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## WOMEN FOR THE BRAZILIAN NAVY: RECRUITMENT AND SELECTION OF THE FIRST MILITARY NURSES (1980-1981)

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**ABSTRACT:** The aims of this social-historical, qualitative study were to describe the recruitment and selection process of nursing officers for the Women's Auxiliary Corps of Naval Reserve, and to analyze the incorporation process of the military *habitus* by the nurses who passed the final exam during the training course. The study used written documents and oral testimonies of four nurses who composed the first class. The data, collected from January to October 2010, were organized, sorted and analyzed according to the historical method and Bourdieu's concepts of *habitus* and field. The training process of the first female nursing officers in the Navy comprised the rigorous incorporation of certain distinct and distinctive determinations related to the behavior required from female military officers, especially in terms of interdictions that reaffirmed male power. In conclusion, the incorporation of the military *habitus*, through the learning of symbols and military gestures, marked the identity construction of female nursing officers.

**DESCRIPTORS:** Nursing. History of nursing. Military nursing.

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## MULHERES PARA A MARINHA DO BRASIL: RECRUTAMENTO E SELEÇÃO DAS PRIMEIRAS OFICIAIS ENFERMEIRAS (1980-1981)

**RESUMO:** Estudo histórico-social, qualitativo, cujos objetivos foram descrever o processo de recrutamento e seleção de oficiais enfermeiras para o Corpo Auxiliar Feminino da Reserva da Marinha do Brasil, e analisar o processo de incorporação do *habitus* militar pelas enfermeiras aprovadas no concurso, durante o curso de formação. Utilizaram-se documentos escritos e depoimentos orais de quatro enfermeiras que compuseram a primeira turma. Os dados, coletados de janeiro a outubro de 2010, foram organizados, classificados e analisados conforme o método histórico e à luz dos conceitos de *habitus* e campo de Bourdieu. Evidenciou-se que o processo de formação das primeiras oficiais enfermeiras comportou a rigorosa incorporação de determinações distintas e distintivas relativas ao comportamento requerido para uma oficial, especialmente no que se referia às interdições que reafirmavam o poder masculino. Concluiu-se que a incorporação do *habitus* militar, mediante o aprendizado de símbolos e gestos militares demarcou a construção da identidade da enfermeira militar.

**DESCRIPTORIOS:** Enfermagem. História da enfermagem. Enfermagem militar.

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## MUJERES PARA LA MARINA DE BRASIL: RECLUTAMIENTO Y SELECCIÓN DE LAS PRIMERAS OFICIALES ENFERMERAS (1980-1981)

**RESUMEN:** Estudio histórico-social, cualitativo, cuyos objetivos fueron describir el proceso de selección de oficiales enfermeras para el Cuerpo Auxiliar Feminino de la Reserva de la Marina y analizar el proceso de incorporación del *habitus* militar por las enfermeras aprobadas en el concurso, durante el curso de formación. Se utilizaron documentos escritos y testimonios orales de cuatro enfermeras militares que han compuesto la primera turma. Los datos, recogidos en el período de enero hasta octubre de 2010, fueron organizados, clasificados y analizados conforme el método histórico y con base en los conceptos de *habitus* y campo de Bourdieu. Se evidenció que el proceso de formación de las primeras oficiales enfermeras de la Marina de Brasil contempló la rigorosa incorporación de determinaciones distintas y distintivas relativas al comportamiento requerido para una oficial militar, especialmente en lo que concierne a las interdiciones que reafirmaban el poder masculino. Se concluyó que la incorporación del *habitus* militar mediante el aprendizaje de símbolos y gestos militares demarcó la construcción de la identidad de la enfermera militar.

**DESCRIPTORES:** Enfermería. Historia de la enfermería. Enfermería militar.

## INITIAL CONSIDERATIONS

This study focuses on the recruitment, selection and incorporation of the military *habitus* by the nurses who passed the first exam for nursing officers in the Women's Auxiliary Corps of Naval Reserve (CAFRM). The time limit starts with 1980, the year when the CAFRM was created. The final year, 1981, refers to the end year of the training program for the nurses who passed the CAFRM exam.<sup>1</sup>

Upon its creation, CAFRM staff consisted of officers (Women's Auxiliary Corps of Officers - QAFO) and soldiers (Women's Auxiliary Force of Soldiers - QAFP). The QAFO should include graduated members, with an academic degree obtained in a higher education program. The QAFP, on the other hand, should include members with secondary professional qualification. The creation of the CAFRM was aimed at responding to the Navy's human resource needs for Military Organizations (MO).<sup>1</sup> In other words, the officer and soldier staff was insufficient for the Navy's needs, demanding higher and technical professionals to work onshore.

