Description: In the opening segment, ER and Elliott Roosevelt respond to a listener's question about the feasibility of drafting older and middle-aged men as opposed to younger ones. In the interview segment, ER and her guest, Narcissa Cox Vanderlip, discuss the New York Infirmary, a hospital staffed entirely by women physicians and surgeons.

Participants: Eleanor Roosevelt, Elliott Roosevelt, Narcissa Cox Vanderlip

[ER:] This is Eleanor Roosevelt speaking. Our program is coming to you from my living room here at the Park Sheraton Hotel in New York City. I'm very happy to have this little while with you each day and I hope you'll enjoy the guest we've invited to be with us today. And now, for a moment, I am going to turn the program over to Elliott.

[Elliott Roosevelt:] It's a pleasure to tell you about today's program. The story behind the growth of a city's great hospital is almost the story of that city itself. Our interview today will be about one of our great city hospitals, the New York Infirmary, and about the people who have given so much of their lives to make this institution available to New Yorkers. We are fortunate to have Mrs. Frank [Narcissa Cox] Vanderlip with us today. She's been a practical and genuine inspiration for many years to the New York Infirmary. Mrs. Roosevelt will introduce our guest in just a little bit. But first, there is a letter from Jackson Heights with an opinion about drafting older people rather than younger ones. I'll read the letter as soon as we've heard from our sponsors who make this recorded program possible.

[Break 01:19-01:28]

[Elliott Roosevelt:] Today we have a subject to discuss suggested by Mrs. Malola Hughes of Jackson Heights, New York. She says, "Here is a question which puzzles me, perhaps you might discuss it sometime. Why not train the older people for defense and let the younger ones follow their examples rather than let the older ones create an undesirable situation and send the neglected young to quiet the unnecessary storm?"

[ER:] The lady seems to um [Elliott Roosevelt coughs] feel that there is great deal of wisdom in youth and that they will be able to um follow a policy which will keep us, all of us, on the right track. I wish that was true! [ER and Elliott Roosevelt overlap]

[Elliott Roosevelt:] I don't think, I don't think so. I think she is um saying that the older generation has done none too good a job. But um I have lived long enough to remember each generation saying the same thing and no new generation ever seems to cope much better. So that I am wondering whether there is this wisdom in youth. [ER laughs] Whether as they acquire the um the responsibilities uh they don't find that the questions are hard to answer [Elliott Roosevelt: Mhm.] and probably hard to handle.
[Elliott Roosevelt:] Well, uh I've heard it uh said that uh if we could only get our, our lawmakers and the
uh people of Congress who uh today and the -- of the government executive branch who are today
responsible for uh our going to war to actually have to be in uniform themselves if such a war comes
around. Uh that they probably would uh be very much uh quieter in their -in their storming at the-the idea
of going to war.

[ER:] But of course, what the lady is presupposing is that inevitably we are headed for war. Now that is
possible. We may--we may be. Eh, but what we hope we are doing is to prepare, so that if we should be
attacked we would be as strong as it's possible to be. I think she would hardly argue that if you trained um
President Truman [Elliott Roosevelt laughs, coughs] and um uh some of the other people in our
government um they would be as fit to defend us as some of the younger people. Therefore if she hopes to
have um no war brought about by the fact that uh we are very well trained and organized and ready eh to
defend ourselves then perhaps she would feel that it was wise to do it with the most uh useful material one
had at hand. Now I quite understand her feeling that it is a tragedy but it has to be the young who die to
defend the old and if the old were able um to be of use uh I would say swell, good thing, but
unfortunately I hardly think that even the middle aged would do a very good job [Elliott Roosevelt:
Mhm.] in modern war. They're not supposed to be good flyers. They're not particularly good um [Elliott
Roosevelt: Foot soldiers] at withstanding hardships um and I-I-I don't suppose uh you're trying uh to
create the best possible defense um you're not trying just to um do away with your population. If you
were that would be a be an awfully good way to do away with your surplus population. [Elliott Roosevelt:
But why wouldn't-- ] Only it wouldn't defend the country.

[Elliott Roosevelt:] But why wouldn't it be advantageous-- you-you say uh that you couldn't make a
middle-aged and old-aged people, uh you couldn't put them in uniform to do the actual fighting. Uh, but
there are many, many uh things that would bring home to older people and middle-aged people far more
strongly uh the tragedy of war if they were completely uprooted. Say you uh-uh drafted all of the people
in this country for wartime jobs. (7:02)

[ER:] But if we have total war that will probably happen and I'm hoping that it won't have to happen. But
what you um--what you usually try to do is to keep a certain amount of normal life going. And that's what
older people and middle-aged people try to do so that there is something to fight for and come back to.
Um but if we have total war there is no question in my mind but there will be everybody eh obliged to do
something. [Elliott Roosevelt: Yeah.] And only I've hope that we will um be able to prevent it. [Elliott
Roosevelt: Mhm, alright now--] And we won't be preventing it by uh at present putting the uh middle
aged and the older people in positions that only young people can fill.

