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■ Also in this issue: "An Ethical Theory of Care for Veterans," by Margaret Oberdorf ■

SISTER NURSES OF THE CIVIL WAR

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Catholic nuns were one of the most significant forces for good during the horrific struggle of the Civil War (1861–1865). Through their sacrifices, many Americans began to overcome their prejudice against Catholicism and see it in a new light. The story of their heroism and the gifts of care that they brought to the sick and injured during the war deserves far wider recognition than it has received.

When the Civil War began, few officials fully understood the devastation that "modern" war would wreak. Both the Union and the Confederacy expected swift victory because of their excellent leadership and their arsenals of killing machines. Few had calculated the extreme human cost that such a war would bring. Only as they witnessed the carnage did they begin to comprehend the war's horrific effect on the nation.

Overwhelmed Medical Facilities

Both sides recognized the need for trained female nurses and took steps to address the impending medical crisis. The federal government organized a special medical section of the War Department and named Dorothea Dix superintendent of army nurses. Despite her attempts to create a corps, it soon became clear that she was not adequately prepared for the task of directing others in the administration of nursing care. Inexperienced in nursing and apparently reluctant to follow the groundbreaking medical reforms begun by Florence Nightingale, Dix spent her time at organization and management. As the war progressed, her efforts to prepare nurses foundered badly. Dix's worst

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fault was her unwillingness to recruit the many sisters who were both available and experienced.¹

As conditions on the battlefields worsened, statesmen, army officials, and physicians began to consider the option. Aware of the impressive accomplishments of women religious in the twenty-eight Catholic hospitals and health care facilities they operated in the United States, leaders in both the Union and the Confederacy began applying to Catholic bishops and religious superiors for help. Secretary of War Edwin Stanton was among the first to request the aid of sisters—a practice he would continue throughout the war. Other political and military leaders followed his example. Knowing the difference nuns could make, Union Brigadier General John Rathbone asked Archbishop John Hughes of New York to send at least one Sister of Mercy: "There are now over 100 men in our hospital and the number of nurses employed is quite insufficient. . . . The superiority of the Sisters of Charity . . . is known wherever the names of Florence Nightingale and the Sisters [of Mercy] who accompanied her to the Crimea have been repeated."² His plea was granted, and similar requests repeatedly met with positive results throughout the war.

Roll Call of Religious Sisters

Abraham Lincoln, who referred to the sisters as "Angels of Mercy" and "Angels of Charity," clearly recognized firsthand the nuns' contributions to the war effort. According to Colette O'Connor, a Mercy Sister who headed Douglas Hospital near the White House, relations with the President were respectful and cordial from the beginning of the war. In the very first days of the war, she walked straight from her hospital to the White House after realizing that one vendor required the confirmation of the President before providing medical supplies. Lincoln immediately sent back the order: "On application of the Sisters of Mercy in charge of the military hospital in Washington furnish such provisions as they desire to purchase, and charge same to the War Department."³

Ironically, the very nuns who were routinely belittled by their Protestant detractors were called on to relieve the suffering of those same citizens. In fact, as the fighting grew more fierce, nursing sisters became even more necessary. Soon 615 religious sisters made up one-fifth of the entire women's nursing corps. For their warm-hearted, competent service, nuns would earn the respect of hundreds of thousands of Americans. Their gift of healing not only saved

lives but for generations to come changed the hearts of those who were once prejudiced against them.⁴

Twenty-one congregations of women religious ministered to both the Union and the Confederacy. The largest contingent came from the Daughters of Charity of St. Vincent de Paul in Emmitsburg, Maryland, who sent at least 230 nurses to thirty different geographic areas. Most of this congregation was well trained in nursing. In fact, Florence Nightingale acknowledged that she had learned about germ theory as well as the need for sanitary conditions, good food, and fresh air from the French Daughters. In addition, forty-nine Sisters of Charity from Cincinnati and New York also served.⁵

