

CHAPTER XXXI

Health and Medical Care

Responsibility for providing medical care for the 160,000 Wacs and nurses of the Army was placed upon the Office of The Surgeon General, both in Auxiliary days and after the change to Army status. As directed by The Surgeon General, any inquiries received by Director Hobby concerning medical problems of members were sent to his office for reply.¹ The Surgeon General's responsibilities were threefold: setting medical standards for enlistment, providing suitable medical care after enlistment, and recommending hygiene courses and other preventive measures to maintain women's health.

For the year of the Auxiliary's existence, these responsibilities toward Waacs were handled as part-time duty by a Medical Corps officer. Shortly before the conversion, the responsibility was delegated to the first woman Medical Corps officer, Maj. Margaret D. Craighill, former dean of a woman's medical college in Pennsylvania.² Major Craighill gradually acquired an assistant and two secretaries, and undertook visits to training and field installations and overseas theaters.

Her unit was, she reported, handicapped from time to time not only by its small size but by lack of sufficient authority or delineation of responsibilities within The Surgeon General's Office.³ There also existed a divided responsibility with Military Training Division, Army Service Forces, which sometimes issued directives

on medical training for Wacs without coordination with either Major Craighill or Director Hobby.⁴

By the end of 1943, Major Craighill was nevertheless embarked on plans for a coordinated health program for women. If it had taken a year for The Surgeon General to recognize that "there are problems of health peculiar to women,"⁵ it was to take the rest of the war to solve most of them.

Medical Standards for Enlistment

One of Major Craighill's first actions after her appointment was a tour of Army induction stations to seek the cause of medical examiners' errors, which had seriously affected the early recruiting program. The cause, she discovered, was simple: most stations were not giving any

¹ Memo, Consultant for Women's Health and Welfare to Dir WAC, 4 Jul 44. SPMC DD-DW 322.5, in WDWAC 220.

² References to Craighill opinions, unless otherwise cited, are from: (1) History of Women's Medical Unit, rough draft narrative by Lt Col Margaret D. Craighill, MC, 23 Jul 46. SGO Hist Div 314.72. (2) Rpt, Maj Craighill to Hist Div SGO, 26 Sep 45, sub: Logistics of World War II. SPMDF-W, in WDWAC 314.7.

³ For development of unit, see history cited n. 2(1).

⁴ (1) Memo, WAC Well-Being Off for Dir WAC, 6 Jan 44. SPWA 211. (2) Memo, ASF Pub Contl Off for Maj Craighill, 4 May 44. WDWAC 300.6.

⁵ (1) WAAC Regs 1942, par 21-25. (2) AR 40-100, Change 5, 27 Sep 43. (3) Rpt, Enlistment, Health, and Discharge of the WAC, by Med Stat Div SGO, in Army MD Bull, Vol. VI, No. 3, Sep 46. (4) Memo, SGO for Dir WAC, 14 Aug 44. SPMC/DD-DW 322.5.