[Elliott Roosevelt:] Now that's- that's very true but uh if you-if you uh have to have uh this uh situation
where the young are required to do the preparation for defense, wouldn't it be a good idea even though
you are preserving the normal life if you advised all people in the United States that in the event of total
war just what their job would be and then uh said to them: now you in your spare time when you're not
carrying on the normalcy of the situation, contributing to it, you must train for this job.

[ER and Elliott Roosevelt talking over each other for the next two lines]

[ER:] That is a very difficult thing to plan for.

[Elliott Roosevelt:] The same way that youngsters go through eighteen months of military training.

[ER:] You-you see how extreme through twenty six [Elliott Roosevelt: twenty six], um you see how
extremely difficult uh it is to plan for uh the type of limited draft of a certain age group that we have at
present. If you [Elliott Roosevelt: Ah yes] were to plan this total mobilization which you have in mind
you would have a type of planning and regimentation uh which would be extremely difficult to enforce and also um very difficult to plan. I don't know whether it could be planned. (9:25)

[Elliot Roosevelt:] Well, maybe you could bring it about by giving them a real demonstration of what would happen if we did not have a uh a proper defense and communism were able to creep in and take us over.

[ER:] They tried that in one of [Elliot Roosevelt: In one town.] I think it was in one town.

[Elliot Roosevelt:] They did it in a town and the mayor died I believe [ER coughs and mumbles] from the uh horrors of the whole situation I think the veterans of the American Legion post acted as uh the invading red force. Well uh that-that was sort of a demonstration of what it would be like, but I-what I meant was that the government act the entire government from top to bottom and uh all of our cities and our counties and our state officials act exactly as they would if they were in the communist--in a communist country for a period of a few days. And let the United States--the people of the United States see exactly what it would be like to live under those conditions.

[ER:] That wouldn't be possible because um we would be told that we were not acting the way they act in the communist country that we were acting the way we thought they acted. And there would be no um--

[Elliot Roosevelt:] I don't care about the criticism from the outside. I think that this is something in which all Americans--

[ER:] Yes but the people here, the people here would say you are imposing on us things which you think go on in the U- in the USSR but you don't know so therefore um this is all perfect nonsense.

[Elliot Roosevelt:] Oh, I think we have enough uh-uh Soviet citizens who have uh-who have moved away from there who can actually put into uh--into effect the exact conditions that exist right down to community life.

[ER:] Well it might be that you could do it. I uh- I have my doubts because I think it would be uh looked [Elliot Roosevelt: Well anyway, all that I’m] upon as make believe.

[Elliot Roosevelt:] All that I’m trying to uh suggest is ideas whereby we can bring in upon the older generations in addition to the younger ones who undergo military training uh--

[ER:] I have an idea that nearly all older people whether they are in government positons or not have at some time been uh fairly close to war because World War I and World War II um are have--have had most of these people in them [Elliot Roosevelt: Mm.] and I don’t think it's lack of understanding on the part of older people. I really think they do understand what war means.

[Elliot Roosevelt:] Well, I-I'm glad to uh to hear you say that. I’m not quite as sanguine about it as you are, but I think that that’s as fair as we can go today with--in answering Mrs. Hughes’s question.

[Break: 12:25-12:34]
[Narcissa Cox Vanderlip:] Well it's been delightful to be here with you Eleanor. Thanks so much for asking me. (13:16)

[ER:] Well I've always thought that the New York Infirmary had one of the most fascinating beginnings of any organization in the country. Won't you tell us something about it?

[Narcissa Cox Vanderlip:] Well, the New York Infirmary is uh--was begun by uh a very brilliant young woman who was urged by her conscience and her creative genius to do something quite different in the world. There weren't many educated women in those days. And she had a special reason for wishing to become a doctor. So she began um studying with her friends who were doctors and uh finally was encouraged to try to go to a medical school. She tried eleven medical schools, asked them each for entrance. And they all denied her entrance on the grounds that she was a girl and couldn't possibly be educated with young men. Finally one little college in upstate New York, Hobart College, took uh took the pains to reply to her letter and said they would take it up with, of all things, the student body. So the faculty submitted her name and her proposal to come uh to medical college to the students. They uh made it a rather amusing uh joke really. They had a mass meeting and uh finally voted that they would have her come in uh to study with them um, rather as a joke. But uh when they finally met her and met her in classes she reported in her diary later that they couldn't have been kinder or more respectful to her. That wasn't the case always but it was uh-uh with the students. Well she had the um great honor of graduating at the top of her class, it wasn't very discreet of her to do that because it's never quite discreet for uh women to um take a uh top position over a lot of young men.