One hundred ten Sisters of Mercy became the second largest congregation of wartime nurses. Several of them had actually learned their skills directly from Florence Nightingale during the Crimean War.⁶ For that reason, these sisters were well prepared to take charge of the first army hospital in the District of Columbia. Later, others ran key hospitals in Chicago and Pittsburgh. The third largest contingent was sent by the Holy Cross Sisters in South Bend, Indiana. Lacking specific medical training, they nevertheless volunteered wherever needed, gaining fame for the excellent care they provided at Mound City Hospital in Illinois and on the USS Red Rover, one of the renowned floating hospital ships.⁷ In addition, aid was provided by Sisters of Providence, Sisters of St. Joseph, Franciscan Sisters, Sisters of Our Lady of Mercy, Sisters of Charity of Nazareth, Dominicans, Ursuline Sisters, and Sisters of Our Lady of Mt. Carmel. No matter the order, the sisters' willingness to "roll up the clean sleeves" they deliberately wore over their otherwise soiled habits proved their pure efforts to maximize healing. To observers, such professional, simple care remained a source of continued amazement.⁸

Public Memories of Their Service

Whatever the service provided or wherever called on, the sisters' actions were eminently clear. While some waited to be summoned by Union or Confederate leaders, others simply rushed to help as soon as they learned that battles were being waged. If they were living in an area under siege, they stayed, prepared to help. In still other cases, nuns chose to travel with the wounded, often living for months aboard transport ships that plied the waters of the Mississippi and its tributaries, bringing their sick charges to port city hospitals or returning them to camp. Sisters even volunteered to work in tent hospitals that were hastily constructed to care for the overflow of wounded.

While observers watched in amazement, the nuns quietly took charge and did whatever was asked of them. Sometimes this meant feeding the weak, dressing wounds, or simply bringing calm to desperate soldiers. Whether the wounded were Catholic or not, Union or Confederate, the nuns remained focused on their vocational calling. For their part, patients and observers began to realize the nuns' good intentions.⁹

Postwar stories confirm the sisters' amazing record of service. For example, one Daughter of Charity described the transfer of wounded from Gettysburg to Philadelphia: "Two thousand more (wounded soldiers arrived) which will make nearly 5000 patients. . . . By the 8th of July, there were 4 rows of beds . . . in each ward of the hospital with the two rows in the center pushed together."¹⁰ All this was executed without fanfare. At another site, a Sister of Charity from Cincinnati reported how their service was both practical and spiritual: "Our duties [were] fatiguing and often disgusting to flesh and blood, but we were amply repaid by conversions, repentances, and the removal to a great extent of certain prejudices to our Holy Faith."¹¹

In a speech delivered decades after the war, Mary Livermore, a Protestant member of the US Sanitary Commission, reflected on the impression that the sisters made: "I can never forget my experience during the War of the Rebellion. Never did I meet these Catholic sisters in hospitals, on transports, or hospital steamers without observing their devotion, faithfulness, and unobtrusiveness. They . . . shirked no duty, sought no easy place, bred no mischiefs. Sick and wounded men watched for their entrance into the wards at morning, and looked a regretful farewell when they departed at night. . . . To the end they were deeply revered."¹² George Barton, the first historian to record the sisters' story, rendered his thoughts in another way: "Happy was the soldier who, wounded and bleeding, had her near him to whisper words of consolation and courage. Her person was revered by Blue and Gray, Protestant and Catholic alike, and the love for her became so strong that the title of the 'Florence Nightingale' of America was conferred upon her, and soon her name became a household word in every section of the North and South."¹³

Such observations gave rise to indelible memories. Who could forget those bright-eyed, beautiful young women working in gruesome settings where they dressed wounds or simply washed mud-coated bodies? Years later, many soldiers remembered how the nuns baptized the dying, listened to troubled hearts, and wrote letters dictated by dying soldiers. They noticed the nuns keeping vigil by the bedsides of the dying, holding the hands of those in their last agony, washing the bodies of the deceased, preparing coffins, and kneeling in prayer before funeral biers.

Influence on American Culture

Without words, the sisters had proven what their faith was about. Their daily toil showed the selflessness of the devotion God asked of them: to care for his suffering people at war. The paradox that good comes out of evil came into sharper focus as each story of the sister nurses was told and retold. The sisters did help win the war, but they also transformed cultural attitudes toward their Church. Their heroic actions were a tremendous force for good during the Civil War and a great gift to the Catholic Church in America.

