

Pioneer in Florida Public Health Nursing: The Work of Joyce Ely, RN

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Abstract

Victoria Joyce Ely was a prominent figure in Florida public health during the first half of the 20th century. She was born in Illinois and graduated from St. Luke's Hospital School for Nurses (St. Louis, MO) in 1915. During her early career, she spent 23 months with the Washington University Base Hospital in France as a member of the Army Nurse Corps in World War I. Ely came to Florida in 1923 to work as a company nurse in the cypress lumber industry in Perry, Florida. Infectious diseases such as yellow fever were endemic. Ely worked to improve sanitation and teach basic health principles to workers and their families. In 1930, Ely took a position at the State Board of Health. She was asked to oversee the many untrained "granny" midwives delivering babies in the state. In 1931, the state legislature passed the Midwifery Act in an effort to control the safety and sanitation of childbirth. She attended nurse midwifery training and then traveled the state for several years, offering midwife "institutes" or short training programs to teach midwives basic skills such as cleanliness, infant weights, and registration of births. Ely finished her career in Ruskin, Florida, where she served with the Hillsborough County Health Department. She retired in Ruskin, where she died in 1979. The county health center in that community is named for her. In 2002, Ely was inducted into the Florida Women's Hall of Fame. Ely's career, including her pioneering work against infectious disease amidst limited resources serves as an inspiration to today's healthcare providers. Florida Public Health Review, 2005; 2: 17-22

The Beginning Education and the War Years

Victoria Joyce Ely was born in Flora, Illinois on September 12, 1889. She was the first child and only daughter of Harry S. and Cora Lydia Hoff Ely. Ely's father worked as a mail agent. The family eventually included a younger brother, Harold. After graduating from high school in Carrollton, Illinois, Ely worked as a bookkeeper and stenographer until age 22, when she began professional preparation for her nursing diploma at St. Luke's Hospital School for Nurses in St. Louis, Missouri.

Ely received her nursing diploma in August, 1915. After graduation, she accepted a position at St. Luke's Hospital. She worked in a variety of positions, including supervisor of the private divisions and wards, acting assistant superintendent of nurses, and nursing instructor (Florida State Board of Examiners of Nurses, 1923).

Ely also became a reserve nurse in the Army Nurse Corps. On April 6, 1917, President Woodrow Wilson signed the resolution that brought the United States into World War I. One month later, Ely was assigned to active duty with the Washington University Base Hospital, Unit 21. She was stationed at a field hospital in Rouen, France (War Department, 1919). The hundreds of nurses who were mobilized for the war effort were kept busy caring for wounded and dying soldiers. Before the war ended, the United States had mobilized 4.7 million soldiers. Over 116,000 suffered fatal injuries or illnesses and an additional 204,000 were wounded. For her services during the war effort, she received a salary of thirty dollars a month.

She stayed overseas on active duty for several months after the war ended, finally returning in June 1919. After returning from Europe, Ely attended graduate school, completing three semesters of postgraduate training at Teacher's College, Columbia University, in New York. Her major was "Teaching in Schools of Nursing" (Florida State Board of Examiners of Nurses, 1923). Subsequently, she worked for a year as an instructor in a nursing program in Chicago.

Ely also became affiliated with the American Red Cross, sometime around the conclusion of her war service. The downsizing of the Army Nurse Corps at the end of the war resulted in nurses entering the job market in large numbers. Often, nurses who had been part of the war effort found positions through the American Red Cross as organizations seeking nurses sought its assistance in locating a nurse willing to travel to a new or somewhat remote location. This process may have been how, in 1923, Ely was offered a position as a company nurse at a mill town in rural north Florida.

Early Florida Years

Ely accepted a position with a cypress lumber company near Perry, Florida, a small town located about 40 miles east of Tallahassee in the Florida panhandle. In the early 1920s, almost everyone in Perry worked for one of two large cypress mills. The mill companies created their own communities, with stores, schools, and health care available to the loggers and their families.

The development of the cypress mills followed on the heels of the introduction of railroads in Florida. The area around Perry housed what

appeared to many people at that time to be a limitless supply of virgin timber. Mill towns sprang up and their inhabitants needed convenient access to services, including health care for young and growing families.

The subtropical and humid Florida climate presented some challenging infectious disease problems. Epidemics of yellow fever had created the impetus for establishing the state board of health in 1889. Following years of mosquito control efforts, this disease was eliminated from the state in 1918, a few years before Ely arrived (Mulla, 1999). Smallpox also was finally being controlled after vaccinations were more accepted following a 1912 epidemic. However, smallpox cases continued to be reported with some frequency through the 1930s. Typhoid and malaria also raised public health alarms during this same era.

