or state funding requirements for it had practiced for years many of the programs being pushed by government agencies as "new and innovative." Since these were old hat to the FNS and could not be funded as new projects, no government money was available.

Family planning was a good example. The FNS incorporated family planning into its Maternal and Child Health (MCH) work in the 1950s, long before it became an "in" program.

Since most government and many private grants were allocated for establishing family planning programs or financing special family planning projects separated from on-going midwifery of MCH programs, there was almost no way the Service could obtain funding for its work in that field.

Still despite the financial and other problems which have plagued the FNS since its inception its work will doubtless continue. As one retired staffer put it, "We've always had crises; the depression, the war, Mrs. Breckinridge's death. Sometimes we didn't know if we could make it, but we always pulled through. The FNS will always make it."<sup>1</sup>

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<sup>1</sup>FNS interview with Betty Lester.

## CHAPTER VII

### FNS' FIRST FIFTY YEARS, WHAT IT ACCOMPLISHED

FNS undoubtedly successfully improved the health of Leslie Countians, particularly that of mothers and children. But, possibly because Breckinridge urged her nurses to stay out of and not discuss politics, religion and moonshining, the FNS appears to have had little influence on other aspects of Leslie County life.

As a former secretary wrote, FNS' purpose was not to be,

. . . an agent of change - but to be of service! Any change was incidental. Mrs. Breckinridge respected and liked the mountaineers as they were and she wanted them alive and well to do their own thing.<sup>1</sup>

During its first fifty years FNS registered 65,104 patients.<sup>2</sup> The number of personnel increased from a director and two nurse-midwives to a staff of over seventy including four physicians, about thirty nurses, a controller, health educator, hospital administrator, x-ray, laboratory and pharmacy technicians and a large clerical staff.

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<sup>1</sup>Letter from Lucile Knechtley to author dated January 15, 1980.

<sup>2</sup>"Fiftieth Annual Report," Quarterly Bulletin 51 (Summer, 1975), p. 21.

FNS began its work in a plumbingless house which doubled as living quarters and a clinic. By 1975 it owned a modern 40-bed hospital, administrative headquarters and six outpost centers. Its operating expenses rose from \$10,619.10 in 1925<sup>1</sup> to \$1,689,499 in 1975.<sup>2</sup> Donations grew from \$9,712 in 1925 to \$86,971 in 1975, with an additional \$116,998 income from federal grants plus a \$6,188,162 endowment fund.<sup>3</sup> In 1925 FNS registered 830 patients;<sup>4</sup> in 1975 it admitted 1,272 patients to the hospital and attended 10,503 persons in the clinics and 24,271 in the outpatient department.<sup>5</sup>

When Breckinridge founded the FNS she hoped, in part,

To safeguard the lives and health of mothers and children by providing and preparing trained nurse-midwives for rural areas in Kentucky and elsewhere, where there is inadequate medical services; . . . <sup>6</sup>

This she appears to have accomplished. Leslie County has long been one of the poorest counties in the United States; yet FNS health statistics compare favorably with those of prosperous areas.

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<sup>1</sup>"Statement of Cash Receipts and Disbursements," Quarterly Bulletin II (June 1926):7.

<sup>2</sup>"Fiftieth Annual Report," p. 7.

<sup>3</sup>"Statement of Cash Receipts and Disbursements," p. 7.

<sup>4</sup>"Kentucky Committee for Mothers and Babies Report," Quarterly Bulletin II (June 1925):insert following p. 20.

<sup>5</sup>"Fiftieth Annual Report," p. 18.

<sup>6</sup>Articles of Incorporation of the Frontier Nursing Service, Article III.

Among the women served by the FNS after 1952, there were no maternal deaths out of over 8,000 deliveries. In 1973-75 the maternal mortality rate in Kentucky was 1.9 per 10,000 live births; the national rate was 1.4.<sup>1</sup>

Leslie County's perinatal (the time right before or right after birth) death rate has been consistently lower than that of the state. In 1973-75 the FNS figure was 22.3 per 1,000 live births compared with 24.8 for the State.<sup>2</sup> There have been no known incidences of cerebral palsy in the county, an affliction often resulting from birth injuries (nurse-midwives seldom, if ever, use forceps).<sup>3</sup>

Leslie County has had a limited incidence of communicable disease in comparison with surrounding counties presumably because of the intensive immunization program carried out by the FNS and County Department of Health. There were no new cases of tuberculosis in 1974 and 1975.<sup>4</sup> Deaths due to cervical and breast cancer were below the state and national averages. There were no reported cases of cervical cancer within Leslie County in 1974 and 1975.<sup>5</sup> (These conditions have been considered manageable through preventive measures.)

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<sup>1</sup>FNS, Primex-Family Nurse Training Program, p. 127.

<sup>2</sup>Ibid., p. 125.

<sup>3</sup>Ibid., p. 130.

<sup>4</sup>Ibid.

<sup>5</sup>Ibid.

Breckinridge also hoped to . . . educate the rural population in the law of health, and parents in baby hygiene and child care . . . <sup>1</sup>

Here again she appears to have succeeded although proof is difficult to document. Numerous oral history interviewees mentioned the nurse-midwives discussing child care and nutrition with them during their post-partum visits. Quite probably this health education was a factor in FNS' generally low infant mortality rate. In 1964-67, for example, it was 17.7 per 1,000 live births compared to 25.2 for the state.<sup>2</sup>

In a medical journal article Dr. Beasley attributed the success of FNS' family planning program under which the birth rate was reduced 60 percent between 1960 and 1970 to the teaching of the nurse-midwives during prenatal visits with their patients.<sup>3</sup>

In her autobiography Breckinridge wrote that she hoped to do the work so well that others would study it and then duplicate it.<sup>4</sup> She appears to have met this goal.

