

warrant neglect of the individuals concerned.

A woman discharged for pregnancy, and without other means of support, was frequently obliged to wander from one social institution to another, seeking charity—a situation undesirable not only for humane reasons, but for the prestige of the Army and of the Women's Army Corps, particularly if she did her wandering in uniform. WAC company commanders or staff directors habitually attempted to help such women find care, but were usually unable to do so for lack of familiarity with social agencies in the city or state to which a woman was returning. The situation was admittedly so undesirable that the Chief of Chaplains himself protested that "inadequate provisions are available for the care and rehabilitation of the members of the Corps who become pregnant."⁴⁹

The Director did not support the extreme view held by some authorities, that pregnant women should remain in the Corps. One command protested the discharge of such women:

The regulation does not give to the members of the WAAC the same consideration and care that is given the men in the Army who become physically disqualified for active duty. . . . In a majority of pregnancy cases the Waac so discharged will have no means of support, no opportunity for securing medical care, so will become an indigent. Discharge is not a proper solution to this problem either from the point of view of the Waac as an individual, the WAAC as a Corps, the Army, or Society.⁵⁰

This command proposed care in a special confinement sanitarium, with discharge after the child was born unless it died or was adopted. Director Hobby objected to this idea, partly because it seemed to encourage a woman to give away her

baby in order to remain in the Corps, and partly because it might appear to the public that the Army was running government-supported baby farms after the German model. She believed, however, that medical care after discharge, on a veteran's status, should be made available to both married and unmarried women discharged for pregnancy if they had inadequate private means.

After a series of fruitless attempts to convince the Veterans' Administration that childbirth required medical care, Director Hobby turned to the possibility of care of discharged Wacs in Army hospitals.⁵¹ She secured a decision from the Judge Advocate General that it was legal to care for such veterans in Army facilities; she also obtained concurrence from The Surgeon General, and a plan whereby certain Army hospitals could accept maternity cases. She then reported to G-1:

Every way I know of providing for the care of this personnel has been explored during the past year. We have been able to develop no other way that is suitable and satisfactory. It is War Department policy to provide maternity care for wives of soldiers. I believe it is therefore in keeping with this policy to provide maternity care for female military personnel whether or not they are married to soldiers.⁵²

This plan was approved by G-1 and sent to the Chief of Staff's office. Here it incubated for approximately nine months

⁴⁹ Ltr, Chief of Chaplains, to Dir WAC, 22 May 44. WDWAC 702 (1945-46).

⁵⁰ Ltr, AAF Tng Comd to Dir WAAC, 13 Apr 43, sub: Reconsideration of Par 38a WAAC Cir 17 re Discharge of Pregnancy Cases. SPWA 300.3 (1-7-43) sec I.

⁵¹ Memo cited n. 48; also Memo, Maj Kathleen McClure for Col Hobby, 18 May 44. WDWAC 702 (1945-46).

⁵² Memo, Dir WAC for Gen Henry (G-1), 16 Sep 44. WDWAC 702 (1945-46). Tab X has SGO plan. Tab Y has JAG opinion.