**The Nurse Ida Wissotzky: A Story of Values, Professionalism and Missed Opportunities**

Ida (Hinda) Wissotzky-Krinsky was born in 1909 in Bialystok, Poland. Her father, Moshe, was engaged in trade and was considered wealthy in the terms of the time. Her mother, Zlata, was his second wife. Ida had three half-brothers from her father’s first marriage. They immigrated to the United States and she kept in touch with them throughout her life. Her younger brother (Dr. Reuven Wissotzky) was a surgeon who married a registered nurse named Shoshana. Her brother, his wife, and their two children all perished in the Holocaust. Ida Wissotzky and her husband Joshua Krinsky, who she married shortly before immigrating to Israel, had no children of their own.

In 1924, Ida graduated from the Girls' Gymnasium and moved to Warsaw. A year later, she studied at the School of Commerce in Warsaw, from which she graduated with honors. For another year she attended a high school, but this did not fulfill her ambitions. In 1928, she enrolled in the prestigious School of Nursing in Warsaw, Czyste,2 which was adjacent to a Jewish hospital of the same name. In 1937, she worked as a nurse in charge of a healthcare center near the hospital. At the same time, she served as chairwoman of the Association of Jewish Nurses in Poland.

In 1937, she immigrated to Israel. She first lived in a kibbutz, then between 1938-1944 she worked at Hadassah Hospital in Tel Aviv as a general nurse and as a nurse in the operating room. In 1944 she was integrated as a nurse in the public healthcare system in Tel Aviv. Most of her family members in Europe were killed during World War II. She asked to go to work in the Displaced Persons (DP) camps, but her request was not granted. She said that she felt great satisfaction when she began working as a head nurse in the internment camps in Cyprus in the years 1946-1947. From there, she immediately returned to Israel where she played a role in the War of Independence as a nurse and officer in the Israel Defense Forces (IDF). She helped organize military hospitals in B’ilu, Sarfand (Tzrifin) and Tel Nof.

After the war, in 1949, she was appointed to a senior position, as national supervisor of medical services in the immigrant camps. Upon completion of this role, Ida went on to a year of training in Sweden and Finland, with funding from the World Health Organization. Upon her return to Israel, she worked for the Tel Aviv Municipality in the field of public health. In 1956, during Operation Sinai, she was appointed National Superintendent of Emergency Hospitalization (after her appointment as head nurse did not materialize, as detailed below). She completed her duties as a district superintendent nurse in the Division of Public Medicine in Tel Aviv.

For all those years, Ms. Wissotzky was a member of the National Secretariat of the Nurses’ Union, a member of the Executive Committee of the Histadrut (General Organization of Workers in Israel), a member of the National Secretariat of the Workers’ Council and an activist in the political party Mapam (United Workers Party), to which she bequeathed her property after her death. When her husband fell ill, she abandoned all her activities and devoted her time to caring for him for two years (1977-1978), even though she was already in poor health herself. Indeed, 13 months after his death (in 1979), Ida Wissotzky died and was buried next to him.3

In 1918, the first school for nurses was opened in Israel, which is considered the beginning of nursing in Israel. The formative years of the profession, naturally, were in the first decade after the establishment of the State of Israel (1948-1958). Nurses played a significant role in realizing the Zionist vision of building a Jewish homeland. Like many members of the Yishuv (pre-State Jewish settlement), many nurses took part in the effort to absorb immigrants and establish the state. Some of these nurses are known to the public, while others remain unknown, despite the importance of their work.

This article tells the story of the nurse Ida Wissotzky, who was a warrior woman as well as a compassionate nurse; an "angel in white", as she was called by Meir Yaari, the leader of the Hashomer Hatzair youth movement to which she belonged. The article describes her actions and beliefs, which represent this profession for women as it developed, gender values, and the political struggle and ideology of the years of nation-building. At that time, most of the nursing leaders were members of the Hadassah organization,4 which advocated non-interference in local politics. On the other hand, nurses who worked in the public healthcare system in Israel were active in the Histadrut, and most of them were members of the Mapai party (Workers' Party of the Land of Israel).5 In this context, Herzog argues that Henrietta Szold received her place on the National Committee thanks to Mapai, which eventually became identified with the political establishment, and that Szold is noted for her actions and extraordinary personality. Thus, the individualization of her work serves as a mechanism of exclusion of women, and especially the organized activity of women, from historiography.6

Since the 1930s, there was opposition between the various labor movements. On the one hand, an institutionalized and pragmatic approach characterized Mapai; on the other hand, a militant-radical approach characterized Mapam.7 Ida Wissotzky belonged to the Mapam.

**Background**

In recent years, research on women and gender in the context of the history of the Yishuv has expanded. The issue of absorption and immigration is discussed by researchers,8 most of whom point out the difficulties related to immigration, even if it is undertaken voluntarily. Davidovich and Schwartz claim that although Zionist ideology portrayed the new state as the homeland of the Jewish people and recognized the importance of the ingathering of the exiles, many people feared the Zionist enterprise would fail under the pressures of mass immigration and the health problems that accompanied it. Researchers further claim that the healthcare system played a key role in absorption of immigrants, and that a ramified system of welfare workers, nurses, and doctors acted not only to cure, but also to educate the public and shape public healthcare.9

Ida Wissotzky, as the head nurse of the Medical Service for Immigrants (MSI), played a key role in this process. Steyer-Livni claims that members of Israeli organizations tried to transform a difficult and complex migration process into a fixed and simplistic scheme, moving rapidly “from Holocaust to resurrection”, and ignoring difficulties and problems.10 Such gaps in perception or in the goals of offering assistance to immigrants can be seen in studies dealing with the absorption of immigrants in the years before the establishment of the state, especially in the healthcare context. Prominent in this field is Stoller-Liss’ study of models of the absorption of immigrants in the healthcare system, which shaped the idea of public health as a national task.11