By 1975 the FNS was internationally famous. Each year nurses, health planners and physicians from Asia, Latin

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<sup>1</sup>Articles of Incorporation of the Frontier Nursing Service, Article III.

<sup>2</sup>FNS, Primex-Family Nursing Training Program, p. 125.

<sup>3</sup>Beasley, "Coping with Family Planning," Obstetrics-Gynecology 41 (January, 1973):157.

<sup>4</sup>Breckinridge, Wide Neighborhoods, p. 158.

America and Africa visited the FNS under World Health Organization (WHO) and Agency for International Development (AID) grants to study its decentralized health delivery system.

FNS had graduated slightly over 450 nurse-midwives and family nurses by the end of 1975.<sup>1</sup> Twenty percent of its graduates worked overseas and eighty-two percent in rural areas.<sup>2</sup>

The FNS succeeded, the author believes, because it answered a felt need and because Breckinridge kept the population informed of her program, problems and plans. The nurses were accepted largely because they stayed out of local affairs (politics, religion and moonshining) and concentrated on providing health care.

FNS reached the height of its popularity during the thirties, forties and fifties. Leslie County was isolated during much of this period, roads were non-existent or inadequate. It was difficult to reach hospitals in Harlan and Hazard. People were dependent on the nurses who made themselves available to their patients at all hours.

As a rule the community-nurse relation was very close. In an informal survey Isaacs found that the people liked most of the nurses very much, and because they wanted health care, accepted the others. They tended to follow the instructions of the nurses they liked more than those of less popular nurses.<sup>3</sup>

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<sup>1</sup>FNS, Primex-Family Nurse Training, p. 44.

<sup>2</sup>Ibid., p. 88.

<sup>3</sup>Author interview with Gertrude Isaacs.

During FNS' heyday Breckinridge held regular district committee meetings to inform members about the Service. She didn't always ask their advice but did let them in on her plans and never talked down. She treated them as intelligent human beings. In the one hundred or more interviews with Leslie Countians there was no criticism of Breckinridge although a few people were critical of FNS. Instead, most greatly respected, in fact, almost worshipped her.

One Hyden businesswoman told the author that Breckinridge was elitist and that she blocked change particularly during her later years.

A teacher who married into the area criticized Breckinridge for writing and speaking about Leslie County's poverty, the crowded shacks and barefoot children. She pointed out, as have other members of the middle class, that not all Leslie Countians were poor.<sup>1</sup>

Several FNS staffers who knew her well commented about Breckinridge's great respect for Leslie Countians, which doubtless was a major cause of her popularity. In any case it is probable that FNS' success during this era was mainly attributable to Breckinridge's leadership and the fact that she did include people in her planning.

Although FNS remained popular through 1975, criticism of its staff, policies and fees became common. With Medicare/Medicaid cards and improved roads people could and did go to

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<sup>1</sup>FNS interview with Mary Brewer.



Hazard and Harlan for medical care. There was no longer as great a need for FNS services. The district nurses cut down on home visiting, and established clinic hours, and were not always available when people wanted them. In order to meet Medicare/Medicaid regulations, FNS was forced to raise its fees. District meetings were virtually abandoned.

Leslie County changed markedly during the half century. By 1975 its population had most of the same modern conveniences as the rest of the nation. Almost all homes were electrified, many had indoor plumbing, TV and washing machines. Consolidated schools had replaced the old one-room buildings, there was a modern library and countless government agencies. Several highways including the Daniel Boone Parkway traversed the county and Hyden boasted a sewage and water system. Nevertheless, Leslie County remained economically deprived with over 55 percent of its families living below the poverty threshold in 1970.<sup>1</sup>

The FNS' role was to provide health care and it had little to do with these changes. The only area, other than health, where FNS did appear to stimulate change was in the small community of Camp Creek near the Service's headquarters at Wendover.

Members of Camp Creek Morgan, Cornett and Howard families have worked at Wendover since 1926. The relationship between FNS staff and Camp Creek employees was almost familial.

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<sup>1</sup>Ramsey, Kentucky County Data Book, p. 58.

FNS financed several college scholarships for Camp Creek youngsters and stimulated others to try for public scholarships. As a result all of the children of a retired semi-literate maintenance foreman have obtained college degrees.

In exchange Camp Creek employees have taken a paternalistic interest in Wendover and its staff. When they liked a nurse, they helped and guided her. One Wendover nurse, for example, was extremely shy and found it difficult to communicate with her patients. A Camp Creek employee and his wife suggested that she learn about gardening so that she would have something in common about which to talk to her patients. The couple then gave the nurse a small plot in their large garden and introduced her to the complexities of vegetable gardening.

Breckinridge loved gardening and built Wendover into a showplace of colorful azaleas, lilacs, roses and wild flowers. The grounds were kept immaculate with not even a cigarette butt permitted to mar its beauty. This spirit apparently rubbed off on Camp Creek which has always differed from the rest of Leslie County because of its well groomed appearance. The gardens have been well tended and most houses boasted flowering shrubs and flowers. On the other hand, much of the rest of Leslie County has remained unkempt and strewn with garbage.

As stated in the Articles of Incorporation, Breckinridge hoped "to ameliorate economic conditions inimical to

health and growth, and to conduct research toward that end."<sup>1</sup> Here she had little if any impact other than perhaps to help encourage welfare dependency.

Although she was certainly not solely responsible, during the depression Breckinridge did influence Red Cross and welfare agencies to help the county. She did this over the objections of local leaders who felt that mountain people had always helped each other and should continue to do so.<sup>2</sup> Some families have been on welfare ever since.