In 1920, Congress commissioned the Civil War Nurses Memorial, which stands directly across from St. Matthew's

Cathedral in Washington, DC. A simple bronze bas-relief, it is a fitting reminder of the blessings these nuns brought to the nation. Above a group of nuns representing the many congregations that sent sisters to serve in the Civil War is carved the inscription, "They comforted the dying, nursed the wounded, carried hope to the imprisoned, gave in his name a drink of water to the thirsty." Clearly these words capture the purpose of the nuns of the Civil War and the indelible imprint that their actions have made on Americans to this very day.¹⁴

Endnotes

1. Mary Denis Maher, *To Bind Up the Wounds: Catholic Sister Nurses in the U.S. Civil War* (Baton Rouge, LA: Louisiana State University Press, 1989), 52–64. See also Judith Metz, "In Times of War," in *Pioneer Healers: The History of Women Religious in American Health Care*, ed. Ursula Steptis and Dolores Liptak (New York: Crossroad, 1989), 39–69; and George C. Stewart Jr., *Marvels of Charity: History of American Sisters and Nuns* (Huntington, IN: Our Sunday Visitor, 1994), 187. Dix had volunteered for this service.
2. Maher, *To Bind Up the Wounds*, 71.
3. Metz, "In Times of War," 43. Many authors suggest that Lincoln was comfortable with using such appellations for sisters since he

admitted that he could not tell the difference between the habits of different orders.

4. Maher, *To Bind Up the Wounds*, 69–71. See also Stewart, *Marvels of Charity*, 193.
5. Maher, *To Bind Up the Wounds*, 69.
6. *Ibid.*, 70; and Dolores Liptak, "Full of Grace: Another Look at the 19th-Century Nun," *Review for Religious* 55.6 (November–December 1996): 635. Sister of Mercy numbers have been consolidated in Liptak because their original foundress was the same.
7. Maher, *To Bind Up the Wounds*, 69–70.
8. *Ibid.*, 70–71.
9. Ellen Ryan Jolly, *Nuns of the Battlefield*, 4th ed. (Providence, RI: Providence Visitor Press, 1930), 7.
10. *Ibid.*, 104.
11. Liptak, "Full of Grace," 635.
12. Maher, *To Bind Up the Wounds*, 39.
13. George Barton, *Angels of the Battlefield: A History of the Labors of the Catholic Sisterhoods in the Late Civil War* (Philadelphia: Catholic Art Publishing, 1897; reprint, Nine Choirs Press, 2009).
14. See letter from Ellen Jolly to Sister Margaret O'Keefe, 1920, in Betty Ann McNeil, *Balm of Hope: Charity Afire Impels Daughters of Charity to Civil War Nursing* (Chicago: DePaul University Vincentian Studies Institute, 2015), 498–499.

AN ETHICAL THEORY FOR THE CARE OF VETERANS

Margaret Oberdorf



The US Department of Veterans Affairs is charged with the care of our nation's veterans. Given that the VA's patients and employees are as diverse as the nation itself, an overarching ethical theory is needed to inform its bioethical decision making and guide it as an organization. Among the major ethical theories, natural law is the most consistent with the unique mission and moral obligation of the VA. Natural law provides a set of objective and universal principles which are accessible to veterans and employees alike. It would clarify acute bioethics issues at the individual level and also serve as a basis for sound organizational ethics. While implementation might prove challenging, ultimately this theory is the only rational approach for an organization like the VA, because its standards are equally accessible to all.

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Natural Law Theory

Natural law theory holds that morality can be ascertained in nature through the use of reason. Nature draws our attention toward what is good and informs us about what is evil. As eloquently stated by Lewis Vaughn, there is a "way things are."¹ As essentially rational beings, humans naturally move toward those things that are good and avoid those things that are evil.

Natural law espouses objective rights and wrongs in accordance with what we can reasonably ascertain from the world around us. Who would argue that murder is not wrong? How do we know this truth? It is knowable through our grasp of the natural world and its tendency to seek the good. The late Robert Bork defines *natural law* more simply: "'Natural law.' The words have an attractive, even a seductive, resonance. They refer to principles about ultimate right and wrong that transcend particular nations and cultures and are true for all people at all times."²

Natural law is objective. As such, there are absolute rights and wrongs. Just as murder is an absolute evil, curing those who are ill is an absolute good. While they do not provide specific guidance on every moral issue, the tenets of natural law have widespread applicability and specifically reject the emotive aspects of moral relativism.

