

Medicine 40 (1966): 350-63; and Judy Barrett Litoff, *American Midwives, 1860 to the Present* (Westport, Connecticut: Greenwood Press, 1978).
²¹Cheryl Ellis Vaiani, "Women and Health," in *The New Handbook of Texas*, (Austin: The Texas State Historical Association, 1996), 6:1043-6.

A Note on the First Nursing School in Texas and its Role in the Nineteenth Century American Experience

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Being the first to consummate any positive endeavor grants a particular individual or institution a greater amount of respect and prestige than those who follow afterward. This concept rings true in every area of public relations. Brochures of various nursing schools consistently stress the accomplished "firsts" that set them apart. The formation of a nurses' training school in Galveston, Texas, during the late nineteenth century established historical precedence in several areas. However, more important than claiming a fundamental position in the annals of nursing education is the context within which the John Sealy Hospital Training School for Nurses fit into the overall American nursing experience of the late nineteenth century. This article will explore the following questions: Where were nursing schools primarily located during this era? What dates marked the opening of pioneer training institutions in the western and southern regions of the country? What social, economic and political factors influenced the establishment of these training schools? What common challenges did they face? Finally, what was the significance behind the acceptance of the John Sealy Training School for Nurses by the University of Texas regents?

The opening of a nursing school in Texas coincided with the establishment of a hospital and medical college in Galveston. In 1881, the state legislature voted to create a university that would contain a separate medical department. The location of these institutions would be decided through a referendum. During the next few months Galvestonians campaigned vigor-

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ously to convince the legislature and Texas voters that the Island was a perfect setting for the medical school. Their energetic efforts came to fruition when it was determined that the main university would be located in Austin and the Medical Department in Galveston.

Although popular vote dictated the location, plans for construction of the medical school stagnated due to lack of funding. However, shortly before his death Galveston businessman John Sealy bequeathed \$50,000 to the city to be used "for a charitable purpose."¹ Concerned with public health care in Galveston, Rebecca and George Sealy, executors of the Sealy estate, donated the money in 1887 for the construction of a hospital. The John Sealy Hospital incorporated modern medical facilities that could be used for clinical training of students attending the newly organized Texas Medical College.²

Up to this point, nursing care in Texas hospitals was chiefly administered by untrained male attendants (with the exception of nuns), which often produced unsatisfactory results. In 1881, a general debate arose concerning the location of the University of Texas Medical Department. Dr. A. R. Kilpatrick, president of the Texas State Medical Association, decried traditional nursing practices: "some male nurses are nuisances, and drink up all the wine and stimulants furnished for the sick."³ In 1884 Dr. A. P. Brown recommended the establishment of a training school for nurses in conjunction with the Medical Department. He noted, "Judicious nursing by trained hands, often determines the result of a disease."⁴

Despite the reinforcement of professional opinion, it would take the accidental injury of a child to provide the final stimulus for a nurse's training school in Galveston. A fall suffered by young Ella Goldthwaite, a member of the prominent Sealy family, resulted in a broken hip and a need to consult a specialist in New York. Several weeks later the child returned to the Island accompanied by Dorthea Fick, a graduate of the Mount Sinai Hospital School of Nursing.⁵

Although the circumstances surrounding Nurse Fick's entrance into Galveston's medical realm were fortuitous, the impact of her efforts was not. Young Ella died in January 1890. Nevertheless, word spread regarding the efficiency of Fick's nursing skill. A group of influential, reform-minded women created a Lady Board of Managers with the purpose of assimilating trained female expertise into hospital care. Through the unflagging efforts of the Lady Board, the John Sealy Hospital Training School for Nurses, the first training school for nurses in Texas, opened on March 10, 1890, with a freshman class of eighteen young women.⁶

The two-year curriculum included anatomy, physiology, pathology, *materia medica*, principles of nursing, surgical nursing, nursing of expect-

ant women and children, emergency care, nutrition, administration of baths, physical therapy, and hygiene. The standard uniform worn by the student nurses consisted of blue ankle-length dresses with white linen cuffs, white bibs and aprons, and white caps.⁷