Staff and a few Leslie County leaders have criticized FNS for spoiling the people with its extremely low fees. During the war, Browne said, there was beginning to be some money in the county. Women with good defense jobs were coming back to Hyden to have their babies because it was so cheap. "I begged Mrs. Breckinridge to raise the fees but she refused, not everyone could pay, she said."<sup>3</sup>

"We were spoiled by the low fees," a Red Bird committee member said. "That's why FNS had such a hard time when it had to raise its fees last year."<sup>4</sup>

FNS, one of the county's biggest employers, has consistently paid low salaries. Some have felt this encouraged

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<sup>1</sup>Articles of Incorporation of the Frontier Nursing Service, Article III.

<sup>2</sup>FNS interview with Agnes Lewis.

<sup>3</sup>FNS interview with Helen E. Browne.

<sup>4</sup>FNS interview with Georgia Ledford.

other employers to pay low wages. However, Leslie County jobs have been so scarce job seekers have been willing to accept any salary as evidenced by the fact that when FNS raised its salaries to the minimum wage level in 1975, local store owners saw no need to follow suit.

Breckinridge urged her nurses to stay clear of politics, religion and moonshining, largely, according to her executive secretary, for practical reasons. "If we'd gotten involved in politics or moonshining we would have been shot," Lewis said.<sup>1</sup> Whatever her reason, Breckinridge herself turned down an invitation to serve on the Democratic National Committee and avoided discussing liquor and religion in public. Nor did she mix socially with missionaries, of which there were several groups in Leslie County. According to one story, loved by ex-staffers, she took up smoking just to shock the missionaries who had criticized some of her nurses for indulging in the habit.<sup>2</sup>

The author believes that it was largely because the nurses stayed out of local affairs that they were so well accepted. But, this also kept them from having much influence outside of health.

In her dissertation proposal the author listed as research questions several areas which FNS might have influenced. The research indicated that FNS had little if any influence in most of the areas listed.

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<sup>1</sup>FNS interview with Agnes Lewis.

<sup>2</sup>Author interview with retired nurse-midwife.

FNS staff avoided politics. Since eastern Kentucky school boards were highly political, FNS stayed clear of school activities. The same applied to welfare offices, which tended to be managed by friends and relatives of courthouse politicians. Nor did FNS' efficient administrative techniques rub off on the school board or welfare agencies, each of which has remained among the more poorly managed in the state.

Most Leslie Countians were Baptists or belonged to fundamentalist sects such as The Church of Christ. Week-long revival meetings played a key role in church activities. FNS nurses occasionally attended local services at the invitation of members out of curiosity and politeness, but seldom more than once or twice.

Most of the church-going members of the FNS staff attended their own services in the Wendover and Hyden hospital chapels. A few went to the Hyden Presbyterian church, whose membership mainly included professionals, business people and outsiders. Two nurse-midwives joined the Baptist church at Red Bird.

Breckinridge built the Wendover chapel in the forties and held nondenominational services there every Sunday afternoon followed by tea for visiting staff. The chapel was condemned and torn down in 1973 because it lay on a land fault. The St. Christopher's hospital chapel was finished in 1961 and used mainly for FNS graduations, weddings and funerals and a monthly Episcopalian service presided over by a visiting Hazard minister.

The Catholic Church converted a prefab building to a small chapel and held weekly service for Catholic nuns working at FNS and attending its school. Few, if any, Leslie Countians came to the services.

The only time most Leslie Countians and FNS staff met in church was at funerals and weddings. Neither group appeared to have any religious influence on the other.

Much as it tried, FNS had little observable influence on sanitation. The real progress in latrine construction seems to have followed WPA and "Happy Pappy" programs which actually built these structures.

In 1976, when the author rented a portion of a Hyden grocery's store room to convert to a book store, her first chore was to shovel out long-dead rats. Leslie County creek beds have remained filled with garbage and its roads lined with refuse and abandoned cars.

Over the years FNS and its staff have contributed greatly to the local economy. In 1972, for example, FNS had a payroll of \$800,000 which was handled by the Hyden Citizens Bank and the Service spent about \$200,000 in the area for food, supplies, utilities, telephones, insurance and other services.<sup>1</sup>

To accommodate the FNS staff stores carried a few specialty items such as white uniforms and shoes for the

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<sup>1</sup>"Frontier Nursing Service, Inc." (mimeographed, October 27, 1973), pp. 4-5.

nurses and films and cameras for the shutterbugs. However, when asked if the FNS nurses influenced local styles and the selection of stock a department store owner snapped, "On the contrary, Leslie Countians are better dressed than the nurses, they could learn something from us."

The Leslie County Vocational School began training medical secretaries for FNS in 1971. Vocational school and FNS staff shared the teaching responsibilities.

During the seventies about 75 percent of Hyden's stores were owned by women. FNS staff, almost all of whom are female, have wondered if it was the FNS example which encouraged women to enter business. However, the author found little connection between the large number of businesswomen and FNS. Most of the Hyden businesswomen, including owners of the leading hardware and department stores, were widows who had inherited their stores and kept them going in order to support their families.

The author included a research question in her dissertation proposal, "What was the influence of the FNS construction on the area?" which she cannot answer. The FNS district centers were among the first buildings in the area to have plumbing and other modern conveniences, but these were not immediately copied nor is the author aware of any Leslie County homes similar to the FNS centers.

With improved transportation, World War II and the in and out migration to urban jobs, local people were exposed

to the latest construction styles and a few families began building modern homes. Many of Leslie County's contractors learned their skills on Ohio jobs or in the armed services. Leslie County now has many beautiful homes similar to those found in any wealthy suburb. It also has many mobile homes and a good number of shacks.