Hookworm also was a severe problem in Florida during this period. The lack of sanitary latrines or privies, the warm climate and inability of some families to afford shoes for their children led to an extensive number of cases of this debilitating illness.

The increasing number of tuberculosis cases at the beginning of the 20th century encouraged the state to employ the first public health nurses. These nurses traveled the state, located patients with active disease, and taught families the basics of care and isolation. Although only a handful of nurses were employed, the tuberculosis problem helped give birth to public health nursing in Florida (Boyles, 1965, Wennlund, 1992).

Floridians also worked during the 1920s to meet the demands of the first building boom, brought about by the strong economic times. Tourists poured into the state via the new railroads. Despite its economic strengths and progress, Florida continued to struggle, in part due to institutionalized segregation of workers by racial and ethnic groups. Black workers lived in separate communities from white workers. Moreover, the Ku Klux Klan had a strong presence in Florida in the 1920s and 1930s (Anderson, Austin, & Arcuri, 1998). The burning of Rosewood, near a sawmill town in nearby Levy County, occurred in 1923, the year Ely arrived.

When Ely came to Perry, the only physician in town was the company doctor, who had no time to teach employees and their families about the basics of hygiene and the prevention of infectious diseases. Ely arrived to find impoverished families and poor sanitation, but a community that knew how to express its appreciation at finally obtaining a much-needed nurse. Ely arrived by train and was greeted at the station by the president of the cypress mill, the mayor, and dozens of citizens. Flags flew and a band

played to celebrate her arrival. She was given a *Model A Ford*, a house, and a maid (Personal conversation, Dr. E. Charlton Prather, August 12, 1999). Then Ely got to work.

Ely educated families on such topics as wearing shoes to prevent the spread of disease. She insisted that sanitary privies be built. Ely worked with the state health officer and community officials. In three years the incidence of hookworm was greatly reduced and families had received basic education on cleanliness.

Ely's role in Perry evolved into further Red Cross work around the state with projects involving similar disease control measures during malaria and typhoid outbreaks. Ely remained with the Red Cross until 1930, when she accepted a position with the state health office that would result in an even greater impact of her work on the health of Floridians.

Interestingly, just a few years after Ely left Perry to continue her Red Cross duties, the mill towns went into decline. It had not occurred to the large landowners whose trees fed the mills that the supply of trees was not infinite. They failed to appreciate the speed with which all of the trees were being harvested and the concept of reforestation had not yet been popularized. By the late 1930s, the industry was out of business, and that area of the state went through an economic slump that lasted for years due to the failure to replant harvested timbers.

State Health Office Years: The "Granny Midwives"

In 1921, the Federal Maternity and Infancy Act, also known as the Sheppard-Towner Act, was passed by Congress. This national grant program established matching funds for states providing maternal and child health services. Maternity services throughout Florida were limited, and health care could be characterized in general as having a lack of access by most rural residents as well as other barriers, including racial and ethnic segregation. Life expectancy for state residents was 55.3 years. The maternal death rate was 10 per 1000 births, and the infant mortality rate was over 100 per 1000 live births (Florida Department of Health, 1997).

A 1921 survey revealed that more than 3000 women worked as midwives in Florida (State Board of Health, 1925). Often, the only training these midwives had received was through being present when births occurred in their community. A midwife was often called into service by a needy family because she was the only experienced person available to assist with a birth. The label "granny midwife" reflected the informal training common among midwives of this era. Nationally, there was growing pressure during the 1920s to control

untrained healthcare providers as well as those educated in nontraditional methods of care. Following World War I, physicians' incomes and stature grew, and the American Medical Association took an active role in persuading the public to accept physicians as the holders of knowledge as it related to health and disease (Starr, 1983).

The Sheppard-Towner Act created a growing awareness at the state level of the conditions under which children were being born. There was no midwife licensure requirement at that time from the state legislature, so the state Board of Health began requiring a "certificate of fitness" of midwives in 1923. This certification essentially meant screening midwives for communicable diseases. When the certificate of fitness requirement went into effect, about 500 midwives withdrew from practice (Boyles, 1965). The state employed a handful of public health nurses during this period, and the nurses were involved in informal, brief classes to try to assist the granny midwives in providing a safe birth experience. This modest training was the extent of education for most Florida midwives during the 1920s.

Florida's maternal and infant mortality statistics were alarming. In the early 1930s, the national maternal mortality rate was 6.7 per 1000 live births. In Florida, the rate was 10.2 per 1000, similar to other southern states, but far above those in New England and the Mid-Atlantic states. (U.S. Bureau of the Census, 1943). The infant mortality rate was 61 per 1000 live births (State Board of Health, 1933). By contrast, more current Florida rates attained by the 1980s included maternal deaths at fewer than .08 per 1000 births, with an infant mortality rate of 7.4/ per 1000 live births (Florida Department of Health, 1999).