The creation and development of the John Sealy Hospital School for Nurses coincided with what is considered the "Fateful Decade" in American nursing. The ten-year span between 1890 and 1900 constituted an era of unprecedented growth spearheaded by a dynamic group of nursing leaders including Isabel Adams Hampton and Lavinia Dock. It was a period that encouraged intense proliferation of nursing schools and the establishment of organizations within the young profession.⁸ Twenty years earlier, only a handful of nursing schools existed in the United States, and the science of nursing in the mid-nineteenth century bore little resemblance to its modern equivalent. Very few women of means and certainly no "lady" entered the profession. Hospital nurses were considered the dregs of female society who, in the words of nursing reformer Florence Nightingale, "were too old, too weak, too drunken, too dirty, too stolid, or too bad to do anything else."⁹

The effects of the Civil War provided a huge boost to the professionalization of nursing. The incredible carnage of the battlefield created an intense awareness regarding the need for programs to prepare women with viable nursing skills. Many of the well-educated and administratively efficient members of the U. S. Sanitary Commission became the primary motivators behind the creation of postwar nursing schools.

The year 1873 marked the opening of the pioneering trio of schools: Bellevue Training School in New York City, the Connecticut Training School in New Haven and the Boston Training School. Based upon Nightingale ideology, these institutions interwove military concepts with those of a woman's place within Victorian society.¹⁰ In the same manner, the instruction and daily routine of the John Sealy Hospital School for Nurses stressed discipline, self-sacrifice and order. From dawn to dusk, seven days a week, with an occasional half day off, nurses worked alongside the doctors, learning what they could from actual cases, while hauling, bathing, and feeding the sick. Good health, strong backs and sturdy feet were physical essentials, and the most attractive student was "a keen learner, but not too cocky; quick to respond, but not too aggressive, cheerful, but able to take her work seriously."¹¹

In the late nineteenth century, nurse training promised the prospective student an entrance into the working world that closely mirrored what domestic service had provided previous generations of young women throughout America. As both domestic service and mill work in the northeast and midwest became immigrant domains, many white native-born

parents considered nursing one of the few occupations that could provide their daughters both a moral and an occupational apprenticeship. The same could be said in Texas. For three decades after the 1904 opening of the Scott and White School of Nursing in Temple, the typical trainee was a young woman who had grown up on a farm or in a small town and had about eight years of schooling.¹²

The nurse training school was theoretically designed to operate as part of the hospital but be supported by separate funding. As they received proper training student nurses would replace untrained attendants in providing care for patients. Most important, however, was the role of nursing schools in the hospitals' economy. Nursing students provided a relatively inexpensive, stable, and disciplined workforce. It was stability based not on the long-time service of particular individuals, but on the continued viability of the school itself.

As they developed, nurse training schools in the United States became integral components of hospitals, both large and small. By century's end, their number had increased dramatically from 15 to over 430.¹³ Although great strides had been made in the nursing arena, the continued reliance on home remedies by many, combined with a widespread prejudice against working women, often produced an atmosphere detrimental to the growth of the profession.¹⁴

Just as physicians resisted the presence of female doctors, they viewed trained nurses as another intrusion into a male dominated field. Dr. Amos Abbott, founder of the prestigious Abbott Northwestern Hospital in Minneapolis was one of many physicians who believed the practice of medicine should be reserved for the doctors. While his hospital provided one of the very finest nurse's training schools in the Midwest, he never permitted nurses to learn more than the rudiments of home style care. Dr. Abbott's sentiments were echoed by another traditional physician who protested an academic curriculum for nurses: "All a nurse needs to know is how to make a bed and fill a hot water bottle, and . . . wait for the doctor."¹⁵

Although most nurse training schools were located in the northeast and midwest, the few schools established west of the Mississippi during these years played a significant role in the overall story of the training school. The massive migration West after the Civil War quickly created a demand for quality medical care. The organization of a hospital, and the staffing of such a place, was a primary necessity for the settler who possessed little means of care for any kind of illness. The first training school to open west of the Mississippi (indeed, the first west of the Rocky Mountains) was the San Francisco Children's Hospital Training School for Nurses established in 1880. Originally named the Pacific Dispensary for Women and Children

(1875) this institution served as the forerunner of the present-day Children's Hospital of San Francisco. Among other female physicians, Drs. Charlotte Blake Brown and Martha E. Bucknell worked tirelessly to implement the education of nurses and further the advancement of females in the practice of medicine.¹⁶

Colorado became the second western state to create an institution for nurses. In order to meet the demands of a growing populace, the Colorado Training School for Nurses was established in 1887 in association with the Denver based Arapaho County Hospital.¹⁷

Two other training schools began in the years between the creation of the San Francisco and Colorado institutions: the Minneapolis-based Northwestern Training School for Nurses and the St. Louis Training School for Nurses. Although both are located on the Mississippi River rather than a significant distance west of it, these schools were valuable to the western nursing experience.