To sum up, the author believes the FNS did succeed in delivering excellent health care in an economically deprived area through mid-level health personnel (first the nurse-midwife, then the family nurse) backstopped by physicians. It did not, however, have much influence outside the field of health care. When FNS tried to encourage good sanitation, for example, their patients often closed their ears.

The author believes FNS succeeded because the population wanted health care; i.e., there was a felt need, also, Breckinridge consulted the population. She surveyed the area prior to starting her program, discussed her plans with local leaders and kept the district committees informed of her work. She never started a center until it had been requested by local citizens.

Breckinridge and her nurses were well accepted, quite probably because they did not become involved in politics, religion or moonshining and did not try to change the area. All they attempted was to provide sound health care.



The author suggests that this is a useful model for other would-be change agents to follow, i.e., to provide a service the community wants, to keep them informed and if possible involved, to stay out of local political, religious and illegal affairs and to confine their work to their own specialty and not meddle in other fields such as education.

The study leaves many questions unanswered. Leslie County changed markedly between 1925 and 1975. What were the true causes? The author believes that the major contributing factors were improved communications and government programs.

Appalachian experts disagree as to the impact of the WPA, CCC, War on Poverty, Appalachian Regional Commission and other government programs. The author believes that a study is needed on the role of government programs in east Kentucky development.

TV is often credited with broadening the horizons of its audiences. It would be interesting to study in depth its role in the recent modernization of east Kentucky.

If the author is correct in believing that FNS succeeded largely because its personnel kept out of local affairs, does this mean that experts in other fields such as agriculture and education must also stick to their specialties? If this is so how does one abolish the corrupt politics and degenerate school systems common to east Kentucky?

More research is needed on the role of the outside change agent in an underdeveloped traditional area where outsiders are generally suspect. How far can he or she go beyond his or her specialty?

APPENDIX A  
AUTHOR RELATIONSHIP WITH FNS

The author first worked for FNS as a volunteer courier for six weeks in 1941 and came back as a senior courier in 1947. At Breckinridge's request she returned in 1949 to take photographs of winter scenes to be used for publicity.

While serving overseas for the Agency of International Development (AID) the author spent portions of her 1967 and 1970 home leaves with the FNS taking publicity pictures and doing volunteer chores. In 1970 she helped write a report about a family nurse conference sponsored by the FNS and became deeply imbued with the Service's philosophy.

As an AID communications media advisor the author spent thousands of dollars on expensive audio-visual equipment to support family planning programs in Jamaica and the Philippines. She began to wonder if the FNS person-to-person approach was not a great deal more effective and less expensive, so, in 1973 retired from AID to work for the FNS as a combination health educator, fund raiser and publicity writer, with the overall objective of studying and writing about the FNS program.

The author resigned from the FNS in 1975 in order to open a book store and freelance write. Her relationship with FNS remains close. She lives on Hurricane Creek, one-half

mile from Wendover in a house she built on land leased from FNS, and currently serves on the FNS advisory committee.

## APPENDIX B

### "OUR OBJECTIVES" AS OUTLINED IN 1925

It is well to keep in mind that we are embarking on a piece of research--and to advance at the outset a few questions which our adventure must answer or fail.

1. Will our maternal and infant death rate in rural sections of Kentucky be lowered by this system of nurse-midwives to figures comparable with those of the old world?

2. What area and population can be served by each nurse, combining midwifery with generalized public health nursing? and what part of her time is claimed by midwifery? What part by generalized nursing? We are keeping very exact daily records in order to answer this.

3. What will the cost be? And what part can be borne locally? In the Hebrides of Scotland, with its somewhat similar population and economic conditions, it was found that about 20 percent of the costs could be borne locally--in other parts of the Highlands as high as 80 percent.

4. Will the people accept it? Will the nurses do it? These questions we are answering already.

5. Is it economically possible to provide for this service and from what sources other than local support? Educational work is largely met by endowments. Perhaps we are coming to an era when health will be as well endowed as education.

6. Can this service extend indefinitely with nurses only? Or must the nurses eventually be used for the supervision of small groups and a class of midwife-attendant trained to work under them?

Source: "Our Objectives," Kentucky Committee for Mothers and Babies I (October 1925):13-14.

APPENDIX C  
 TOTAL FAMILY INCOME IN DOLLARS FOR 400 FAMILIES  
 MAGISTERIAL DISTRICTS OF  
 LESLIE COUNTY, 1930-31

	Income in Dollars
Total range	\$32.30-\$4,632.78
Range of middle 96% of families	\$157.00-\$1,548.50
Range of middle 92% of families	\$185.90-\$1,346.50
Mean	\$640.75
Median	\$566.00
Mode	\$416.50
Average deviation	\$282.11
Standard deviation	\$392.14
Income exceeded by only 2% of families	\$1,584.50

Source: Mary B. Willeford, Income and Health in Remote Rural Areas (New York: Frontier Nursing Service, 1932), p. 19.

APPENDIX D  
 MONEY INCOME PER FAMILY IN DOLLARS  
 FOR 400 FAMILIES IN TWO LESLIE COUNTY  
 MAGISTERIAL DISTRICT, 1930-31

	Income in Dollars
Total range	\$0.00-\$2,959.28
Range of middle 96% of families	\$24.00-\$870.00
Range of middle 92% of families	\$70.00-\$684.50
Mean	\$248.62
Median	\$201.36
Mode	\$183.53
Average deviation	\$98.97
Standard deviation	\$198.50
Income exceeded by only 2% of families	\$870.00

Source: Mary B. Willeford, Income and Health in Remote Rural Areas (New York: Frontier Nursing Service, 1932), p. 23.