Another field of research deals with women’s participation in the effort to establish the State of Israel, their contributions, roles, and status as an influential force in society.12 Researchers such as Geva, Shilo, Herzog and others, discuss women and gender issues in the early years of the Yishuv and the establishment of the State of Israel. Shilo notes that although such research is expanding, key questions have not yet been examined with respect to gender issues and women in the Yishuv. She notes that professional women, who she calls nation-builders, changed the character of the country, and that a historical analysis of women and gender can shed new light on that society. In her book *Women Build a Nation*, Shilo discusses professional women, medicine, and nursing, among other issues. She notes that, unlike nurses in hospitals who follow doctors’ instructions, public healthcare nurses are required to take initiative, in accordance with her knowledge.13

This research is characterized by a discussion of the primary arenas in which women were engaged during the early years of the nation: education, healthcare, and raising children.14 Their involvement in motherhood and nursing enabled women to become actively involved in the first decades of Zionist society. According to Margalit-Stern, in the process of nation-building, a new definition emerged of the roles of women, (authority through motherhood), and she notes the welfare organizations that women founded, managed, and operated. These organizations elevated motherhood to a sacred status. This was of national importance, and she sees the process as an intentional act to symbolize motherhood as meeting the needs of the collective.15 Like other women who promoted the role of nurses in the public program for maternal and child health (“Drop of Milk”) although many were not mothers themselves, Ida Wissotzky also combined professional and political activities.

Most studies on the history of medicine deal with the development of various services in terms of timeline of events in their era. Schwartz and Shachuri note that in the study of the history of the Yishuv period and the beginning of the state, little emphasis is given to the history of medicine. The study of women in the fields of medicine and treatment is even more scarce. Schwartz and Shachuri do this by writing an article about Dr. Aharonova, who, although she was not a mother, preached that motherhood was part of the national mission.16 It seems that in many cases, the legitimacy of the women who wished to be influential was achieved through advancing the goals of motherhood and child-rearing.17

Studies on the history of nursing in Israel, which is characterized as a profession for females, do not discuss these issues. Most of these studies focus on describing the development of the profession, rather than development of gender roles.18 Bartel points out that researchers who describe the work of Hadassah or tell Szold’s story do so because of the importance of medical practice and public healthcare to the Zionist enterprise. The gender aspect has hardly been touched upon in studies on nursing, despite Szold’s centrality in the field.19 Some recent articles do highlight the importance of nurses’ involvement in the political world to advance the goals of the profession.20 However, they do not discuss the prices that these nurses paid for their political involvement, although the records show that nurses struggled to secure their place and professional future, even before the establishment of the state.21

Ida Wissotzky’s name is associated with various periods in the early history of the State of Israel (her work in the internment camps in Cyprus, during the War of Independence and in the management of healthcare services for the immigrant and transit camps). During every period that was significant to the country, her name comes up in numerous contexts that were significant to the establishment of the country, regarding her highly appreciated and groundbreaking achievements, in contrast to the paucity of information available in the archives about her work. Ida Wissotzky wrote in professional newspapers and kept handwritten drafts from lectures at conferences. While she was active in Mapam and the Hashomer Hatzair movement, all of these were preserved in the archives at Givat Haviva, and are the basis for this article.

In light of the fact that most of her family members were killed in the Holocaust, and that she had no children, the only orally-transmitted information about her is based on an interview with two nurses who worked with her, which also makes a small contribution to the current study.

**Chapter One: 1928-1937 - Ida Wissotzky's personality and work: The formative years**

1. School of Nursing in Warsaw

The Czyste School of Nursing in Warsaw was established in 1923 as an initiative of the hospital’s doctors to train Jewish nurses, since Jews were not being accepted into other schools. The Warsaw Municipality and the American Jewish Joint Distribution Committee (JDC),22 participated in the school’s financing. The JDC recruited an outstanding nurse from the United States: Emilia Greenwald.23 From 1923 to 1927, Greenwald ran the school. In 1927, the school won a prestigious award and great acclaim. Greenwald then returned to Israel, and the school began to be run by teachers from among its alumni.24

Greenwald was captivated by the persona of Henrietta Szold (like Szold, Greenwald was not married and had no children). Her professional attitudes were influenced by perceptions prevalent in New York at the time, 25 namely socialized medicine, which combined socialist values and social feminism, allowing nursing in general and public healthcare nurses in particular to stand out.26 The students were carefully selected according to the spirit of the school.27 Excellent first-year students were sent to the United States to train as instructors and principals.28 Similarly, the nurses from Hadassah Hospital were sent to the United States for training.

After her success in Warsaw, Greenwald was sent by Hadassah to Israel to establish a network of community health centers.29 In 1932, Greenwald was asked by Dr. Yasky30 (the director of Hadassah) to prepare an evaluation on the hospital's nursing services. In 1933 she submitted two evaluation reports, which the Hadassah nurses were quick to adopt.31 All of this brought about a congruence in the conception of nursing in Hadassah and Czyste, which at the time were both considered prestigious schools. Bartel points out that both schools were founded around the same the time by American nurses. The main difference lies in Hadassah’s preparation to care for immigrants beginning in the early 1920s, and the component of preventive medicine in their training.32

Nursing at Hadassah was founded on the ideology of the Women’s Zionist Organization of America (Hadassah), according to which followers of all religions should be treated equally. The feminist spirit and the humanitarian vision stood out in education in both schools.33 This spirit can be seen from the words of one of the graduates (Lisa Mironzik) to the nurses’ newspaper in Israel:

The aims of the study program were concrete: to educate the students to a high level of cultural qualities, to develop their emotional connection to the profession, to teach them to care for patients through love for others, to teach the students to see the person they are caring for not only as a patient but as part of his family and environment ...34

The schools were similar in that the teachers were involved in the work of the departments, and the International Association of Nurses accepted the Warsaw Nursing school into its ranks as members in the organization.35 Many of its graduates were recognized for their courageous and extraordinary deeds.36 Bella Blum-Bilitzka, a first-year graduate served as the school's principal until its closure during the Holocaust. She continued to operate the school underground, even when Poland was under Nazi occupation. In an interview, Blum-Bilitzka’s daughter spoke about her mother’s heroism and the consciousness of their mission held by the nurses in those days who went to the profession to give, and not for a salary.37

Many of the school’s students enlisted in the Red Army before the war. Others immigrated to Israel, Ida among them (in 1937).38 Ninety-two of them were began working in their field in Israel, and most of these contributed to the War of Independence, the absorption of immigrants during major waves of migration, and in Operation Kadesh.39

The history of this school is important for understanding Ida Wissotzky’s education. Her professional, organizational, and public activities and her ideology have their roots in those days. Until her immigration to Israel in 1937, she served as the head of the Association of Jewish Certified Nurses in Poland,40 in parallel with her activities in the Hashomer Hatzair movement. The union she founded was recognized by the Warsaw municipality and by the Socialist Party of Poland.41

1. Participation in Hashomer Hatzair

At that same time, Ida’s fate became linked with that of Meir Yaari, the undisputed leader of Mapam, a political party that grew out of the Hashomer Hatzair youth movement. Hashomer Hatzair was founded in Galicia under the name Hashomer in 1913. The Warsaw branch developed afterwards.42 In 1916, it was renamed Hashomer Hatzair.43 Unlike other youth movements, this movement had a goal to be fulfilled practically: immigration to and settlement in Israel.44 Halamish and Gan point out that only in the mid-1920s did the movement add an ideological basis: Zionism and socialism, and later the fraternity of all peoples (with a focus on humanism and love of humanity).45 This approach was in line with the education Ida received at the school in Warsaw. Its main goals were to educate the students to a high level of cultural traits, and to see the person they care for not only sick but also part of his family and environment and the love of others.46

The term “Hashomer Hatzair” refers to three organizational frameworks: a. the youth movement founded in 1913; b. the national kibbutz movement founded in 1927; c. the political party Mapam, founded in 1946. Halamish notes that in those days, the influence of the youth movement and national kibbutz movement exceeded their size, and even exceeded the electoral power of Mapam. During Yaari’s leadership, the movement flourished. After merging with Ahdut HaAvodah in 1948, they won 19 seats in the first Knesset, under his leadership. Yaari was strongly identified with the movement, and admiration for him was on the verge of a personality cult.47

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[lines 185-191]

In 1933, Yaari suffered an attack of meningitis. He lost consciousness and was hospitalized in Warsaw where, he said, he met his saving angel in the person of Ida Wissotzky. She stayed by his bedside day and night until the staff became convinced that she was his fiancée. A special and affectionate relationship developed between the two.50

The deep friendship that connected the nursing school alumni who were members of the Hashomer Hatzair movement began in Warsaw and lasted for the rest of their lives.51 They lived and worked together.52 Ida Wissotzky, in her role as head nurse in Israel, knew how to recruit them to work, and they responded to her. Evidence of this connection can be found in Wissotzky’s writings:

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[lines 201-242]

Ida viewed the nurses with whom she had studies as angels who gave their lives to help their patients and at the same time took active part in the resistance against the Nazis. This would characterize her view of the need to contribute and assist others during subsequent events.

**Chapter Two: 1938-1948 - Work and contribution in the years before the establishment of the State of Israel**

The nursing leadership in Israel was aware of what was happening in Europe. Kantor (the head nurse at Hadassah), Szold, and others noted in their speeches that the nurses in Israel must prepare for the arrival of war refugees, who they described in their speeches as war wounded and burn victims.54 Emphasis was placed on the public health and healthcare for immigrants.

As mentioned, 92 seniors from the Czyste School of Nursing immigrated to Israel before the establishment of the state. Wissotzky wanted to fulfill the mission of the Hashomer Hatzair movement and in 1937 she and her husband became members of Kibbutz Ein Shemer, where her friend Sonia Milstein lived. But she felt that she was not fulfilling her professional vocation, and in 1938, she and her husband moved to Tel Aviv, where she worked at Hadassah Hospital and in public health.55 She encountered difficulties during her integration into the hospital staff, as did other nurses from Czyste Hospital. She and the other nurses had to fight for their status and in order to receive the same working conditions as those of the Hadassah nurses. She was assigned to the operating room for evening and night shifts, but it was hard and frustrating work for her.56 Despite the similarities described between the two schools, the tension between the graduates was reflected in the feelings of discrimination experienced by the Czyste alumni.57

In parallel with her work as a nurse, Ida also worked for the Haganah. At that time, women were usually recruited to this organization to fulfill first aid and relief roles,58 such as being integrated into roles with Magen David Adom. Although Wissotzky does not mention this in her memoirs, an in-depth search of the Haganah’s archives uncovered documentation of her membership: her number was 876.59 As part of the Haganah’s medical services in the Tel Aviv District, established in 1929, courses were held for first aid instructors. These were held in Hadassah’s room for trauma cases.60 No mention of first aid and training was found in Ida's memoirs. According to records from that period, the women were satisfied with the nursing roles, and many viewed their work as a vocation.61 Only later did studies address their frustration and the aspiration for equality among women in the Haganah and the military. In those days, these activities were the basis for women to make a contribution to the Zionist effort, as the women aspired to do.