The Ministry of the Navy approved the distribution of 100 places for officers, 81 of which were destined for different professions in the health area; in addition, there were 300 places for soldiers, 108 of which were for health professionals. Initially, the Selection invitation approved 100 places for officers, but this number was changed to 202, 56 of which for nurses, equivalent to 28% of the total. The allocation of places for the exam confirms the sense of Maximiano da Fonseca, former Ministry of the Navy's discourse, when he mentioned the recruitment of female health professionals for the army to attend to urgent labor needs in the short term.<sup>1</sup>

To constitute the CAFRM staff, a national public exam was organized, including the following phases: written and oral professional knowledge test, communication and expression test, interview, psychological test, physical aptitude test and health test. Candidates approved in the initial selection process for the QAFO should also conclude the four-month adaptation course for the QAFO with satisfactory results, held at the Physical Education Center Almirante Adalberto Nunes in Rio de Janeiro. Candidates approved for the QAFP should also comply with a number of requisites.<sup>1</sup>

In increasing order, the QAFO established the following ranks: Sub-lieutenant; Lieutenant; lieutenant commander, up to the highest rank of Commander. This hierarchy differed from the ranks reserved for men, who could reach the highest ranks of Captain and Admiral; ranks that were prohibited for women. Other distinctions were inherent in the intervals required for promotions, as women should submit to a long probationary training period of nine years before their definitive incorporation.<sup>2</sup>

Thus, the creation of a female military corps for the Brazilian Navy on the one hand symbolized an advance in contemporary female conditions but, on the other, limited this advance by containing women's ascent inside the Navy, preventing them from rising to the highest ranks, which meant impeding that they would serve as superior commanders inside the institution, as this remained exclusively authorized for men. These limits reflect the power relations deriving from traditional symbolic constructions about gender hierarchy. That is the case because male dominance is manifested through principles of vision and division, as well as classification, leaving women in a state of symbolic dependence, conditioned by male expectation and, hence, subordinated.<sup>3</sup>

In view of the presented problem, the following aims were elaborated: to describe the recruitment and selection process of nursing officers for the Women's Auxiliary Corps of Naval Reserve and analyze the incorporation process of the military *habitus* by the nurses who passed the exam for the Women's Auxiliary Corps of Naval Reserve, during the training program.

For data analysis, the sociologist Pierre Bourdieu's concepts of *habitus* and field were chosen. The *habitus* concept guided the understanding that the incorporation of the military *habitus* modeled a distinct and distinctive practice, which established positions and limits for the first nursing officers in the Brazilian Navy, as the *habitus* works as a grammar that produces practices, in accordance with the objective structures it is a product of,<sup>4</sup> contributing to classify and rank the subjects or groups in different fields.

The field concept was conceived as a structured social space, a field of dominant and dominated forces which in constant interaction, fight to preserve or transform this force field, producing actions.<sup>4</sup> This concept was useful to analyze data on the distributional aspect of the military *habitus*

the military nurses incorporated, which contributed to outline their positions as nursing officers at the Navy Hospital Marcílio Dias, as being situated in a distinguished space means conformity between the agents' practices and the structures of this space.

It should be highlighted that the construction of a historical version, based on the documentary *corpus* defined for the present study, is justified by the need for in-depth knowledge on the simultaneous professionalization processes of women and nurses, especially military nurses in the Brazilian Navy, which completed 30 years of activity in 2011.

This paper's contribution to studies published on the theme takes the form of a deeper discussion on the recruitment and selection of nurses as officers for military spaces, whose incorporation of the military *habitus* serves as an approval to enter this space, which is traditionally reserved for men.

## METHOD

Qualitative historical and social research. Primary sources include written and oral documents. The following written documents were used: Official Gazette of the Federative Republic of Brazil, published on October 8<sup>th</sup> 1980, including the publication of Decree No. 85.238, issued on October 07<sup>th</sup> 1980, which regulates Law No 6.807, issued on July 07<sup>th</sup> 1980, creating the CAFRM; and Ordinance No 1550, issued on November 14<sup>th</sup> 1980, publishing the standards for recruitment, selection and inclusion in the Women's Auxiliary Corps of Naval Reserve. These sources were located at the Navy's Documentation Service. Another written document was the dissemination folder of the exam, kept in the personal collection of a nursing officer from the first class.