Throughout the nineteenth century, the Society of Friends proved instrumental regarding the implementation of social reform. As Minneapolis grew from town to city, the Quakers, particularly the women, recognized the great lack of capable, well-trained females to care for the sick. In November 1882, a group of Minneapolis women and local physicians met at the Friends church to discuss the need for a comfortable, home-like environment for female patients and children. In an effort to provide "woman's work for women" the meeting resulted in the formation of the Northwestern Hospital for Women and Children accompanied with a training school for nurses. One month later, with ten patients and two nurses-in-training, the newly organized hospital and training school commenced operation in a small rented house.¹⁸

Prior to 1883, nursing supervisors at the St. Louis City Hospital were appointed by City Hall, while those tending to the actual care of patients were regularly recruited from the hospital laundry or kitchen.¹⁹ To correct this disastrous situation, citizens representing various civic and medical interests banded together to organize the St. Louis Training School for Nurses on December 7, 1883. Because the City Charter lacked a provision for a municipal school of nursing, the institution had to be sponsored and maintained as a private organization. However, the City agreed to employ nurses from the school to care for the patients at the City Hospital. In 1915, the city formally adopted the training school and consequently renamed it the St. Louis City Hospital Training School for Nurses.²⁰ Throughout the 1880s, the St. Louis Training School for Nurses along with the three previously mentioned institutions effectively answered the demand for quality nursing care in the West.

Nursing reform proceeded at a slower pace in the South. Several factors account for the delay in this region. During the Civil War the Confederacy lacked the resources necessary to mobilize an agency commensurate to the U. S. Sanitary Commission. The resulting deficiency of leadership expertise, combined with the post-war economic morass, severely hampered new professional endeavors. Finally, because southern society remained deeply rooted in the concept of female virtue, nursing continued to be associated with immodest, unwomanly activities, especially those pertaining to the washing and handling of male bodies.

The first attempts to establish nursing schools in the South quickly foundered. Organized in 1883, the South Carolina Training School for Nurses in Charleston struggled for three years before becoming inactive due to the lack of funding. The New Orleans Training School for Nurses constituted another endeavor.²¹ Southern cultural mores clashed with progressive enterprise as the Ladies Unsectarian Aid Society drew up plans for the school in the spring of 1889. Because no hospital in New Orleans would open its doors for nursing training, the valiant Ladies Society purchased their own building, opening a ward in this facility so that prospective nurses could receive instruction at the bedside. As they labored to preserve their school, the ladies found strong encouragement in news regarding the establishment of another nursing institution in Texas: "Success is almost won, and demonstration is almost complete that nurses can be trained in the South as thoroughly as in the North and East. Already we hear of the starting of another school in Galveston. All such movements have our cordial approval and endorsement."²² It is unclear what became of the New Orleans Training School for Nurses. The fact that it is not listed in post-1889 archival records suggests that the school soon closed due to lack of support.²³

Texas, especially the southeastern section of the state, is also considered regionally and culturally southern. Although the state experienced minimal physical devastation during the Civil War, most of Texas suffered severe economic and educational privation. Galveston, on the other hand, witnessed rapid growth during the postwar years. By 1890, the Island City had become the principal seaport and trading center along the Gulf of Mexico. Numerous millionaires, including Colonel W. L. Moody, George Sealy, and Colonel Walter Gresham, occupied breathtaking Victorian mansions on the Island. The city basked in the Gilded Age while producing the most opulent hotels and Opera House and, of course, the first medical school in the state. Galveston's commercial district, the Strand, was commonly labeled the "Wall Street of the South."²⁴ With this unique availability of resources, Galveston provided the site for the first permanent training school for nurses in the South.