APPENDIX E  
TOTAL SPENDABLE MONEY INCOME PER CAPITA  
FOR CERTAIN SECTIONS OF  
THE UNITED STATES

Region	Income in Dollars	
	1929	1930
United States	776	580
Southern Appalachia	433	361
Kentucky	365	289
254 Mountain Counties	294	249
Leslie County	102	81

Source: Sales Management, Section II, September 27, 1930, and Section II, October 31, 1931, Sales Management, Inc., 430 Lexington Avenue, New York City, as quoted in Mary B. Willeford, Income and Health in Remote Rural Areas (New York: Frontier Nursing Service, 1932), p. 55.



APPENDIX F  
 FNS PATIENT LOADS FOR TWO  
 TYPICAL YEARS, 1950 AND 1960

Type of Data	1950	1960
HOSPITAL PATIENTS		
Adults	140	250
Obstetrical patients	269	469
Children	174	207
Newborn	181	284
TOTAL	764	1,210
AVERAGE DAILY CENSUS	16	20
OUTPATIENT VISITS	7,217	10,410
DISTRICT PATIENTS		
Adults	4,838	5,837
Children	4,915	5,275
TOTAL	9,753	11,112
HOME VISITS	17,488	26,502
VISITS TO CLINICS	17,629	22,688
MIDWIFERY		
Registered cases	414	403
Live births	416	395
Stillbirths	11	5
Sets of twins	4	7
Maternal deaths	0	0

Source: Compiled from Twenty-Fifth and Thirty-Fifth FNS Annual Reports printed in 1950 and 1960 summer editions of the Quarterly Bulletin of the Frontier Nursing Service, Inc.

APPENDIX G  
 REVENUE RECEIPTS, MAY 1, 1959  
 TO APRIL 30, 1960

DONATIONS		\$167,628.94
OTHER REVENUE RECEIPTS		
Fees for Frontier Graduate School of Midwifery		8,910.00
Payments from Patients		
Income from Nursing Centers	\$16,826.92	
Medical and Surgical Fees	7,386.48	
Hyden Hospital Fees	10,929.48	
Hospital Clinic Funds and Supplies	<u>9,299.80</u>	
TOTAL		44,443.10
Wendover Post Office		4,555.66
Income from Investments		66,022.14
<u>Wide Neighborhoods</u> - Royalties and Local Sales		433.28
Livestock Sales		1,068.52
Miscellaneous		<u>146.08</u>
TOTAL ALL REVENUE RECEIPTS		\$293,207.72

Source: "Thirty-Fifth Annual Report," Quarterly Bulletin 36  
 (Summer 1960):5.

APPENDIX H

1959-60 EXPENDITURES

I.	FIELD EXPENSES (Hyden Hospital, Frontier Graduate School of Midwifery, Wendover, and Six Nursing Centers)	\$103,723.19
	1. Salaries and Wages	7,958.33
	2. Medical Director and Relief	29,343.06
	3. Dispensary Supplies	
	4. Running costs: Food-Minurs board or residents; cows, fuel, electricity, laundry, freight and hauling, etc.	36,979.62
	5. Feed and care of 17 horses and mules	6,480.26
	6. Jeeps (20), Truck, Station Wagon Ambulance	11,631.68
	7. Maintenance of Properties	<u>10,291.46</u>
	Total Field Expense	\$206,407.60
II.	ADMINISTRATIVE EXPENSES	
	1. Salaries, Accounting and Auditing, Office Supplies, Postage, Telephone and Telegraph, Printing, etc.	33,890.08
		3,856.39
III.	SOCIAL SECURITY TAX	11,713.89
IV.	SOCIAL SERVICE	
V.	GENERAL EXPENSE	6,134.16
	1. Insurance	
	2. Quarterly Bulletins (covered by subscriptions)	4,851.81
		2,600.00
	3. Record Department	
	4. Miscellaneous Projects such as: Doctors and Nurses for study and observation, professional books and magazines	999.97
	5. Miscellaneous Promotional Expenses beyond the mountains	<u>1,699.40</u>
	TOTAL RUNNING EXPENSES	<u>\$272,153.30</u>

Source: "Thirty-Fifth Annual Report," Quarterly Bulletin 36  
(Summer 1960):7.

APPENDIX I  
SOCIAL SERVICE DEPARTMENT  
REPORT, 1959-60

During the fiscal year the Social Service Department gave financial aid to 188 families or individuals as follows:

Provided medicines for 16 patients  
Paid for diagnostic x-rays for 7 people  
Bought glasses for 22 patients (NEW EYES FOR THE NEEDY FUND)  
Paid dental bills for 5 patients  
Provided orthopedic brace for 1 patient  
Provided bus fare for 5 school students  
Paid all or aprt of city hospital bills for 22 patients  
Paid doctors' bills for 12 patients  
Bought coal for 2 destitute families  
Paid for extra coal for 18 families - needed on account of exceptionally long cold winter  
Gave groceries to 33 families - a total of 80 orders  
Provided school clothes and shoes for 10 children  
Provided monthly allowance for 3 High School students  
Provided seed potatoes and garden seeds for 28 families  
Provided school lunches (hot) for 22 children  
Paid boarding school expenses for 3 children  
Paid college fees for 1 student  
Paid tuition fees and travel expenses for 1 student at the Vocational school  
Paid ambulance bills for 12 patients  
Paid laboratory fees for patients at Lexington Clinic, Hazard Clinic and Miners' Memorial Clinic (Any patients who can pay do reimburse the Service)

Many patients were transported to and from the Hyden Hospital to the outpost centers. In addition there were:

Trips to Lexington with 24 children to the clinic of the Kentucky Commission for Handicapped Children, 7 patients to Lexington hospitals, and 26 to the Lexington Clinic and other doctors  
18 trips to Cincinnati Children's Hospital with 26 patients  
20 trips to Hazard with 25 patients to the Hazard Memorial Hospital, Mount Mary Hospital and the Hazard Clinic  
3 trips to Danville to the Kentucky School for the Deaf with 4 children  
1 trip to Manchester with children to the annual clinic of the Kentucky Commission for Handicapped Children  
3 trips to Houston Mission School with 4 students

2 trips to London with 2 patients for admission to the  
Tuberculosis Hospital Clinic

2 trips to Homeplace Clinic and Hospital with patients

General service and aid was given to other families  
and individuals as follows:

Clothing, books, etc. distributed to families and local  
schools

Service and time given in cooperation with the American Red  
Cross, Welfare and Health Departments, County Judges,  
Vocational Representatives, Frontier Nursing Service  
Medical Director, District nurse-midwives, and the  
Hospital Staff

Source: "Thirty-Fifth Annual Report," Quarterly Bulletin 36  
(Summer 1960):13-14.

APPENDIX J  
FNS REVENUES AND EXPENSES FOR FIVE TYPICAL YEARS

	Year Ended April 30,					
	1925 <sup>1</sup>	1935 <sup>1</sup>	1945	1955	1965	1975
Revenues	9,728.40	74,946.50	136,152.12	221,835.40	358,784.69	1,696,088.00
Donations	9,728.40	na	105,873.07	126,056.76	168,591.11	393,684.00
Investment Income	na	na	13,702.09	44,924.73	108,365.77	370,859.00
Patient Fees	na	na	8,350.57	31,431.39	65,247.37	522,785.00
Miscellaneous	na	na	8,226.39	19,421.52	16,580.44	408,760.00
School fees, etc.						
Operating Expenses	10,619.10	80,000.00	118,002.02	208,454.17	353,534.33	2,024,974.00 <sup>2</sup>
Excess of Expenses over Revenues	890.70	5,053.50				328,886.00
Excess of Revenues over Expenses			18,150.10	13,381.23	5,250.36	

<sup>1</sup>Annual reports for the early years were incomplete.

<sup>2</sup>This did not include \$61,891.78 for the acquisition of new lands, buildings, etc.

Source: Compiled from the first, tenth, twentieth, thirtieth, fortieth and fiftieth annual reports printed in the June 1926 Quarterly Bulletin and the 1935, 1945, 1955, 1965 and 1975 summer editions of the Quarterly Bulletin.

APPENDIX K  
STATEMENT OF REVENUES AND EXPENSES  
FRONTIER NURSING SERVICE, INC.

Year ended April 30, 1973

Patient service revenue:	
Hospital--inpatient	\$295,312
Hospital--outpatient	171,513
Outposts	155,431
Home health	<u>198,781</u>
	821,037
Less discounts, charity, bad debts and contractual allowances--net	<u>399,551</u>
	421,486
Other operating revenue:	
Endowment income (14,434) and donations and grants for specific operating purposes	\$114,266
Drug sales, board, and other operating revenue	<u>154,205</u>
	<u>268,471</u>
TOTAL OPERATING REVENUE	689,957
Operating expenses:	
Hospital	797,962
General and administrative	265,600
Clinic and home health	208,271
School of Midwifery	112,191
Depreciation	<u>52,242</u>
	<u>1,436,266</u>
LOSS FROM OPERATIONS	746,309
Nonoperating revenue:	
Unrestricted gifts and bequests	366,609
Unrestricted income from endowment funds	15,334
Income and gains from Board-designated funds	<u>354,340</u>
	<u>736,283</u>
EXCESS OF EXPENSES OVER REVENUES	<u>\$ 10,026</u>

Source: "Forty-Eighth Annual Report, Quarterly Bulletin 49 (Summer 1973):7.

APPENDIX L

OPINIONS ABOUT DOCTORS AND NURSES  
BY THE WOOTON RESIDENTS (N=52)

Statement	Doctors			Nurses		
	True	False	DK	True	False	DK
A.	5(9.6%)	47(90.4%)	0	3(5.8%)	48(92.3%)	1(1.9%)
B.	9(17.3%)	43(82.7%)	0	4(7.7%)	47(90.4%)	1(1.9%)
C.	40(76.9%)	9(17.3%)	3(5.8%)	43(82.7%)	2(3.8%)	7(13.5%)
D.	6(11.5%)	44(84.6%)	2(3.8%)	1(1.9%)	48(92.3%)	3(5.8%)
E.	3(5.8%)	43(82.7%)	6(11.5%)	1(1.9%)	49(94.2%)	2(3.8%)
F.	15(28.8%)	35(67.3%)	2(3.8%)	2(3.8%)	49(94.2%)	1(1.9%)
G.	10(19.2%)	39(75%)	3(5.8%)	3(5.8%)	43(82.7%)	6(11.5%)
H.	43(82.7%)	9(17.3%)	0	26(50%)	25(48.1%)	1(1.9%)

\*The statements were:

- A. Doctors (Nurses) don't give you a chance to tell them exactly what is wrong.
- B. They don't take enough personal interest in you.
- C. They will tell you honestly when they don't know what is wrong with you.
- D. They like to prescribe medicine even when you don't need it.
- E. They don't like to get (another, a) doctor's opinion about a patient's trouble.
- F. Doctors (Nurses) don't tell you enough; they don't explain things.
- G. They tell you there's nothing much wrong when you know there is.
- H. Doctors (Nurses) make you wait too long when you try to see them in their office or clinic.