In an interview, Ida described how one night a ship of illegal immigrants arrived on the shores of Tel Aviv. The people on board were taken by ambulance to the hospital, and when British police arrived, they found the beds occupied by the fake patients. At night, the illegal immigrants were then transferred to private homes by members of the Haganah organization.62 No further details were found in the scanned documents, but newspapers at the time described the arrival of the “Tiger Hill” immigrant ship the shores of Tel Aviv, testifying to the legitimacy of the incident. A newspaper article from September 4, 1939 states that the number of illegal immigrants was 1,205 and that five men and five women, suffering from cold and exhaustion, were arrested at Hadassah Hospital in Tel Aviv.63 The newspaper *HaTzofeh* reported that 200 illegal immigrants evaded arrest and that ten injured people were found in the hospital when the police arrived at the scene at ten o'clock at night.64 The records show that at least three illegal immigrant ships reached the shores of Tel Aviv. Between 1934-1948, about 130 illegal immigrant ships set out for the shores of Israel, with over 107,000 illegal immigrants on board. Several illegal immigrant ships arrived at the shores near Tel Aviv, two of them before the start of World War II.65 In his letters, Dr. Sheba mentioned the major work undertaken at Hadassah Hospital on Balfour Street due to the arrival of the illegal immigrants.66

Ida's connection between her place of origin and the contribution of her profession to Zionist activity as she perceived it…

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[lines 286-399]

**Chapter Four: 1947-1949 - Service in the army and the War of Independence**

The War of Independence began on November 30, 1947, the day after the UN resolution on the partition of the British-ruled Palestine Mandate. The war lasted about a year and a half. It claimed about 6,000 victims (about 1% of the total population) and about 950 injured.83 Around the time of the outbreak of the War of Independence, Dr. Sheba was appointed head of the medical services, which became an independent corps that recruited medical and nursing personnel.84 At the beginning of the fighting, nurses were recruited on a personal basis, including 147 nurses who were recruited to the combat units, although they did not take part in the fighting. Most of them had previously served with the Haganah, Magen David Adom, or with Israeli public healthcare clinics.85 By the end of the war, there were 263 nurses in the IDF, but this number did not meet the needs of the army. Like other nurses, Ida was recruited on a voluntary and acquaintance basis.

Ida was honored for her military service. The documents indicate that she was active mainly on the southern front, as head nurse in a military hospital (Hospital No. 13, Sarfand, in the Tzrifin camp, which became a government-run medical center called Assaf Harofeh after the war). And although Ida was enlisted in the army without a rank, Dr. Sheba equipped her with an entry permit to all the hospitals in the country so she could extend her assitance.87 Most of her contribution was in Operation Yoav, which claimed many lives, and many wounded were taken to hospitals.88 Within 48 hours, Ida managed to set up a military hospital with 250 beds, equipped and ready to receive the wounded.89

Dr. Sternberg, who worked with Ida after the war, first met her at the IDF Medical Service headquarters, the day after Operation Yoav began. Their first meeting was on Saturday at the medical service headquarters on the Jaffa-Tel Aviv border, after dozens of wounded were brought to a hospital in Sarfand. As Dr. Sternberg wrote in his book:

Ida did not talk much, but in her actions, a lot of tension could be felt. She demanded: Give me permission to get the equipment and furnishings and I will get them. I put together a list of equipment with her and went into the office of Dr. Haim Sheba, who had returned a short time earlier from the southern front. He was shocked by the sight of the many dead and wounded.90

Ida’s characteristic organizational ability was greatly appreciated, and paved the way for her next position - medical services for immigrants. At the end of the war, Dr. Meches Lindenfeld, commander of Hospital 13, wrote a letter of thanks and appreciation for her service in the army on behalf of Dr. Sheba, as part of an official day honoring the IDF.91

**Chapter Five: 1949-1953 – Mass immigration and Medical Services for Immigrants**

In April 1949, Ida enlisted for her next mission, perhaps the most significant and central in her life: working in the immigrant camps. At that time, there was a severe shortage of medical personnel in Israel, leading to competition between the hospitals and the healthcare clinics for the recruitment of nurses and doctors. The staff shortage was so severe that it was discussed in the Knesset on August 2, 1949.92 At the same time, the nurses were demanding that the terms of their employment must be improved, especially if nurses who were married and had children were to be recruited. At the Knesset hearing, the nurses’ representative stated that that the nurses had complied with the orders to go to work in the DP camps and the internment camps in Cyprus, and are now were being required to work in immigrant camps.93 Professional values and the struggle to improve conditions and wages for nurses were also discussed. Ida took part in this effort. Her activities led to a closer connection with the doctors, the army, healthcare services for immigrants, and especially with Dr. Sheba, Dr. Sternberg, and his deputy Dr. Pada.