The development of nurse training schools coincided with another important event of the late nineteenth century: the entrance of medical education into the universities. According to medical historian Kenneth Ludmerer, the new relationship between medical school and university became a stimulating one with institutional advantages for both. Medical schools gained badly needed financial assistance and the promise of greater financial stability in the future. In turn, universities with strong medical schools gained in educational stature by training physicians to engage in superior medical care and cutting edge research. Finally, universities acquired from their medical schools a large body of influential and well-to-do alumni invaluable in furthering the growth of the university.²⁵

As the professionalization of nursing gained wider acceptance, greater credence was given to the idea that nursing education should occupy an essential position alongside that of the medical school. Incorporation into the university system provided nurse training institutions the same advantages as those reaped by medical schools, especially in terms of financial stability and educational status. At the same time, the training school fulfilled the urgent need of the university medical school for educated female nurses to care for patients.

After laboring almost five years to keep the John Sealy School of Nursing financially solvent, the Lady Board of Managers approached the University of Texas Board of Regents concerning possible economic assistance for the school. The ladies asked the Board to request \$1,500 from the legislature to help defray costs of operating the school. The regents agreed to the proposal, noting the "great advantages" of the school to the Medical Branch.²⁶ However, Texas Governor Culbertson vetoed the recommendation, thereby jeopardizing the school's future. In order to avoid closing the training school, the regents appropriated \$1,200 to cover the salary of the School's director, Josephine Durkee.²⁷

One year later, on May 15, 1896, the regents assumed official control of the school, and the name was changed to the School of Nursing, University of Texas. With this action, the John Sealy School of Nursing became the first nurses training school in the United States to become an official unit of a university. Its status changed from that of an independent school under the administration of a private group, funded through donations, to that of a department in a state institution of higher education.²⁸ The first superintendent appointed to the School of Nursing, Hanna Kindbom, was appointed to the medical faculty as Clinical Instructor of Nursing. This appointment has been cited as a significant step forward in nursing education since it was the first professional appointment of a nurse in an academic institution.²⁹

The incorporation of the John Sealy Training School for Nurses by the University of Texas regents contains greater significance than the fact that it was first to embark upon that endeavor. By granting the nursing school academic status, the regents displayed a willingness to provide women greater educational opportunities and to accord their efforts a considerable measure of professional standing.

In its early years the School of Nursing was a "University school" in name only. It remained primarily a diploma school whose students found their needs generally subjugated to the needs of the hospital for patient care. The John Sealy Hospital Board of Managers established all policies affecting the nursing students, except the curriculum. Hanna Kindbom and two medical school professors constituted the Committee on Instruction for the School of Nursing. Despite these arrangements, Kindbom thought the school "one of the best arranged and most perfectly operated schools of its kind."³⁰

Two nurse training schools were established in conjunction with university hospitals before the opening of the institution in Galveston, but neither of these training schools became official units of their affiliated universities until many years later. As early as 1873 Mr. Johns Hopkins envisioned a nursing school in his plans for establishing a hospital and university in Baltimore. In a letter to the Hospital Trustees, Hopkins included the following instructions: I desire you to establish in connection with the hospital, a training school for female nurses. The provision will secure the services of women competent to care for the sick in the hospital wards, and will enable you to benefit the whole community by supplying it with a class of trained and experienced nurses."³¹ On October 9, 1889, five months after the Johns Hopkins Hospital opened its doors, a Training School for Nurses went into operation. The school began functioning as a Hospital program and remained in this capacity until financial struggles encouraged its closing in 1973. The school reopened as an integral part of the university in 1984.³²

The Maryland Training School for Nurses was established at the University of Maryland Hospital in December of 1889. Under the direction of Miss Louisa Parsons, an 1860 graduate of Nightingale's Nursing School and Home in London, the school not only provided quality instruction to prospective nurses, it also served as a vital source of hospital labor. Nevertheless, the Maryland Training School for Nurses did not become incorporated with the University of Maryland until 1920.³³

Texas occupies a substantial and distinctive place in the story of the American nursing school. In 1890, most training schools were northeastern enclaves. Extremely few were located west of the Mississippi and no permanent nursing institution resided in the Old South. Embodied with the pioneer western spirit, the establishment of the John Sealy Hospital School for Nurses

challenged time-honored assumptions regarding a woman's place within the medical profession. The success of the school underscored the usefulness of overturning certain southern mores.