Source: Marian Pearsall, Medical Beliefs, Past Experience and the Use of Health Services in a Rural Appalachian Community, cited in Frontier Nursing Service, Inc., Primex-Family Nurse Training Program in Rural Areas, prepared for National Center for Health Services Research, Hyattsville, Md. (U.S. Department of Commerce National Technical Information Service, 1977), appendix H-55.



APPENDIX M

HEALTH INFORMATION ACQUIRED BY WOOTON

Source	Amount Learned			
	Quite a Bit	A Little	Nothing	DK
A. School	21(41.2%)	12(23.5%)	18(35.3%)	0
B. Family	21(41.2%)	17(33.3%)	12(23.5%)	1(1%)
C. Friends	10(19.6%)	18(35.3%)	22(43.1%)	1(1%)
D. Books and Pamphlets	21(41.2%)	15(29.4%)	15(29.4%)	0
E. Doctors	20(39.2%)	21(41.2%)	10(19.6%)	0
F. Nurses	22(43.1%)	17(33.3%)	12(23.5%)	0
G. County Health Dept.	6(11.8%)	13(25.5%)	32(62.7%)	0
H. Aides at Wooton Clinic	5(9.8%)	6(11.8%)	40(78.4%)	0
I. County Extension Office	6(11.8%)	6(11.8%)	38(74.5%)	0
J. Public Extension Office	3(5.9%)	3(5.9%)	45(88.2%)	0
K. Mental Health Assoc.	4(7.8%)	4(7.8%)	43(84.3%)	0
L. Other	11(21.6%)	0	40(78.4%)	0

Source: In 1973, Dr. Marian Pearsall, University of Kentucky Medical Center anthropologist, surveyed the Wooton community to obtain a health profile for planning and evaluation. The study has not yet been published, however, Dr. Pearsall did give FNS copies of 47 tables. The above is a copy of table 29.

## GLOSSARY

Family Nurse: A registered nurse who has successfully completed a formal training program preparing her to assume an expanded role in the provision of family health services. She is prepared to assume increased responsibilities in diagnosis and treatment; initiation of preventive health care measures; health education and health counseling, and provision of emergency services in the absence of a physician.

Granny Midwife: An untrained midwife.

Intrapartum: During birth.

Nurse-Midwife: A registered nurse who has successfully completed a recognized program of study and clinical experience leading to a certificate in nurse-midwifery. She is prepared to manage prenatal, intrapartum, postpartum care and family planning. She cares for the mother during pregnancy and stays with her in labor, providing continuous physical and emotional support. She evaluates progress and manages care of the newborn.

Prenatal: During pregnancy, before childbirth.

Postpartum: After childbirth.

Tide: Flood; i.e., spring tides or floods.

Working: Volunteer gathering of friends and neighbors to help with a special project such as raising a barn.

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## Interviews

- Frontier Nursing Service Oral History Project Interviews  
(There are 141 interviews in this collection. The only interviews listed are those referred to in the text of the dissertation.)
- Bager, Ford. Bowlington store owner and postmaster. Interviewed by Dale Deaton, 7 December 1978.
- Barnes, Nancy. Leslie County housewife, formerly maid at Bowlingtown FNS center. Interviewed by Linda Green, 12 September 1978.
- Biggerstaff, Mary Lewis. Daughter of Judge L. D. Lewis, prominent Leslie County lawyer and friend of Mary Breckinridge. Interviewed by Dale Deaton, 12 February 1979.
- Bowling, Lawrence. Maintenance man at Red Bird Center for many years, also member of Red Bird Center's committee. Interviewed by Dale Deaton, 10 August 1978.
- Bowling Frank. Born 1901, land surveyor. Interviewed by Dale Deaton, 31 July 1978.
- Browne, Helen E. Retired nurse-midwife and FNS director. Interviewed by Carol Crowe-Carraco, 26 March 1979.
- \_\_\_\_\_. Interviewed by Dale Deaton, 27 March 1979.
- Burke, Florence. Housewife, born 1923. Interviewed by Sadie Stidham, 4 April 1979.

Couch, Sophie. Leslie County housewife, born 1889. Interviewed by Dale Deaton, 22 August 1978.

Davidson, Roe. Retired miner. Interviewed by Dale Deaton, 20 July 1978.

Davis, Glenda. Member Red Bird Center committee. Interviewed by Carol Crowe-Carraco, 17 May 1978.

Gage, Margaret. Close personal friend of Mary Breckinridge. Interviewed by Dr. and Mrs. W. B. Rogers Beasley, 16 October 1978.

\_\_\_\_\_. Interviewed by Dale Deaton, 29 November 1979.

Gay, Alden. Member Brutus Center committee. First barn boy at the center. Interviewed by Linda Green, 1 September 1978.

Gay, Caroline. Daughter of Jasper Baker, who helped establish FNS Brutus Center. Interviewed by Dale Deaton, 16 January 1979.

Gay, Della. Housewife, born in 1904 in Clay County. Interviewed by Linda Green, 8 September 1978.

Hawkes, Mary Ann Quarles. Former FNS social worker, currently professor of psychology. Interviewed by Dale Deaton, 16 June 1979.

Hood, Leonard. Minister of Hyden Presbyterian Church. Interviewed by Effie Fugat, 2 February 1979.

Ireland, Kate. Former resident courier, current Chairwoman of FNS Board of Governors. Interviewed by Dale Deaton, 1 November 1979.

Isaacs, Gertrude. Retired FNS Education Director. Interviewed by Dale Deaton, 15 November 1978.

Knechtley, Lucile. Retired Leslie County teacher, former secretary to Mary Breckinridge. Interviewed by Dale Deaton, 9 July 1979.

Ledford, Georgia. Daughter of Flat Creek Center committee member. Interviewed by Carol Crowe-Carraco, 17 August 1978.

