

“It Seems Strange that the Sisters Should Be My Enemies” :  
The Representations of Nurses before and during the Great War

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# “It Seems Strange that the Sisters Should Be My Enemies”: The Representations of Nurses before and during the Great War<sup>1</sup>

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## 1. Introduction

In recent years, much attention has been paid to the great impact the First World War had upon women. The war broke out at the height of the women's suffrage movement, and many discussions have focused on whether it served to advance the cause of feminism. In her *The Women Who Fight and the Women Who Can Not Fight*, Toshiko Hayashida focuses on women whose support for the war led them to cease their participation in the suffrage movement, and others who opposed the war and continued their campaigning. Her detailed historical examinations show that women's attitudes towards the war are not a simple issue.<sup>2</sup> An academic debate has taken place between Sandra Gilbert and Jane Marcus, the former arguing that “the War functioned in so many different ways to liberate women—offering a revolution in economic expectations, a release of passionate energies, a (re)union of previously *fragmented sisters*, and a (re)vision of social and aesthetic dreams” (my italics 302), while the latter insists that “all wars destroy women's culture” and the Great War was no exception.” Wars, in Marcus's understanding, return women to “the restricted roles of childbearing and *nursing* and only that work that helps the war effort” (my italics 249).<sup>3</sup> Though Gilbert and Marcus do not agree, their illustrations of women during the war have something in common: the women were conceived to be sisters in fragments.

The approaches taken by Janet K. Watson in her *Fighting Different Wars* and Shintaro Kono in his *The Genealogy of “the Country and the City”* may help elaborate the feminist question in a productive way. Watson is critical of the previous research on women and the First World War because it often centres on just one social class and therefore understates the diversity of women's wartime experiences. In fact, in social and cultural terms, it might almost be said that women lived through a range of quite different wars. Watson's

approach may be useful when it comes to class stratification analysis, but in the feminist context it may lead to further fragmentation of women's experiences. Kono analyses Raymond Williams' concept of "experience" in the context of Modernity, but also gives a new insight into women's diverse experiences. Williams' project in *The Country and the City* is often misunderstood as a simple comparison between two opposing concepts. Kono asserts, however, that Williams' projects actually to find out the process of "the creation of the opposition"—such as "past" and "future", "organicism" and "alienation", "machine", "culture" and "civilization"—inherently as part of the experiences of the Modern (28).<sup>4</sup> He also contends that it is the production of such comparison and opposition not the opposition or comparison between the country and the city, to be analysed, because they are not two opposing concepts. "We can overcome division only by refusing to be divided" (quoted from *The Country and the City* by Kono 30). The division here resonates with the fragmentations of the women's issue during wartime.

The reconsideration of historical texts is an important feminist task concerning reading texts, as Kazuko Takemura clarifies its theoretical mechanism as an editor of *"Post" Feminism*. History is neither static nor fixed; it requires a continuous work of reading. Here Takemura does not limit the meaning of "history" only to "the events of the past" (*Merriam-Webster*) but understands it in a primary sense; "narrative or story" (*The Oxford English Dictionary*).

History is a spoken text as well as a represented narrative. There always remains a question; who speaks, in what capacity does one listen to, and who is the listener to that narrative? The community of the production and interpretations of a text functions it as a re-presentation of the community, an advocate for the community and a representation of the community. Therefore turning a history into a text is not a procedure of making a history apolitical. Rather it is the very political act to reconsider the appropriateness of the re-presentation function of a text. (116)<sup>5</sup>

"Power narrates history as if the history is a perfect objective record." Therefore, Takemura

continues, what the history produced by Power covers up is the presence of “an erasable trace of Power” as well as the Other oppressed by its Power (116). The Other does exist but its presence is ignored; it remains unnarrated and unwritten in the history that Power produces.

Invoked by the research of Watson on British women and class during the war, Kono’s analysis of the Modern(ity), and the feminist theories/activities of Takemura, the paper traces the representations of nurses in late 19<sup>th</sup> and early 20<sup>th</sup> century Britain. It analyses their two genealogies of nurses: military and medical professional. In so doing the paper hopes to delve into the production of opposition between women as well as of an anti-sisterhood discourse.

## **2. Before the Great War: Ethel Gordon Fenwick and Florence Nightingale**

The Great War provided British women with a great variety of professions outside the home. During the conflict women worked in banks, companies and public offices as typists or secretaries, and were also employed in munitions factories. Admittedly, many working class women had already been in employment long before the outbreak of the war, but, due to the reduction in size of the available male workforce a total of 4.94 million women did some kind of paid work between July 1914 and November 1918 (Hayashida 11).<sup>6</sup>

Nursing was one of the professions which attracted educated women at the time. As it became increasingly professionalized it acquired a higher social status, and also the role itself could entail quite a wide variety of tasks as the job description of a “nurse” was still somewhat fluid. Nursing was one of the rare roles—along with schoolteacher, governess and companion—in which Victorian “ladies” might earn a living “without losing caste” (Bowman 3). However, it was generally not considered appropriate for middle-class women, not to mention upper-middle class ones. Quite apart from the fact that many such women would have been afraid of infection, as indeed would their parents, it was simply the case that attending to the sick was widely deemed to be incompatible with the “delicacy of a lady’s feelings” (Pavey 300). Moreover, the very idea of a gentlewoman becoming a wage-earner was widely frowned upon. Unless she was a widow or had a very

understanding family, it was unlikely to happen (Bowman 1). The development of the nursing profession in Britain is complicated in that there are two different, albeit connected, origins: military and medical nursing. Both sprung up and developed in the middle of the 19<sup>th</sup> century, and saw nursing become properly established as a profession in the early twentieth century.