Nationally, maternal deaths were due to both unskilled birth attendants, and questionable medical interventions such as induced labor, use of forceps, episiotomy, and cesarean delivery, each increasing in popularity among physicians. About 40% of maternal deaths were due to sepsis (as a result of the above factors or induced abortions), and the remainder were due to hemorrhage or toxemia (Louden, 1992).

In 1930, midwife attendance at births was about 15% nationally, but in Florida, midwives attended 30% of births, and 50% of black births (Reed, 1932). Florida implemented statewide educational programs to address physicians, who were found to need additional education in obstetrics, and midwives, who were acknowledged as a "local necessity" at the time (Blachly, 1931).

Concern about the midwife "problem" culminated in the passage of the Midwife Practice

Act by the Florida State Legislature in 1931 (State Board of Health, 1933). This act required licensure annually, and specified that the midwife undergo formal training with a physician or in a midwife school. Each midwife also was required to be at least 21 years of age, literate, and "clean" (Florida State Board of Health, 1931). By 1931, the number of practicing midwives had already dropped to less than 1,200 (Hanson & Blachly, 1932).

Ely was hired by the State Board of Health to expand and supervise the midwifery training program following the passage of the Midwifery Practice Act. Ely attended the Lobenstine Midwifery School in New York from January to July of 1933 on a Rockefeller Foundation fellowship. Ely was the first licensed nurse midwife in Florida (Wennlund, 1992). Following her midwifery training, Ely pioneered a series of midwifery seminars around the state. These seminars consisted of one to two weeks of formal training in the basics of hygienic births, safe birthing techniques, and birth registrations.

The midwife institutes officially began in 1933 and included a focus on the education of the midwives serving racial and ethnic minority populations. However, other women were invited. Ely, her staff, and guest speakers served as instructors. A letter from Ely advertising an upcoming institute, pointed out that the institutes were of interest "not only to the colored midwives but to all nurses and women interested in the better care of mothers and babies" (Ely, 1933).

During 1934, three institutes were conducted in Tampa, St. Augustine, and Tallahassee. The Tallahassee institute was conducted at Florida Agricultural and Mechanical College, where Ely noted that: "President J.R.E. Lee, because of his great desire to better the health conditions of his race, again opened the doors of his classrooms... so that the midwives would have the advantage of up-to-date equipment and facilities" (State Board of Health, 1935). However, many midwives were still financially challenged to attend the institute. Three-fourths of the midwives paid their own way. Women's clubs, county commissioners, and other private individuals paid the expenses of the remaining midwives (State Board of Health, 1935).

During the Tallahassee institute of that year, a total of 332 midwives received training including maintenance of the midwife bag, home nursing, prenatal care, conduct of deliveries, postnatal care, and infant care. It was noted that improvements in midwife hygiene were already occurring, with 96% of bags found to be clean and 25% fully stocked on inspection. Bag inspections remained a fundamental component of midwife education. Ely proudly noted at the conclusion of the 1934 institutes that "not one

midwife has delivered a woman on the floor during the past year, a practice which was rather common in the past” (State Board of Health, 1935).

Midwives were classed for licensing purposes according to their training. Class A midwives included those who had attended a formal educational program prior to practice. Class B included midwives who had apprenticed with a physician without other formal training. Class C midwives included the vast majority of midwives in Florida – those with extensive, unsupervised experience. During 1935, Ely added institutes for formally trained midwives to provide continuing education (State Board of Health, 1935). Statistics compiled by Ely during this time reflect a total of 718 midwives licensed for 1935. During that year, seven midwives had their licenses revoked, and ten midwives were being treated for syphilis, including three midwives who were suspended for this problem. Seventeen midwives voluntarily returned their licenses and resigned.

Meeting the basic needs of patients suffering extreme economic deprivation continued to be a challenge. Ruth Mettinger, Director of Nursing for the State Board of Health, described a method of constructing an infant bed for a total cost of 45 cents, using moss or cattails for the mattress. Mettinger (1937) noted that Florida led every state but one in its maternal death rate. Many mothers died in childbirth or became invalids because of their lack of knowledge of hygiene. Mettinger concluded, “Cattle are dipped for ticks, hogs are treated for cholera, what is your county doing to reduce the maternal and infant death rate?” The public health nurse teaching role was integral to improving Florida’s statistics (Mettinger, 1937)

By 1940, with the increasing medicalization of childbirth, the midwife count in Florida had dropped to 620 licensed midwives (State Board of Health, 1940). However, through the 1950s, public health “nurse consultants” continued to provide education to midwives around the state (State Board of Health, 1957). By the late 1950s, 93% of all births occurred in hospitals, with virtually all of these attended by physicians (State Board of Health, 1959).