Lester, Betty. Retired FNS nurse-midwife, hospital director and social worker. Interviewed by Dale Deaton, 27 July 1978.

- Lewis, Agnes. Retired FNS executive secretary. Interviewed by Dale Deaton, 5 January 1979.
- Morgan, Cecil. Leslie County farmer and wood worker. Interviewed by Eliza Cope, 25 July 1979.
- Morgan, Ed. Born 1902, retired miner and farmer. Interviewed by Dale Deaton, 7 July 1978.
- Morgan, Walter. Born in Hyden in 1900, retired carpenter and farmer. Interviewed by Sadie Stidham, 11 April 1979.
- Rice, Charlie. Retired miner. Interviewed by Dale Deaton, 30 October 1978.
- Sheppard, Jessie. Born 1913, housewife. Interviewed by Linda Green, 22 August 1978.
- Slabough, Karen. Former FNS student and nurse-midwife now working in Africa. Interviewed by Dale Deaton, 9 July 1979.
- Stidham, Sadie. Retired teacher. Author of Trails into Cutshin Country, a book about Leslie County. Interviewed by Dale Deaton, 1 December 1978.
- Tolk, Jean. Retired missionary and nurse who worked in Leslie County in the 1920s. Interviewed by Dale Deaton, 1 November 1978.
- Young, Dan. Retired miner born 1897. Interviewed by Dale Deaton, 28 August 1978.
- Young, Tempe. Wife of Dan Young, born 1905. Interviewed by Linda Green, 29 August 1979.
- Witt, Annie. Housewife, born 1914. Interviewed by Sadie Stidham, 30 April 1979.
- Alice Lloyd College Oral History Project.
- Cornett, Martha. Leslie County public health nurse from about 1940 to present. Interviewed by Connie Sue Napier, 18 June 1979.



Author Interviews

(Note: The author interviewed several nurse-midwives and Hyden businesswomen who would prefer not to have their names used.)

- Brewer, Mary. Retired teacher and author of two books on Leslie County, Of Bolder Men and Rugged Trail to Appalachia. Interviewed, 20 December 1979.
- Browning, Ann. Chief of FNS billing department. Interviewed, 28 March 1980.
- Cornett, Martha. Leslie County public health nurse. Interviewed 3 December 1979.
- Elmore, Peggy. Former FNS administrative assistant and secretary to Mary Breckinridge. Recently deceased. These were a series of informal interviews.
- Fugat, Rufus. Leslie County extension agent. Interviewed 10 March 1980.
- Isaacs, Gertrude. Retired FNS education director. Interviewed 4 January 1980.
- Knechtley, Lucile. Retired Leslie County teacher and former secretary to Mary Breckinridge. Interviewed, 12 April 1972.
- Moore, Barbara. FNS volunteer who helped make a feasibility survey of Wooton area. Interviewed 16 May 1973.
- Roberts, Lottie. Widow. Her husband formerly owned the Leslie County Telephone Company which she helped operate. Interviewed, 5 December 1979.

Miscellaneous

- Cornett, Hobert. Retired FNS Wendover maintenance foreman. Interviewed by volunteer courier, Summer 1974. Author has a portion of the tape transcript in her files.

VITA

Nancy Dammann

PERSONAL: Born August 5, 1919, Chicago, Illinois.  
Marital Status: Single.

EDUCATION: Ph.D. Candidate, Walden University, Naples,  
Florida, 1979-80  
Writing Center, Instituto Allende, San Miguel  
de Allende, Gto., Mexico, two semesters 1975  
and 1976  
Audio-Visual Center, University of Indiana,  
Bloomington, Indiana, six months graduate work  
on Agency of International Development (AID)  
training grant, 1958-59  
M.S., Medill School of Journalism, Northwestern  
University, Evanston, Illinois, 1948  
School of Social Service Administration, University  
of Chicago, Chicago, Illinois, six months graduate  
work, 1941-42  
A.B., Smith College, Northampton, Massachusetts,  
1941

EXPERIENCE:

1976-79 Owner/Manager, NANCY'S NOOK, BOOKS & THINGS,  
Hyden, Kentucky  
1973-75 Fund Raiser/Health Educator/Audio Visual Specialist,  
FRONTIER NURSING SERVICE, Wendover, Kentucky  
1955-72 U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT (AID)  
Overseas Assignments:  
1970-72 Communications Media Advisor (family  
planning), Phillipines  
1966-69 Communications Media Advisor (family  
planning), Jamaica  
1962-66 Communications Media Advisor, Thailand  
1959-61 Communications Media Advisor (malaria),  
Indonesia  
1955-58 Audio-Visual Officer, Indonesia  
1951-55 U.S. INFORMATION AGENCY  
Assignments:  
1953-55 Information Specialist, Washington, D.C.  
1952-53 Cultural Affairs Officer, Nepal  
1951-52 Assistant Information Officer, Madras,  
India  
1948-50 Wire Editor and Reporter, BATON ROUGE MORNING ADVOCATE,  
Baton Rouge, Louisiana  
1942-45 WAC, Australia, New Guinea, and the Phillipines

PUBLICATIONS: While with AID wrote countless pamphlets, training manuals and publicity articles about malaria, community development and family planning. Communications was my primary interest. Following is a partial list of materials which I wrote about communications and communications research while with AID:

"Know Your Audience," Foreign Service Journal, May 1967, p. 32.

"Thai Villagers and Communications--A Research Project," The Multiplier (an AID publication), June 1944, p.4.

The Use of Audio-Visual Aids in Rural Programs, U.S. Operations Mission to Thailand, 1963.

Some Characteristics and Attitudes of Typical Clinic Patients, Bureau of Health Education, Kingston, Jamaica, 1968.