The most significant historical "first" created by the nursing school in Galveston involved its official incorporation into the University of Texas system in 1896. By examining the history of American nursing education, it could easily be assumed that this major breakthrough would have been instigated in the progressive, resource-laden Northeast. Two reasons for it being otherwise revolve around geographic location. The University of Texas Medical Branch was a geographically isolated enterprise that recognized the essentiality of experienced nursing care for hospital patients. Another reason involves the freedom of the institution to administer its affairs unencumbered by the traditional ethics of more established regions. In the final analysis, the fact that a southern medical school in a frontier state set such a precedent provides a fascinating piece of American nursing history.

NOTES

¹ *A Century of Excellence, A Vision for the Future School of Nursing 1890-1990*. Centennial publication, University of Texas Medical Branch.

² Billye J. Brown, *The Historical Development of the University of Texas School of Nursing, 1890-1973* (Ed. D. dissertation, Baylor University, 1975), 20.

³ Pat I. Nixon, *A History of the Texas Medical Association 1853-1953* (Austin: University of Texas Press, 1953), 97.

⁴ *Ibid.*, 93-94.

⁵ Brown, "Historical Development." See also: Inci Bowman, "John Sealy Hospital Training School for Nurses," *The Bookman* 9 (October, 1982): 3-5.

⁶ Elizabeth Silverthorne and Geneva Fulgham, *Women Pioneers in Texas Medicine* (College Station: Texas A & M Press, 1997), 35.

⁷ *Ibid.*, 36.

⁸ Theresa E. Christy, "Nurses in American History: The Fateful Decade 1890-1900" *American Journal of Nursing*, 75 (July 1975): 1163.

⁹ Susan M. Reverby, *Ordered to Care: The Dilemma of American Nursing, 1850-1945* (Cambridge: Cambridge University Press, 1987), 22.

¹⁰ Josephine A. Dolan, "Nurses in American History: Three Schools—1873." *American Journal of Nursing*, 75 (June 1975): 989.

¹¹ Silverthorne and Fulgham, *Women Pioneers*, 36.

¹² "Scott and White Marks Ninety Years of Nursing," *Scott and White Options for Health* (October 1994): 7; *Temple Daily Telegram*, October 30, 1994.

¹³ A recent review of nursing history texts, history articles, and nursing education reports of the past century demonstrated that almost without exception historians have uncritically perpetuated a standard set of training school statistics. These standard statistics, traceable to the Burgess Report and the United States Bureau of Education are inaccurate. Revised, more accurate statistics for pre-1900 training schools were developed by analyzing school opening dates as published in the *Annual Reports of the Department of the Interior: Report of the Commissioner of Education* for the year ending June 30, 1905. Information for this article was derived from this source and *Burdett's Hospital and Charities Annual*, 1895 and 1901. For more information regarding statistical data about early nurse training schools, see Wendell W. Oderkik,

Setting the Record Straight: A Recount of Late Nineteenth Century Training Schools." *Journal of Nursing History* 1 (November 1985): 64.

¹ Brown, *Historical Development*, 44.

² *Where Quality is a 100 Year Tradition*, Centennial publication for the Abbott Northwestern Hospital, 3. Records documenting the work of two Minneapolis hospitals, Northwestern and Abbott, including the James Wilson Abbott Papers (P1319) are located in the Division of Library and Archives, Minnesota Historical Society Research Center, St. Paul, Minnesota.

³ *A Century of Service: Children's Hospital of San Francisco, 1875-1975*. Centennial publication for the Children's Hospital of San Francisco, 3-5.

⁴ Nolie Mumey, *Cap, Pin, and Diploma: A History of the Colorado Training School, the Oldest in the State for Nurses* (Boulder: Johnson Publishing Company, 1968), 191-6.

⁵ "Where Quality is a 100 Year Tradition," 3; "Quakers in Minnesota." *Minnesota History* 18 (September 1937): 263. See also: *First Annual Report of the Northwestern Hospital for Women and Children for the Year Ending November 1, 1883* (Minneapolis: Johnson, Smith & Harrison, Printers, 1884), 4.

⁶ Elizabeth Green, *History of the St. Louis Training School for Nurses* (St. Louis: St. Louis Training School for Nurses Alumnae, 1941), 3.

⁷ Green, *St. Louis Training School*, 4.