Ely remained with the state health office, heading the midwifery program for about 15 years, finally leaving in 1944 to accept a position with a county health department. Even after ending her position with the state health office, Ely remained involved with the care of economically deprived mothers and infants, and was able to observe the continued decline in maternal and infant mortality rates in Florida. Ely had played a major part in initiating a move to safer and more professional standards for maternal and infant care in Florida.

The Ruskin Years: Recognition and Retirement

In 1944, Joyce Ely left her employment at the state health office and accepted a position with the Hillsborough County Health Department in Ruskin, Florida. She moved to Ruskin to be with her mother, who had retired there and built a home several years earlier (Personal communication with Nell Gose, 1997).

At the time of Ely’s arrival, the Tampa City Health Department had just been abolished and all of its assets turned over to the Hillsborough County Health Department, which had been established a few years earlier in 1936 (Hillsborough County Health Department, 1968). Public health forces were scattered and health care was not easily available to residents in the more remote areas of the county. Ely was hired to establish a public health presence in Ruskin, a farming community located south of Tampa.

She established a clinic in Ruskin as the sole healthcare provider in the community. At the time, there was no physician residing and working in the area. Ely’s first clinic consisted of a room set aside for her in the Chamber of Commerce building. The room had no running water, and Ely took home her immunization needles at night to boil and sharpen them for re-use the next day. For other needs, she brought water in a bucket from the nearest faucet (Hawes, 1956).

Many of the residents of Ruskin were farm workers living in remote areas. There were about 50 migrant camps located in the Ruskin area. The camps housed both single men and young, growing families (Personal conversation with Marilyn Marshall, August, 1998). Camps often consisted of clusters of crude wood houses for the field workers. Many of these homes had dirt floors and no indoor plumbing. Each camp housed between 50 and 200 people. The closest hospital was 30 miles away in Tampa.

Ely’s role as a public health nurse included issuing “health cards” to residents applying for jobs in the area. Issuance of a health card included a heart and blood pressure check as well as tests for syphilis and gonorrhea. These cards were required for many positions, including those involved with food handling. Other major responsibilities were immunizations and home visits, including attending home births in the area. She continued to supervise the midwives who remained an important presence in that part of the county. Ely also carried out her former role by providing midwife education and bag inspections (Personal conversation with Mary Jane Olsen, September 16, 1997). She also issued

medications to patients from a limited supply provided by the county or donations.

Ely and her counterparts were vigilant about locating cases of tuberculosis and hookworm. In 1953, the W. T. Edwards Tuberculosis Hospital opened in Tampa. Migrant workers were at high risk for acquiring this disease due to their living conditions, and Ely helped many patients find treatment with tuberculosis doctors in Tampa.

Hookworm was an ongoing problem, particularly in rural areas. The public health nurses collected stool specimens from patients suspected of having this infestation. Specimens were placed in glass bottles and sent to the state laboratory in Jacksonville for analysis. The only available method of transportation consisted of the buses with routes leading to Jacksonville, so the nurses used the buses to transport their specimens. Unfortunately, delays in transporting specimens sometimes caused the sealed bottles to burst in the Florida heat. Nurses encountered difficulties in getting bus drivers to accept their specimens.

Despite these challenges, Ely was dedicated to her community and was widely known as a professional who was always available to meet the needs of her patients. In 1953, funds became available to construct a new county health department facility in Ruskin. In 1954, the facility was dedicated and named the Joyce Ely Health Center. A county commissioner involved in funding the facility remarked that the new clinic was promoted out of respect for the job Ely was doing for the community (Hawes, 1956). Ely was 65 years old by this time and her health began to fail. A chronic migraine sufferer, she had also developed arthritis and hypertension in later life.

Ely finally retired from nursing in 1957. She applied for her veteran's pension and continued to live at her mother's home for the next 20 years. She enjoyed gardening, and loved to grow flowers from seeds (Personal conversation with Bobbie Hamilton, February 18, 1999). Ely never married. She did tell two friends that she had a fiancée who was killed in World War I (Personal conversation with Nell Gose, 1997, personal conversation with Marilyn Marshall, 1998). Two years before her death, she sold her home and moved into a small apartment that she shared with a friend. Ely lived to see the first Ruskin health center be replaced by a newer facility in 1976. The new facility also was named for her, and continues to house a county public health clinic.

Shortly before her retirement, Ely reflected on her many roles as a public health nurse and the memories she had of her years in rural health. She once told an interviewer: "I've told everybody that when they lay me out in a casket, I won't feel natural

unless I have a hookworm bottle in my hand." Ely died on May 12, 1979 at age 89. She is buried in Tampa. In 2002, Ely was inducted into the Florida Women's Hall of Fame.

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