In parallel with her professional activities, Ida continued her public activities in the political party, the Workers’ Council, and the Nurses’ Union. In all these entities, she championed the nurses.94 These two tracks of activity (medical and political) were to collide in the future, but in the early 1950s Ida was at the height of her professional and political activities. It is possible that the status of the Mapam party in these years had the effect of promoting her work. But without a doubt, her ability and contribution during the war led Dr. Sheba, the head of the service, to believe in her ability.95 When she volunteered to manage the nursing camps, Dr. Sternberg immediately approved her request.96

The National Committee, established in 1920 during the British Mandate, was intended to be the executive body of the National Assembly. From 1928, it was officially recognized by the British Government and also managed healthcare matters.97 When Jewish immigration to Israel began during World War II, the National Committee decided that an institution for the medical treatment of immigrants should be established. The MSI was established in 1944 to serve as an entity dedicated to the treatment of immigrants at medical emergency departments, providing medicals examinations upon arrival, and providing healthcare coverage. In 1946, the MSI was transferred to the management of Hadassah, headed by Dr. Grushka and with staff from Hadassah. After the establishment of the State of Israel, the government took over the management of MSI, and camps for immigrants were set up at various sites.98 The medical service was headed by Dr. Sternberg, who was Dr. Grushka’s deputy, and Ida Wissotzky was appointed as head nurse.99 As with her previous appointments, doctors recruited her to management positions based on her abilities. Sternberg wrote that in return for her volunteering, Ida demanded a “free hand” and thus created a new role of head nurse. Sternberg said she filled this role with passion and endless devotion and thus “…is recorded on of the brightest pages in the history of compassionate nurses in the country.”100

After the establishment of the state, 22 camps were opened throughout the country, with 15 clinics, six dental clinics and five inpatient institutions, which contained 350 beds.101 Following the massive immigration that began with Israel declaring its independence in mid-1948 through the end of 1951, about 700,000 immigrants doubled the Jewish population.102 The immigrants’ origin, demographic makeup, the poor level of hygiene in the camps, and the prevalence of infectious diseases, necessitated an accelerated development of preventive medicine and public healthcare. Among the immigrants were thousands of ill people. This exacerbated the challenge of providing healthcare, alongside the shortage of skilled healthcare staff.103 In addition, many immigrants arrived without prior medical screening and in severely poor physical condition. The harsh conditions in immigrant and transit camps caused many to become sick and contract various contagious diseases. A tenth of the people in the camps needed medical care.104

By 1951, immigrants made up 75% of the total population.105 Almost half of the residents of the country were Holocaust survivors. Slightly lower was the number of immigrants from North Africa and Asia.106 The enormous scale of immigration further intensified the debate on the issue of immigrant absorption.107 The immigrant absorption policy was based on the Declaration of Independence, which called for the “ingathering of the exiles.” Following government guidelines, the country’s population would double in the first four years, especially as the Jewish Agency stated that every Jew had the right to settle in Israel as their homeland.108 The roadmap for a healthcare policy was outlined by Prime Minister David Ben-Gurion. In a Knesset debate on November 21, 1949, he stated that it was better for sick children to be treated with faith and love in Israel by its doctors and nurses, and if they were doomed to die, it would be better that they die in Israel.109

Despite their common goals, the treatment of immigrants was affected by political tensions between the entities involved: the Jewish Agency, the JDC, and the healthcare funds all wanted to be involved in and influence healthcare for immigrants. This mission offered women and women’s organizations a suitable place for their vision of promoting health and education towards healthy motherhood. Under the existing conditions, Ida’s leadership was exceptional. At each site, she appointed a head nurse from among her friends and colleagues, and around them she built a team with incredible speed. Many of the practical nurses and caregivers learned while working. Sternberg describes many precautions that Ida, as head nurse, took to prevent injury to patients. For example, iron discipline was maintained regarding the medicine cabinet, which in each clinic and in ward was arranged in exactly the same way to prevent mistakes or substitutions.110 During this time, the number of nurses increased, but was still insufficient to meet the needs and face the many challenges presented by the massive immigration. While hospitals and clinics were opened throughout the country, nursing schools provided new staff members only after three years of rigorous training. In addition, the existing teams were preoccupied with caring for the wounded and disabled from the recently-ended war, preventing the treatment of epidemics and diseases such as tuberculosis and polio that were prevalent in the country.

Most of the nurses recruited in the immigrant camps were Holocaust survivors themselves, and their practical work had begun in the DP camps or internment camps on their way to Israel. To their ranks were added immigrant women from North Africa, who worked in the immigrant camps, supervised by a registered nurse. Organizations such as the Women’s International Zionist Organization (WIZO) and the Working Mothers Organization, which focused on helping mothers and children, assisted the nurses in the camps and institutions across the country.111

Between 1949-1953 Ida Wissotzky was the Chief Nurse of the IDF. Many challenges had to be addressed in a short period of time, exacerbated by a shortage of staff and equipment. There was mutual trust and appreciation between Ida Wissotzky and Dr. Sternberg, and the latter even devoted a chapter in his book to the profession of nursing under her leadership.112

The Israel State Archives contains a file titled Medical Nurses, which deals with the recruitment of nurses. The discussion on recruitment was detailed. An effort was made to recruit immigrants from all the hospitals, and especially from the graduates of the nursing schools.113

The competition for staff and equipment reflected the tension between management of healthcare services in the camps and management of nursing by the Ministry of Health.114 On November 8, 1949, on behalf of the director of the Ministry of Health, Shulamit Kantor (the state's head nurse), Dina Kaplanovich, and Chaya Zaslavsky visited the immigrant camps in Be’er Yaakov, Rosh HaAyin, Beit Lid and the Degani Hospital in Jaffa for mothers and children. The purpose of the visit was to assess the medical staff in the camps. The inspection found that there was no shortage of nurses.115 The review shows that medical services were provided in clinics and hospital rooms. In all the camps, there were 35 working nurses and 121-123 beds. Each camp had delivery rooms and two midwives, who helped women who did not have time to be taken to the hospital.116

Immigrants from different countries stayed in the various camps. For example, a hospital was established in Rosh HaAyin for immigrants from Yemen, many of whom had serious health problems, especially among the children who had been flown to Israel. The management of the MSI desperately needed additional nurses, which led to severe disagreements between the MSI and the nursing department in the Ministry of Health. Unlike Kantor, head nurse at the Ministry of Health, others expressed admiration for this action.