⁸ An earlier document gives 1882 as the establishment date for The New Orleans Training School. Most likely, this previous school faltered several years before the 1889 endeavor. See W. G. Thompson, *Training Schools for Nurses with Notes on Twenty-two Schools* (New York: G. P. Putnam's Sons, 1883), 50.

⁹ Editorial regarding the New Orleans Training School for Nurses, *New Orleans Medical and Surgical Journal* XVIII (1890-91): 74.

¹⁰ *Burdett's Hospitals and Charities Annual*, 1895 and 1901; *Annual Reports of the Department of the Interior: Report of the Commissioner of Education for the years 1889-1907*.

¹¹ David G. McComb, *Galveston: A History* (Austin: University of Texas Press, 1986), 118. See also *A Century of Excellence, 1890-1990*.

¹² Kenneth M. Ludner, *Learning to Heal: The Development of American Medical Education* (Baltimore: Johns Hopkins Press, 1985), 110-11. Editorial regarding a disturbance at the Charity Hospital, *New Orleans Medical and Surgical Journal* XVIII (February, 1892): 615-616.

¹³ Official Minutes of the University of Texas Board of Regents, January 16, 1895. Cited hereafter as MUTBR.

¹⁴ MUTBR, June 20, 1895.

¹⁵ Brown, *Historical Development*, 29.

¹⁶ Lavinia L. Dock, *A History of Nursing* (New York: G. P. Putnam's Sons, 1912), 139, as cited in Brown, *Historical Development*, 29.

¹⁷ *Galveston Daily News*, January 11, 1897.

¹⁸ John C. French, *A History of the University Founded by Johns Hopkins* (Baltimore: Johns Hopkins Press, 1946), 114. See also A. McGehee Harvey, et al., *A Model of Its Kind: A Centennial History of Medicine at Johns Hopkins* (Baltimore: Johns Hopkins University Press, 1989), 1:26-7, and Ethel Johns and Blanche Pfefferkorn, *The Johns Hopkins Hospital School of Nursing: 1889-1949* (Baltimore: Johns Hopkins Press, 1951), 18-22.

¹⁹ This information acquired in the publication, *Hopkins Nursing 1889-1989*, centennial publication from the office of Melinda Rose, Historian, The Johns Hopkins School of Nursing, 1989. More information regarding the nursing school can be acquired in the Allan Mason Chesney Medical Archives of the Johns Hopkins Medical Institution.

²⁰ *One Hundred Years of Caring*, The University of Maryland School of Nursing Commemorative Centennial Booklet (September 1995), 1-2.

Book Reviews

Women, Culture, And Community: Religion and Reform in Galveston, 1880-1920. Elizabeth Hayes Turner (New York: Oxford University Press, 1997.) Pp. 384.

Women, Culture, and Community, winner of the Texas State Historical Association's Coral Horton Tullis Prize in 1997 for the best book on Texas, is a splendid study which reveals a great deal about the evolution of women from their traditional female role to a surprising emergence as Progressive Era activists in a non-traditional New South city.

First becoming active during the 1880s and into the 1890s in mainstream, non-evangelical churches (primarily Episcopal and Presbyterian) and in the city's oldest Jewish synagogue, these women, finding their contribution not fully appreciated and sometimes resented by male leaders, began to move beyond their religious foundations and extended their activism into women's clubs, benevolent societies, and poor relief.

The disastrous hurricane of 1900, along with the somewhat tepid brand of southern Progressivism, together served as catalysts propelling Galveston women, both white and African-American, into new roles as major participants, and in some cases, the principal shapers of public policy and programs. In the aftermath of the great storm, white women fashioned a dynamic and progressive women's community in which three organizations, the Women's Health Protective Association (WHPA), the Galveston Equal Suffrage Association (GESA), and the Young Women's Christian Association (YWCA), became the driving forces. The author notes that only in the YWCA did evangelical women assume an active role; this study, then, reveals that Galveston differed from the model suggested by older works which indicated that southern women tended to move from church societies to women's foreign mission societies to the Woman's Christian Temperance Union (WCTU). In Galveston, however, the primary female activists, Episcopal, Presbyterian, and Jewish women, demonstrated little interest in the WCTU. Middle-class African-American women, barred from the organizations utilized by their white counterparts, formed self-help groups and continued their traditional activities in mothers' clubs and community celebrations and fought to