Oral testimonies were obtained through four semistructured interviews. As an inclusion criterion to choose the interviewees, qualitative aspects were emphasized, such as: being a military nurse from the first class and designated to the Naval Hospital Marcílio Dias and, today, living in Rio de Janeiro as part of the active or reserve corps.

The researchers decided on the place where the interviews were held: one interview took place at the Navy Hospital Marcílio Dias, two at the interviewees' homes and one at one of the authors' home. Despite the diverse places, they were silent and guaranteed the interviewees' privacy and

comfort, besides contributing to the quality of the recorded testimonies. The average duration of the interviews was two hours and, mainly, the interviewees' participation in the event related to the study theme was addressed, which provided sufficient material for a well-founded interpretation. On average, it took five hours to transcribe each interview and, to guarantee the reliability of the transcribed material, it was presented to the interviewee for the sake of validation.

In compliance with resolution 196/96 on research involving human beings, the interviewees registered their authorization to participate in the research through the Informed Consent Term and signed a letter in which they transferred the rights to the recording of their interview to the Naval Documentation Service. In parallel, the project that originated this research was submitted to the Research Ethics Committee at Anny Nery School of Nursing and Teaching Hospital São Francisco de Assis, under protocol 105/2009, and received approval during the meeting held on June 29<sup>th</sup> 2010. The project was also submitted to the Research Ethics Committee at Naval Hospital Marcílio Dias, under protocol 038/2010, and approved during the meeting held on September 9<sup>th</sup> 2010.

The data, collected between January and October 2010, were organized and classified in chronological and thematic order. As secondary sources, support books on the History of Brazil, the History of Nursing and the Armed Forces were used, besides scientific papers.

The analysis was accomplished in accordance with the historical method. Hence, the analysis of the documentation *corpus* included: analysis of the context the document was produced and disseminated in, the authors' identity, the authenticity and reliability of the text, and the nature of the text and its key concepts.<sup>5</sup> In this process, the documentation was read repeatedly to identify pertinent elements and further compare them with other elements in the documentation *corpus*. Then, the data were organized, classified and analyzed in the light of the adopted theoretical-methodological framework.

Thus, in this process, the following themes were identified: recruitment to select nursing officers for the Brazilian Navy and incorporation of the military *habitus* in the adaptation course for the Corps of Officers.

## RESULTS AND DISCUSSION

### Recruitment and selection of nursing officers for the Brazilian Navy

The exam for the Women’s *Auxiliary Corps of Naval Reserve* was widely published in the main newspapers and on television, demonstrating the Navy’s efforts to disseminate the exam as efficiently and effectively as possible, to potential candidates as well as to the Brazilian society. About the dissemination of the exam, one of the interviewees said the following:

[...] *I was on duty at Hospital das Clínicas [...] when a friend of mine showed me the newspaper, with a picture of some women dressed in some beautiful clothes, which I adored; it was the Navy uniform (e3).*

The Brazilian Navy also used the strategy of disseminating the exam through the distribution of a folder, directed at candidates for the CAFRM exam, entitled “Women’s Auxiliary Corps of Naval Reserve” (Picture 1). This material was elaborated and distributed by the Teaching Board of Directors/Public Relations Service of the Navy, responsible for recruitment, selection and dissemination, respectively.



Source - Personal collection of a nursing officer from the first CAFRM class.

**Picture 1 - Dissemination folder of the exam for the Women’s Auxiliary Corps of Naval Reserve**

As shown on the above figure, the front of the folder was illustrated with a posed photograph in the external environment, displaying three women in uniform. The geographical excerpt on the photograph is Rio de Janeiro, against the background of the Presidente Costa e Silva Bridge, inaugurated on March 4<sup>th</sup> 1974. At the center, between the two

women in uniform who would serve as soldiers, the photographic composition showed model and actress Isis de Oliveira, wearing the uniform of Navy officer. It should be added that, in the 1980’s, Isis de Oliveira personified the image of a gorgeous, successful and talented woman.