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[lines 473-486]

**Chapter 6: 1954-1958**

As a background for these events, the reality in the Ministry of Health in the first years of the nation must be outlined. Health ministers changed frequently, and this ministry was also in charge of other ministries. Institutions with a political position (the Histadrut, the government and the public healthcare funds) fought for control of public healthcare in Israel. There were disagreements that led to frequent changes of managers and unrest at the top of the ministry. Dr. Meir, affiliated with the public healthcare system, was appointed as the first director, but was soon forced to resign. 134

Tamir describes in detail the struggle of the department heads under the general directorship of the Ministry of Health, Dr. Meir, in 1949-1950. This indicates that the conflict was led by department heads at Rambam Hospital, with the support of the Medical Association.136 Ideological disagreements between Dr. Meir and the heads of the divisions in the Ministry of Health forced the government to discuss the situation and to order the dismissal of the general manager and the heads of the divisions. The second Minister of Health, Dr. Sheba, was appointed in 1951. He wanted to lead a reform in the healthcare system that he strongly believed in: a state-run healthcare service. But he, too, submitted his resignation about a year later, once he realized he would not get support for his plan. This was the situation in the Ministry of Health, when after a government crisis following the disgraceful business of the Lavon affair and his resignation, a new government was formed in 1955.137

Israel Barzilai was appointed as the sixth Minister of Health, the first from the Mapam (of which Ida was a member).

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[Lines 494-504]

The senior nurses in the Ministry of Health in those days were mostly from Hadassah. The Department of Nursing was established during the War of Independence as part of the Ministry of Health, and was headed by Shulamit Kantor (beginning in 1948), who prior to that had run the School of Nursing at Hadassah. The department was managed in the spirit of Hadassah. Other senior nurses from Hadassah were appointed to positions in the Ministry of Health and other hospitals.

Shahaf claims that in the early years of the state, two factors influenced nursing: the nursing department, which was a state body and dealt with the professional aspects; and the Nurses’ Union, which dealt with working conditions and wages.138 Cantor was replaced by Chaya Krystal-Rosenthal, also of Hadassah (she had worked as an operating room nurse and later was in charge of training the nurses). The incoming Minister of Health asked to appoint two people identified with Mapam and to appoint Ida Wissotzky as head nurse. The first appointment was successful, but Wissotzky’s appointment was strongly opposed by both the staff in the nurses' department and the trade unions. As written in the newspaper *Maariv*:

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[lines 508-545]

Krystal-Rosenthal opposed Wissotzky’s appointment. In a meeting between the Health Minister, Krystal-Rosenthal, and five inspectors in the Ministry of Health, they reviewed Wissotzky’s work in Cyprus and her work in Israel with the new immigrants. However, Krystal-Rosenthal replied, “We are not castaways… Our history does not fall short of Wissotzky’s.” The Minister of Health, according to *Maariv*, replied that Ida had already been fired from the Ministry of Health four years previously for being a Mapam member. The writer stated that this was not true, and that she had returned to her work in Tel Aviv.141 The newspaper *Haboker* wrote: “General purge at the Ministry of Health in Jerusalem and its branches are likely being prepared by the Minister of Health, Mapam member Barzilai.”142 The Nurses’ Union issued a statement emphasizing that each appointment for key positions were previously determined according to the opinion of their organization and the Nursing Advisory Committee of the Ministry of Health. The National Committee of the Nurses’ Organization convened to discuss the dismissal.143

At the end of the debate, Ida’s appointment was rescinded. Head nurse Krystal-Rosenthal withdrew her own resignation after an agreement was reached with the management of the Ministry of Health, in light of the danger of the department disbanding.144 With her, other nurses also rescinded their resignations: Esther Botishansky (the National Supervisor of Health Services), Tikva Koloditsky (the National Supervisor of the Mentally Ill), Gertrude Trit (the Supervisor of Nursing Education) and Nechama Gutman (the Deputy Supervisor of Public Health).145 In the compromise reached, it was agreed that Ida would not be associated with the nursing department. Following this, it was decided to appoint Ida Wissotzky to another position, in the field of emergency care. In response, Krystal-Rosenthal was asked to continue in her position for another month.146

In the face of the nurses’ opposition to her appointment, the doctors with whom Ida had worked in the army and the MSI mobilized in an extraordinary move to protect her name. In February 1956, four doctors (including Dr. Sternberg, Dr. Sheba, and Dr. Pada), and three nurses, published a letter in the newspapers praising Ida's experience and abilities: “She was a nurse in charge of operating rooms in Hadassah during the events of 1936-1939; and was a devoted public nurse in poor neighborhoods, in the internment camps in Cyprus, during the War of Independence and in the immigrant camps. These were, by all accounts, major roles in the field of healthcare in a country absorbing immigrants.” Among other issues, they emphasized her care for immigrants from Yemen, who faced serious health problems: “She was alone but assertive in her decision to help and act, and was sometimes harsh with herself. She worked day and night to help the masses of the needy especially, the vulnerable infants and women giving birth, and with every wave [of immigration], this issue came upon her again.”147 Although they were reluctant to mention their names in the newspapers, the doctors felt obliged to write their positions on the mistakes made and the harm done to one of the pioneering figures among healthcare workers in the country, through no fault of her own.148

The Yad Yaari archive in Givat Haviva contains an unsigned letter to Meir Yaari, by an author who identified himself as an activist in the Mapam party and chairman of the workers’ committee of a government ministry (the Ministry of Transportation), criticizing the failure of the appointment and condemning the fear of the newspaper editors. He notes that this was a severe blow to the party, and that it was not easy to obtain a mandate as a Minister of the Knesset:

One of the warriors who never let the conscience of these people rest was Ida; her devotion and concern for the little man and his affairs. From you, Meir, I would ask you to place all the weight of your authority ... to immediately put Ida to work in the Ministry of Health with pride and, in fact, at the front door.150

In an interview with Malka Gerbler, a nurse who worked for the Nurses’ Union with Ida, she confirms the opposition among the members of the union to Ida’s appointment.151

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[569-585]

In her memoirs, Ida noted her disappointment at the party’s failure to side with her. She did not mention the Nurses’ Union. She felt she had been a victim of the political struggle for appointments.159 Another explanation can be offered against the background of her activity in the Nurses’ Union. Malka Gerbler, in an interview, described their common struggle against political threats in the Nurses’ Union. Pnina Feiler, a nurse who immigrated to Israel in 1938 and was Ida’s partner in struggles with the Histadrut, added that Ida was excluded from nursing positions due to her roles and activities with the Mapam party. Feiler, like Ida, worked at Hadassah on Balfour Street in Tel Aviv and was a member of the Haganah until the establishment of the state. Due to this, after the War of Independence, she was forced to work in a private clinic and was not hired at a hospital.160 Later, Feiler noted that she had been drawn into political activity by her belief in equal rights, and that she joined the Histadrut out of a desire to fight for nurses’ rights (maternity leave, appropriate working conditions, etc.), although she paid a personal price for this – even the general public healthcare clinics would not hire her.161

Wissotzky returned to Tel Aviv at the end of April 1958. She continued to volunteer in the field of emergency healthcare, which now also included the recruitment and placement of nurses during emergencies (at that time, Tzipkin, the director of the nursing department, was also affiliated with Mapam). Looking back, there is no doubt that a feeling of loss caused Ida to return to Tel Aviv. Her disappointment with her membership in the Histadrut, in which she tried to advocate on behalf of the nursing profession, cannot be separated from her disappointment with the members of her party, with whom she fought over her appointments.

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[600-708]

*Activities in the Histadrut*

For decades, Ida Wissotzky was active in various institutions. She was a member of the National Secretariat of the Nurses’ Union, a member of the Executive Committee of the Histadrut, a representative at the center for the public healthcare funds, a member of the National Secretariat of the Workers' Council, and a member of the Mapam central institutions, especially in the party’s branch in Tel Aviv.167 The records attest to her political activities, which began in Warsaw168 and continued with Mapam as early as 1943.169

With the establishment of the state, the Histadrut gained much influence and power. As part of this entity, the Nurses’ Union was, in the early years, dynamic and active, mainly dealing with basic questions, such as who could be a member: only registered nurses or also practical nurses? Most of the disagreements were between Hadassah and the public healthcare funds. This affected the attitudes of nurses in the various institutions. Subsequently, these discussions were conducted among other groups of nurses. Most of the strikes in the first years were conducted in opposition to the position of the trade union in the Histadrut, and were supported by the local nurses’ committees in the various institutions.170

The Nurses’ Union changed its name three times in accordance with the policy it was following.171 Its first conference was held in 1947. The nurses’ demands for higher wages received little sympathy in the trade union, which threatened to expel the nurses’ organization from the Histadrut.172 The status of the Nurses’ Union strengthened after it sent nurses to work in the internment camps in Cyprus and sent two representatives to the World Nurses' Organization.173

In the 1950s, as its power increased largely due to the shortage of nurses and resultant high demand for them, the nurses advocated for better wages and working conditions. Strikes continued to characterize the nurses’ struggle through the 1960s and 1970s. In many cases, the Histadrut did not support the nurses’ strikes, and sometimes even opposed them. In 1964, there was a wave of strikes in many sectors of the economy, including the nurses, who went on strike without the approval of the Histadrut. Their strike began in the operating rooms at Beilinson Hospital, extended to hospitals in the rest of the country, and ended with a strike by nurses working in public healthcare.174

Ida, who was a member of the National Secretariat of the Histadrut, demanded that Yeruham Meshel, director of the Histadrut’s trade union department, appeal the decision of the High Committee, which left nurses out of the discussion of wage conditions.175 Only in 1980 was nursing recognized as a preferred profession, but the expected change did have a practical impact, and the nurses' organization was forced to continue its struggles.176 In Ida’s estate, there are preserved drafts of her speeches, likely given at the first meetings dealing with labor shortages, in which she discussed immigration and the shortage of nurses. In addition to her activities in the Histadrut as a nurse, Ida was elected in 1963 to the secretariat of the Mapam political committee, which included, among others, the party leaders Meir Yaari and Yaakov Hazan.177

In 1952, ahead of elections in the Nurses’ Union, and as the Mapam party’s representative, Ida attended conferences around the country. She condemned the activities of nurses affiliated with the Mapai party, who did not advocate for the nursing profession. She noted that work in the immigrant camps was led by nurses from Mapam, who worked under extremely difficult conditions, and that the leadership of the Nurses’ Union did not help with this work, and in fact hindered it, out of narrow interests based on political party lines.178 These issues indicate the blend of professionalism and ideology that characterized that time.

At a conference of the public healthcare system, which was subordinate to the Histadrut at the time, she spoke about the activities of the “green nurses” (public healthcare nurses) working in the immigrant camps, and the shortage of doctors and nurses there due to the lack of volunteers. She noted that of 420 nurses working in the camps, only 19 were registered nurses. Despite the shortage, hundreds of nurses left the profession because of their family situation and because their household expenses exceeded their wages. She called on the Histadrut and the public healthcare system to find a way to significantly improve wages and working conditions so these nurses could return to work, and especially to help return the “green nurses” to their educational and pioneering work in the immigrant camps and throughout the country. She reported that due to the shortage of manpower, the hospitals in the immigrant camps were not properly equipped and there was no staff to operate them. Ida summed up her speech with the words: “It is impossible to sustain and develop the MSI if the labor movement in the country and this conference does not find a way to stimulate volunteerism and guidance in the nursing profession.”