But um, when she came out of uh the college uh with her degree she found even more troubles awaiting her, for she found that no college or no dispensary or hospital would let her intern or even practice in the dispensary. So she finally found that she had to go somewhere else. At that time Paris was the mecca of American students in medicine and she went to Paris but found the only place she could continue her education was in a public uh school for midwives. She uh went into this bleak stone building with thousands of patients and uh um young country girls who were studying to be midwives with no--with practically no education and worked side by side with them and learned that great technique.

She um hoped to be a surgeon uh finally but found that uh she couldn't ever hope to be because an infection uh flew into her eye while she was practicing in the hospital and she had to give up that ambition. But she became a great obstetrician and a great uh teacher and uh medical woman. Then she came back to New York and still even with that experience behind her found that no hospital would accept her as a--as a graduate physician. So she established a little dispensary down in the Lower East Side where there was no medical uh care at that time for the poor. It was a region of immigrants and uh they were poor and they were used to having um-uh a woman doctor because they were used to midwives. So she set up her little dispensary and the women and children of the neighborhood flocked to her.

[ER:] How many years ago was that?

[Narcissa Cox Vanderlip:] That was in uh 1854. She um invited them to come for free medical care and um free medicines. And for a long time the dispensary worked just that way. It was uh founded as the New York Infirmary for Indigent Woman and Children, because at that time nobody who was not indigent would have a woman doctor. But they uh--these people accepted her very gladly. She spent uh hours, long, long hours with waiting lines of sick women and children uh to take care for. After a while she was joined by her sister Emily Blackwell who had uh become by that time a surgeon. She had had her um training in England under one of the great uh British surgeons. So she and a young Polish woman who had been encouraged to get her medical degree joined Elizabeth Blackwell in the little dispensary and in a few years they started a little hospital, a hospital of twelve beds. And its interesting Eleanor that that little hospital was an old Roosevelt home. It was the home of um your father and-- it was the home where your
father-in-law was born [ER: Oh that’s very--] in 1828. [ER: oh that’s very interesting] and that little--we have a little picture of that nice old little Dutch house still in our literature. (19:12)

[ER:] Well the New York uh Infirmary was a pioneer in many fields, wasn't it?

[Narcissa Cox Vanderlip:] Yes, even in those days the uh pioneer work had begun not only having women physicians, but uh the uh women doctors had a great deal of care and uh sympathy for their neighbors, so as soon as they began going into the homes, they found that it took more than just a doctor’s care. It took some uh other help to put the patient's mind and body at ease. So the first social service uh I believe began in a tiny way at that time because as they record they took a respectable woman with them [ER and Narcissa Cox Vanderlip laugh] [ER: They took a respectable woman, I love that!] and she went armed with clean linen and she went armed with brooms and dust pans and scrub pails and she not only made [ER: That was the first beginning of the visiting nurses service [unclear term]] yes um, later a nurse too but this was this was making the patient uh uh comfortable so she could get well. This respectable woman took care of the children and made the house comfortable, fed them. and all together uh ma--set the patient's mind at ease enough so she could get well.

[ER:] Well wasn't one of the early trainees a young Negro woman?

[Narcissa Cox Vanderlip:] Yes. One of their earliest [ER coughs] uh doctor um um interns was a young Negro woman. She too was the first uh Negro woman doctor I believe in this country.

[ER:] That is very interesting I think. Um what happened um during the Civil War, because that must have made quite a change?

[Narcissa Cox Vanderlip:] Well having the little hospital with the twelve beds uh the uh--Elizabeth Blackwell had begun to uh train nurses at the bedside and that was really a pioneer activity. They had lectures and they also had bedside training, so she extended that effort when the Civil War began by training women especially for uh battlefields [ER coughs] and for hosp--military hospitals. Uh very soon the uh government asked her to um make that a special organization and she trained other groups of uh uh nurses who were trained for the uh government uh military hospitals so that it all grew out, really, of her friendship with um Florence Nightingale who had done the same thing some years before, organizing hospitals and nurses and um became a government function at the time. And I believe that was the first time that nurses were trained especially for that service.