When checking the credit of the photograph, the legend ‘Navy of Brazil’, printed on the folder, also contributed to announce the importance of external signs (uniform, flag), which candidates to the military career should assimilate. In this analytic perspective, the legend “says what needs to be read”.<sup>6,28</sup>

About the choice for a military career, according to one of the interviewees, the salary was very attractive in comparison with the mean salary in the market:

[...] *the salary was much better! I made twenty-two thousand in two jobs, twenty-two and something, but in the Navy I was going to make forty-nine, so that was the double of what I gained as a teaching aid and at the hospital, so the salary was also worth it (e3).*

Concerning the medical exams during the selection process, the gynecological exam should be noted, performed by a physician, which caused the candidates some discomfort, as evidenced in the following excerpt:

[...] *I remembered that the girls who had passed the test found that gynecological exam strange. As I was the only one who was married in that group, they asked me to go first. I went because the girls were embarrassed. While we were waiting, a physician came into the room, because that whole story of a man doing the gynecological exam revolted one of the girls who were going to be examined. He said he was following orders, that we had to get examined, and whoever did not want to submit to the exam could leave immediately. The candidate raised questions, because she knew there were female gynecologists who attended the officers’ wives, and why we had to be attended by a male gynecologist if the cooperation agreement existed (e2).*

Thus, despite the fact that medical professionals’ ethical conduct neutralizes all sexual bias, the imposition of a man to perform the gynecological exam symbolically reproduces the male dominance the candidates were submitted to as women and future military, as their requests to be examined by a female gynecologist were not attended to.<sup>7</sup>

Candidates approved in the first phase of the exam were ranked according to their test score. The written Communication and Express-

sion test involved an essay, of relative weight 1, corresponding to 50 points on a scale from zero to 100, the minimum score for approval. The written Professional Knowledge test had relative weight 3 and the minimum score for approval was 50 points as well, on a scale from zero to 100.

Tests were held at the registration sites, except for candidates from Rio de Janeiro and Belo Horizonte. Candidates from Rio de Janeiro took the written tests at the Mario Filho Stadium (Maracanã). The oral Professional Knowledge and Military Interview test for candidates from Rio de Janeiro was held at the Physical Education Center Almirante Adalberto Nunes. The Staff Selection Service of the Navy conducted the psychological test and candidates from Rio de Janeiro took it at the Instruction Center Almirante Graça Aranha.

After this first exam phase, candidates approved and classified presented themselves at the Physical Education Center Adalberto Nunes on April 5<sup>th</sup> 1981 to start the adaptation course for the QAFO.

### **The adaptation course and the military habitus**

The adaptation course for the QAFO took four months. Unsatisfactory results in any phase of the course or the lack of a course concept would imply that the candidate's participation had terminated. Any candidate who would practice any act incompatible with military discipline or absent without any justified reason from 10% or more of the class would have her registration canceled and participation terminated. The final classification would determine the candidate's hierarchical order of summons for Active Service. For the sake of hierarchies and salaries, during the adaptation course, as special soldiers, the candidates were subject to pertinent military regulations.<sup>2</sup>

It should be highlighted that the future nursing officers received some behavioral prescriptions with a view to the assimilation of military discourse, through the compulsory incorporation of military instructions, which determine esthetics and ethics based on a normative discourse that continuously evoked military authority: "discretion in written and spoken manners and language; blameless moral in public and private life; not maintaining secrecy beyond the appropriate context; cultivating a spirit of the corps; avoiding demonstrations of familiarity when in uniform, including gestures of appreciation used in social

context (kiss, hug, touch)".<sup>21</sup> In addition, concern was manifested with the candidate's personal presentation, expressed through the elaborate use of the uniform, determination of the haircut and determinations related to the size of necklaces, bracelets and rings.

The candidates were surprised by the obligatory haircut, in disagreement with the documents disseminated during the selection process, which permitted the use of buns for longhaired women. This situation caused the candidates some discomfort and suffering because, in general "all groups confide their most precious deposits to the body, treated as a memory. And the use of the suffering inflicted on the body, in initiation rites in any society, becomes understandable when one knows (according to countless psychological experiments) that people adhere more decisively to an institution, the more severe and painful the initiation rites they submitted to".<sup>8:103</sup> To support this assertion, the following excerpt was transcribed from one of the interviews:

*[...] we all arrived with long hair, because it was the time for long hair, 1981. [...] when we arrived, they said it was inadmissible for women to have long hair! Then we met with the Commander responsible for the class and argued, but he said: 'from now on you are no longer women'. We said we would use our hair tied, in a bun and a net. But he replied: 'no, in no condition, a soldier needs to be shorthaired! A soldier has no hair scraping his collar!' (e2).*

Compliance with this order was highlighted in the written media, through the news that the Navy had offered a hairdresser to cut the candidates' hair during the adaptation course. The news item also registered their dissatisfaction and sadness, as follows: "one of them, the physician [...], classified the visit to the hairdresser's as a sacrifice, but observed that it was worth it, for the career".<sup>9:15</sup>

By cutting their hair, the Navy naturalized an action most women reject, depersonalizing and disciplining the body by the order of appearances, in which the hair is the most sensitive part.<sup>10</sup> The following excerpt evidences the importance of the hair for women:

*[...] because it think the hair is women's, long hair is feminine. The whole uniform masculinized us a lot. The shoes we used to parade were male. But the hair was really a trauma, I'm sure of that. Also because nobody had said that we'd have to cut our hair (e3).*

It should also be mentioned that women's hair are loaded with symbols, as it represents their femininity, condensing sexuality and seduction.

Thus, the cut, scraping and shearing caused suffering and humiliation, as it hit a visible sign of femininity. Moreover, cutting or scraping someone's hair, whether male or female, meant taking possession of him or her. As for the military, they are scraped 'to zero', for the sake of hygiene but also discipline.<sup>10</sup>

Nevertheless, about the need to comply with standards that implied significant changes in the military candidates' body image, two interviewees affirmed having no difficulties to comply with the requirements for discipline and discrete behavior, due to the fact that they had graduated as nurses from schools with rules that were very similar to military life:

[...] *I was very familiar with military life already, as my brother was a student from the Naval School. I knew about the whole discipline, hierarchy and treatment of the uniforms. [...] I graduated from a school that always held discipline very highly. The teachers controlled everything, up to the color of the nail polish, the length of the uniform [...]. I adapted well to EEAN and did not suffer because of the rules. Then I believed I'd adapt well to the Navy (e1); [...] so I didn't feel any difference, military life for me was part of the scheme I received since primary school. In the religious scheme there's an entire hierarchy too, an entire discipline; so I didn't feel any shock. Military life for me was exactly what I had always had in my life, there was no change (e3).*

In other words, the officers' discourse about their adaptation to military life is compatible with the military discourse, which evidences the incorporation of signs external to the body, such as: impeccable uniforms, haircut according to military instructions, use of discrete watches and absence of accessories. In addition, their understanding of the need to adopt a bodily posture in line with military discipline evidences the inculcation of "incorporated signs, that is, everything covered under manners (manners of speaking, manners of walking or behaving, the walk, the pose, the posture, manners of eating, etc.)."<sup>8:103</sup>

As for incorporated signs, one of the interviewees expressed the collective adoption of a body grammar that translated the inculcation of a *habitus* and reflected bodily discipline, as a product of the internalization of the external (military doctrine) and externalization of the internal:

[...] *when we entered the Navy, we were extremely feminine, but when we started to have class on United Order everything changed. One day we went to visit a ship, and the wife of a commander was present;*

*she got impressed, but we were extremely masculinized. We used that clear blue uniform, with the hair really short. We marched even during visits. Our walk got different, then she talked to the commander and they got horrified by the women, by the state we were in. At the end of the course, they got an etiquette teacher for the class, the teacher told us to walk, she got horrified and said: 'people, what did the Navy do to you?' You can ask anyone: it's true! Then she taught us how to walk. How to get more feminine again! Because we really seemed men! So we got classes in etiquette, to relearn how to walk! (e2).*

The sparse gestures reflect the domestication, which excluded any spontaneous bodily manifestation, subject to all kinds of discipline and censorship, with a view to denaturalizing the body. This expresses the most profound logic of the *habitus*, based on the distinctive value, in order to represent the ethical and esthetic expression of the need inscribed in the new social condition. The following excerpt exemplifies this condition:

[...] *I think they brainwashed the first class. They had never worked with women, so they were saying the whole time that we were examples and that we were going to prove whether women were going to continue in the Armed Forces or not. Based on our behavior, they would know whether to guarantee places for future women or not. And that ended up making us feel very tense (e2).*