In 1975, at the age of 66 and after 44 years of work as a nurse, Ida retired. She continued her political activities as an active member of the party, loyal to Meir Yaari. Her concern for Yaari was like a mother’s concern for a needy child. The special connection between them can be learned from Yaari’s letter to her five years later:

Since it gives you satisfaction, I lovingly accept all the precious inventory (in liras and shekels) with which you fill are filling my refrigerator. In the meantime, we have reached a new year and I bless you that it will be a good year, a year of peace and wish you many more years of dedication and good deeds for the sake of your party members and the entire public. Yours in friendship - Meir Y.180

This was written after he had tried to dissuade her from worrying about him, but fearing that she had been hurt by his reaction, he agreed to accept the “inventory” with which she filled the refrigerator in his house. In his eulogy to her, he wrote:

Few people have done so much for me, and I have so much thanks to give to them and to her, while I have done so little for them, other than the expressions of affection and encouragement that I have given them in times of distress. I closely followed her tireless action in the various party sectors, and more than once expressed my warm appreciation. About a week before her death, Ida told me that I remained one of the few people for whom she maintained sincere sentiment and appreciation. I heard this from her at a secretariat meeting, when I said a kind word to her and gave her an embrace.181

Ida and her husband Joshua Krinsky were both activists and ideologues. In her memoirs, Ida noted that her husband was also active and supported her activities.182 Since they lost most of their family in the Holocaust and they were childless, her devotion to her husband seemed to have a particularly strong meaning. Ida left her job and devoted most of her time to caring for her ailing husband.183 She died on March 4, 1981, at the age of 72 and was buried next to her husband in the Holon cemetery184

She bequeathed her property to the Mapam party and the Havatzelet Foundation, which was established in 1967 with the aim of supporting the National Kibbutz Movement.185 This was an expression of how she had always viewed her vocation in the national public health missions, and working with mothers and children. It is possible that her public activity served as both a substitute and a purpose. Dr. Sternberg put it this way: “Her world was destroyed by not having a child. She never talked about it, but it was a tragedy that she carried in her heart with indescribable suffering.”186

**Conclusion**

The newspaper *Davar*, which began publication in 1973, presented Ida’s words of thanks for winning the Rotary Good Citizenship Award:

In all my years of work, I have never regretted choosing the profession of nurse, which allowed me to live a full life. I was privileged to participate in missions that the times and reality required. I approached them with apprehension and hesitation, but I also got to work with wonderful people.187

Ida’s life story as a nurse is distinctive in that she was outside the consensus in the nursing profession. This profession allowed her to realize the ideology in which she believed. Her strength was based on politics, alongside the appreciation for her work and skills by doctors such as Sheba, Pada, and Sternberg. Her climb up the ladder of success, as well as her exclusion from the post of head nurse, stemmed from her political activities and the party to which she belonged. She did not work in one of the hospitals and did not belong to the public healthcare system, Hadassah, or the Ministry of Health. Unlike other nurses who advanced up the professional ladder along the usual tracks, Ida progressed due to recognition of her political contributions, and therefore her disappointment was also attributable to the head of the party - Meir Yaari.

However, she worked in the field of maternal and child health, which as Schwartz and Black and Bartel note in their research, was the basis of legitimacy for women’s public activity. The fact that Ida was a nurse was a helpful foundation for her political activities. Herzog notes the obstacle of women’s organizations being relegated to areas that were traditionally perceived as the realm of women, and therefore they never enjoyed full prestige and appreciation. The choice of what constituted “female” arenas of activity stemmed from the image of women held by members of these organizations. Their traditional conception of the roles of women defined the fields of action in which they chose to work and make their contribution to the nation-building enterprise; in this case, helping women, children, and the disadvantaged.188 To a large extent, this is the story of other women who worked during the founding of the State of Israel, who struggled for their ideological values, for the advancement of their profession, and for gender equality, yet remained behind the scenes.

During the years of nation-building, women sought equality and strove to take an equal part in the effort, but in practice, they encountered traditional viewpoints and discrepancies due to gender. Most of the research literature focuses on certain groups. Rosenberg-Friedman deals with religious women;198 Bernstein discusses gender and nationalism in Tel Aviv during the Mandate period;190 Sheila, Kark and Hazan-Rokem offer an extensive discussion on various groups (female immigrants, pioneers, and defenders, women in healthcare, education, and politics, etc.), including the field of medicine and nursing.191 Bartel also addresses, among other things, aspects of gender and professionalism at the beginning of the Yishuv, when the school for nurses first made it possible to train women to work in various professions.192 She notes the development of the nursing profession in Israel and the tension between the administrative nurses and caregiver nurses.193 This seems to still exist today, but it was notable that Wissotzky’s approach combined the two, not out of necessity, but out of a sense of mission.

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[722-725]

Her era was characterized by a sequence of formative and dynamic events: World War II, the Haganah, the internment camps in Cyprus, the War of Independence, the mass immigration to Israel, Operation Sinai, and the Six Day War. During all of these, she was active and influential, struggling for her principles without compromise, as she is remembered by her friends.197

[727-730]

In this article, we weigh profession and expertise in the face of ideology, and the struggle for gender equality as a motive for the nursing profession. In Wissotzky’s time, the balance tended towards ideological aspects and concern for public health. Future studies will ascertain whether today’s trend towards clinical specialization is tipping the scales in the other direction.