[ER:] Well, that's most interesting and I'm coming right back in a minute to hear more of the first things which were done at the infirmary. But for just a minute we must give our announcer a chance to say a few words.


[ER:] Well, now come right back to our talk about the New York infirmary. And we heard how they first happened to use the x-ray. And now I would like to uh ask you what other things--didn't they start on a uh child guidance clinic?

[Narcissa Cox Vanderlip:] Yes um, as much as thirty years ago some of the uh infirmary uh doctors began a project in child behavior. They started with the babe--the day the baby was born and watched its behavior and recorded hundreds of cases.

[ER:] That is very modern!
[Narcissa Cox Vanderlip] Yes. Well, it has now been carried up [ER coughs] to the third generation because one of the babies who was on that early list um grew up and had children of her own and so we now have three generations; the grandmother, the mother and the baby, all of whom who have have been in this child behavior clinic. Records were made of these uh studies um and have become educational uh films which have been used in the army and UNESCO and uh in medical schools for uh for-for teaching the general practitioners to recognize behavior problems.

[ER:] Well that sound really very interesting and now you also have um-uh the infirmary's cancer clinic which was afirst too I think.

[Narcissa Cox Vanderlip:] Well you must remember that [ER coughs] Eleanor because um you were there at the opening of our um cancer clinic [ER: I was.] and I came across a picture of us on the um steps of the old building. That was the--that's the building by the way which is a hundred years old. An old brownstone mansion.

[ER:] I remember it very well.

[Narcissa Cox Vanderlip:] Where the uh cancer clinic was first established. It's called the Kate Depew Strang Cancer Clinic because it's a memorial to uh the mother of Dr. uh our Dr. L'Esperance. [ER coughs] head of our laboratory and uh her sister May Strang. it was in memory of their mother who died of cancer. And this was a touching way uh of these two women uh helping other people in memory of their own mother. Since then, uh later in '37 the first uh [ER coughs] cancer prevention clinic was founded in the infirmary that um it was the first one of all the five hundred or more others that now exist in many parts of this country and in foreign countries. There we developed the-- they, I say "we" as if I [ER: [unclear, possibly "it does"] had done all of these things. But uh the Strang Pattern was developed there for the early diagnosis of cancer. Very thorough and minute and special examination that discovers early signs of cancer with the object of removing the danger early if it's discovered. It's a wonderful health examination too; they discover many more things than cancer.

[ER:] Well now uh you've examined of course many, many people um in this cancer clinic but are you doing anything else that is particularly interesting at the present time?

[Narcissa Cox Vanderlip:] Our newest clinic is also in the pediatric department and that is to um -- especially at the present time um help children who have reading or speech disabilities. [ER coughs] We've found that um many of those uh children are retarded in school and are um ashamed of themselves, their pride is hurt, they're um affected in many ways on account of some difficulty that can be removed by a psychia-psychiatrist or a trained teacher. So I believe we have one of the very few free clinics where children's reading or speech difficulties can be met. We're extending that effort, um especially when we have a larger building, uh to children with all kinds of special disabilities, so that we can study the whole child if it's blind or deaf or has some uh special disability uh to find out what will not only help the child but also readjust it to its school or its place in society or its family. Uh and in their relationships to the child the--uh we enlist the help of the family to help the child out of its difficulties. (27:37)

[ER:] Well, I think that's very worthwhile and very interesting. But I imagine that people might even, today, wonder why there should be a woman's infirmary as distinct from a general one because nowadays we don't think as woman-of woman as laboring under any difficulties any more. So I wonder if you'd answer that.

[Narcissa Cox Vanderlip:] Well, it's um it's a perfectly proper question because naturally the number of woman doctors is far smaller than uh the number of men doctors so that uh when there is um an empty
place there’s always a man to fill it, so that the um competition for women doctors uh receiving internships and residencies is--has a definite and quite understandable basis. But even the uh-- but we made a survey to discover how few places there were for women and discovered that not only for internships, but especially for residencies and staff positions the places for women are very very limited. We have the authority of the New York Hospital Council for uh determining finally that our hospital was very necessary for training uh women doctors not only in the general internship but in specialties, especially surgery which is very-a very difficult specialty uh for women to have training in.

[ER:] Well, now do you find that more young women are uh interested in coming into the medical field than they used to be?

[Narcissa Cox Vanderlip:] Well, you know as well as I do that more women are interested in being educated than ever before [ER: Yes.] and uh naturally they uh do more and more uh want to go into medical school. But they must have some assurance that they can continue in their medical training until they can not only have their full bedside training but can also move up into a specialty and up into the responsible positions because we all realize that it’s only by responsibility that we perfect our techniques and our characters.