Thus, the training course to become officers submitted the nurses to particular pedagogical actions, through behavioral prescriptions and intense body training. This strategy represented one way for the Brazilian Navy to inculcate a military *habitus*, through "an arsenal of methods and strict discipline".<sup>11:425</sup>

Besides the discipline inherent in personal presentation and moral behavior, these female candidates were not allowed to access certain areas, which were for men only. This prohibition is evidenced in the following excerpt: "the women could only attend the cabin and student ranch, the classroom, the canteen, the hairdresser's and the lodging lobby. They should be properly dressed and groomed to walk around, even inside the cabins, where the use of intimate clothing was prohibited. Incompliance with these determinations was considered a severe infringement and subject to punishment".<sup>12:9</sup>

The prohibition of certain spaces among the military reflects a social order that works as an immense symbolic order and reaffirms male dominance through the space structure, destin-

ing private spaces for women; spaces where, traditionally, no meetings or important decisions take place.<sup>8</sup> Women do not always realize that, by accepting this prohibition, they contribute to ratify male dominance, which is the product of the incorporation of power relations.<sup>7</sup>

Nevertheless, the incorporation of the military *habitus* contributed to the institutionalization of an identity as nursing officer of the Brazilian navy, through the use of signs external to the body (emblems and uniform), together with incorporated signs (learning of military behavior).<sup>13</sup>

Besides disciplining the body, military standards and regulations result in suffering, considering the representation that their inescapable compliance makes the military seem uncommon people, distinct from others. The Navy both suggested and sought this stereotype when it selected and indoctrinated these women during the adaptation course. Hence, in compliance with determinations for an excellent education, strict discipline and exhausting physical and military training were imposed. In addition, there were countless academic activities, which in some cases led to mental exhaustion, according to the testimony transcribed here:

[...] *there was a girl who lost it because of the heavy regimen.. [...] you woke up in the morning, had to run and swim, then had breakfast, showered and went to the flag ceremony, then you had class all day. We only stopped for lunch; then we had class the whole afternoon. As there were a lot of subjects, we also had to study at night to be able to do well* (e2).

Like the sense of discipline, the hierarchy represents a supporting pillar for the preparation of these new officers, to the extent that the ranking dispute was stimulated among them, as a resource to guarantee a good place in the final course ranking, resulting in a position that was hierarchically superior to the other candidates. This dispute obviously compromised the relationship among the candidates, as illustrated by the following statement: [...] *there were three classes, the three instructors were very strict and stimulated rivalry, and that was drummed into our heads. They were very strict, charged us a lot, that hierarchy thing* (e1).

At the end of the adaptation period, the candidates approved for the QAFO were named Second Lieutenant of the Reserve and immediately summoned for Active Duty in the Navy. The nursing officer who ranked first in the adaptation program was designated Head of the Nursing Division at the Navy Hospital Marcílio Dias, re-

placing the civil nurse who occupied this function. The nursing officers' classification, based on their performance in the course, evidenced a ranking, in which a different social statute was established, and hence a definitive relation of order between the nurse who ranked first and the others.<sup>8</sup> That is so because this classification confirmed an outstanding competency that guaranteed a social distinction.

Thus, the military *habitus*, incorporated through a learning process of symbols (emblems, flags) and military gestures (salute, march, command voice), in combination with hierarchy and discipline, "served as elements of inspiration and appropriation for the group",<sup>14:24</sup> which definitely marked the construction of military nurses' identity.

## FINAL CONSIDERATIONS

In Brazil, the Navy was the first among the country's Armed Force to permit women's entry as military. During the adaptation program, the nurses went through an incorporation process of a military *habitus* to internalize external determinations related to the behavior required from a military officer.

At the end of the program, these nursing officers were expected to represent the image of Brazilian female military officers in ethical and esthetical terms. In that sense, countless strategies were used to domesticate these women's bodies, in favor of group unity, despite the severe competition that marked the dispute for a place. Hence, standardized appearances, strict discipline and encouraged competition were constantly used strategies to inculcate the military *habitus*.

Thus, the first class of female nursing officers in the Brazilian Navy represented the framework for the inculcation of the military *habitus*, based on physical and military training in the adaptation program for the Women's Auxiliary Corps of Naval Reserve. In this respect, the relevance of the sociological research branch should be underlined, through the sociologist Pierre Bourdieu, especially concerning the understanding of the military *habitus* concept to construct a historical version of the recruitment and selection process for the first female nursing officers in the Brazilian Navy.

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