Why Natural Law?

In the Declaration of Independence, Thomas Jefferson writes of "the separate and equal station to which the Laws of Nature and of Nature's God entitle" us. He holds its "truths to be self-evident." As a deist, Jefferson acknowledges and endorses natural law. Given that natural law reasoning supports our country's very existence, it is logically consistent to use the same when treating our nation's

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veterans. There is, in fact, a moral elegance in doing so, because their actions in serving our country guarantee its continued existence.

Additionally, this objective and universal theory is best suited to our goal of treating all equally—yet another principle on which our country was founded. Without reference to an objective moral standard, individual rights are subject to the vagaries of particular situations. In discussing natural law, Robert George warns of the dangers of a subjective approach to ethics: “Moral rights, according to conventionalists and historicists, exist only in the sense that certain people, or peoples, happen to believe—as a contingent matter of fact, that is, subjectively—that rights exist and are willing to honor them. Where people, or peoples, do not happen to believe in their existence, rights simply do not exist.”³ Our veterans need to feel confident that their rights will be protected using objective standards, not subjected to the whims of a particular provider or, even worse, a government lawyer who is called on to opine on their situation. Their sacrifices demand that confidence.

The Unique Mission of the VA

In determining what ethical theory should serve as the basis for the VA health care system, we should first look to what the VA is not. It is not a profit-driven organization. While some metrics are useful in measuring performance, the VA cannot and should not use them to determine the best course of action when confronted with complicated bioethical issues. Instead, the VA is driven by a moral obligation to its patients. Therefore, any ethical theory grounded in utilitarian notions of cost should be rejected out of hand.⁴

Natural law would not only assist in the thorny micro issues regarding individual patients but encourage a culture of ethics in the organization. Following St. Thomas Aquinas, Philip Boyle points to natural law theory as a useful tool in

supporting organizational ethics, which are grounded in the fundamental human moral obligation that “good is to be done and promoted, and evil is to be avoided.”⁵

Boyle acknowledges that few organizations would model their institutional ethics on Aquinas, but he nonetheless finds Aquinas’s insights valuable: “From an organizational perspective, however, his formulation is noteworthy because it highlights the need to *support* the good. Good is to be not only done but *promoted*.”⁶ Using this theory would bolster veterans’ confidence in the VA while simultaneously encouraging its employees to do what is right by pursuing the good in all their actions.

Admittedly, the promotion and implementation of this theory would be challenging, as our society has increasingly moved toward moral relativism. Additionally, given the diversity of its patients and employees, the VA would have to both avoid giving the false impression that this theory is based on supernatural teachings and demonstrate that natural law theory can be understood by one’s reason without appealing to sectarian religious doctrines.

Notes

1. Lewis Vaughn, *Bioethics: Principles, Issues and Cases*, 3rd ed. (Oxford: Oxford University Press, 2016), 40.
2. Robert H. Bork, “Natural Law and the Constitution,” *First Things*, March 1992, <https://www.firstthings.com/>.
3. Robert P. George, *The Clash of Orthodoxies: Law, Religion and Morality in Crisis* (Wilmington, DE: Intercollegiate Studies Institute, 2002), 153.
4. This is not to say that we should not be cost conscious. As stewards of the taxpayer’s money, we are required to utilize resources wisely.
5. Thomas Aquinas, *Summa theologiae* I-II 94.2, quoted in Philip J. Boyle et al., *Organizational Ethics in Health Care: Principles, Cases, and Practical Solutions* (San Francisco: Jossey-Bass, 2001), 52. See also Joseph J. Piccione, “Organizational Ethics and Catholic Health Care,” in *Catholic Health Care Ethics: A Manual for Practitioners*, 2nd ed., ed. Edward J. Furton, Peter J. Cataldo, and Albert S. Moraczewski (Philadelphia: National Catholic Bioethics Center, 2009), 294.
6. Boyle et al., *Organizational Ethics*, 52, original emphasis.