[ER:] Well, that training for specialties um is one of the difficult things for women I imagine because uh they-can’t go into the specialized hospitals unless there is space for them.

[Narcissa Cox Vanderlip:] No, and this space is limited of course with the great increase of uh of doctors of--men and women's doctors both and uh so is the --

[ER:] Well, how do you manage about that uh in the infirmary? Do you make exchanges, or what do you do that makes it possible for a doctor in the infirmary to get an all-around specialized education if they want a specialty.

[Narcissa Cox Vanderlip:] Well, we have--we train in a good many specialties in the hospital. So that we have uh seven res-residents all the time who are training in the hospital. Some of them are very interesting. We have a good many from foreign countries and we even had an intern who was studying social service for India [ER: For India.] which we considered a very interesting kind of side education to be giving. (31:09)

[ER:] Well, that’s very interesting. Well now tell me a little about the new building. Is it still a dream or are you really going to have a new building? I remember the old one.

[Narcissa Cox Vanderlip:] The uh new building is going to get to get out of the dream stage pretty soon we hope. We um have-have to raise uh four million two hundred thousand dollars altogether. And of that we have uh three million two hundred and twenty thousand dollars that is eh at the moment. So that we feel encouraged that we can raise the rest of the money, and everybody says of course the money will come in much faster as soon as you break ground. So we are setting the date of breaking ground at the uh middle of June. And uh we hope from then on that the funds will come pouring in to um finish the hospital. One thing that's been interesting has been uh the number of people that want to build a memorial unit in the hospital either for some um beloved member of the family or becau--to explain their own interest in some special unit in the hospital so that the larger contributions are coming in uh in the form of memorials. And naturally the name of the person who is being remembered and the donor will be recorded in the hospital and I hope on the actual door of the unit so that uh the hospital is going to have a special interest I think for most of us as we go around and see the names of our friends um recorded as being interested too in this old charity.
[ER:] Well, you must have many very distinguished alumni and I think uh in moment that remains that um it would be interesting to hear who some of your graduates were. I know I remember for instance Dr. Jacobi [Narcissa Cox Vanderlip: Yes.] in years gone by.

[Narcissa Cox Vanderlip:] Yes, Dr. Mary Putnam Jacobi was one of the early instructors in the medical college that became part of the infirmary for a time and uh another one that is awfully well known and probably to you, I’m sure to you, is Elizabeth Burr Thelberg [1860-1935] who was professor of physiology and hygiene at uh Vassar for uh forty years and uh very much beloved by the Vassar graduates. We had another wonderful woman, I call her an old woman because she was uh over fifty, over-- she was uh head of our out service practice for sixty years. She was Annie Sturges Daniel. [ER mumbles] and um she--

[ER:] I remember her --I remember her.

[Narcissa Cox Vanderlip:] Yes I'm sure you do, wonderful woman.

[ER:] I wish we had more time to talk about this Narcissa, but unfortunately our time has run out. But I want to tell you that I think it's been most interesting. I apologize for the fact that having a cold I've coughed today [Narcissa Cox Vanderlip laughs] but I can't help believing that everyone throughout the country will be interested in uh the beginnings of this very extraordinary hospital and the fact that it is still going on to a triumphant rebirth in a new building. (34:43)

[Narcissa Cox Vanderlip:] Thank you so much. Well you've always loved having your interest in the hospital; I hope you're soon going to be over your cold. Good bye!

[Break 34:53-35:01]

[ER:] Last year alone more than seventy thousand cancer patients were saved through radiation treatments and surgery. The important thing to know is how to recognize the early warning signals of the disease and then to visit your physician at once. I am not qualified medically to delve into all the facts about cancer but if you want to learn them, write to your unit of the American Cancer Society. The people there will be very happy to send you without charge their booklet of vital information. Of course, as you all know the fight against cancer is far from won. Research scientists must continue to follow the many roads which may lead to new techniques and methods of analyzing and treating cancer. Perhaps even to an overall cure. But this terribly important research cannot continue without our help. We must strike back at cancer. We must guard our families by joining the American Cancer Society’s 1951 crusade. Help the ACS and its life saving programs of research, year-round education, and service for patients. Mail your contribution today to Cancer, C. A. N. C. E. R., care of your local post office.

[Elliott Roosevelt:] And now it's time to close the program and to remind you that you've been listening to the Eleanor Roosevelt Program, which comes to you each Monday through Friday at this same time. And this is Elliott Roosevelt speaking and wishing you all good day.

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