Two Victorian women, Ethel Gordon Fenwick (née Manson) and Florence Nightingale, may be used to illustrate the two strands. Nightingale made an enormous and enduring contribution to the establishment of professional nursing and the raising of its social status at the time of Crimean War (1853-1856). By introducing her nursing teams into military hospitals she formulated a whole new conception of nursing and made its necessity known to the public.

However, Nightingale did not believe in the fundamental need to educate future nurses. In her opinion the ideal recruit was a woman “of the small farmer’s daughter class”, physically strong, endowed with solid common sense, energetic, and careful (Bowman 3). “It is not the certificate which makes the Nurse or the Midwife. It may *un-make* her. The danger is lest she let the certificate be *instead of* herself, *instead of* her never-ceasing going up higher as a woman and a Nurse” (original italics 146), said Nightingale. She understood the need for a very large number of nurses so that, she believed, they do not have to be trained properly, or at least she was not so interested in the establishment or institutionalization of the nurse certificate. In fact she believed that the systematic registration of nurses would damage the profession by appearing to try to put it on the same level as medicine (Bauman 5).

If Nightingale was the founder of military nursing, Fenwick established professional nursing by helping found institutions such as the Royal College of Nursing. Although her name was not included among the official founders, her great contribution and dedication to the establishment helped formulate the principles on which its work would be based (Bowman 1). Her preference for recruiting trained, educated women as nurses is quite apparent, and would shape the future of the profession (Bowman 2-3).

In the British historical context, the definition of a professional medical nurse was not framed until the Nursing Registration Act was passed in 1919, a decade after Nightingale’s

death. Before then, there was no legal definition of a nurse.<sup>7</sup> The social need for nurses, either trained or untrained, arose around the time of the war, and the widely held view, to quote one of Nightingale's most famous aphorisms, was that "every woman is a nurse," which indicates her concept of nursing: women are born naturally to be nurses and therefore do not need to be trained.

That Nightingale's words have survived is an indication of how culturally important and influential she herself was. She not only came to be seen as the paradigmatic nurse but also became something of a British national icon through works such as Lytton Strachey's *Eminent Victorians*. While Nightingale became eminent in the history of nursing, however, those women who endeavoured to make nursing a fully-fledged profession achieved little or none of her fame. And yet they too made a contribution to the social status of nurses.

### **3. Nurses/Sisters**

The two strands of nursing in Britain, as originally represented by Nightingale and Fenwick, can still be perceived at the time of the First World War. For example, the protagonist in Irene Rathbone's novel *We That Were Young* (1932) worked as a volunteer in YMCA canteens in France and then served in France and in London hospitals with the Voluntary Aid Detachment (VAD), whose name indicates that it was not a military but a voluntary organization. In the quote below, from an internal monologue, the protagonist laments how she and her colleagues are treated by the medical nurses.

The genus 'V.A.D.' was suspect; and though unfortunately at present it had to be endured (there was a war on), it was none the less uncomfortable to have about. And the fact that it worked hard was not so entirely in its favour as might have been supported, for it did so in an unorthodox spirit, and for unorthodox reasons. It was courteous (Oh very!), it was sympathetic with the patients (too much so), it was willing, it was intelligent, but it was too serious. It had blown in from the outside, and the sooner the war was over and it blew back again the better. (210)

In the novel, the two types of nurses are fully aware of their respective situations and of the tensions between them. From the viewpoint of the VAD nurses, the trained nurses are passively obedient to the doctors and praise them as if they were gods. The trained nurses, meanwhile, see the VAD nurses as “unorthodox” in that they are too sympathetic with or unnecessarily close to the patients or soldiers. The quote could be taken as evidence that in the second decade of the twentieth century there was still a certain discord between these two strands of British nursing.

Or perhaps, alternatively, the tension could be attributed to class differences. In his *The Lamp and the Book*, which covers the history of the Royal College of Nursing, Gerald Bowman says the following:

The V.A.D. girls came from better-off families and included a number of young women of title... Many of them were employed after the outbreak of war in mansion-hospitals specially converted for the nursing of wounded officers. They all wore a red cross upon the apron-bosom and upon the uniform cap, and naturally (because of their special background) they were *much photographed and belauded in the general and pictorial Press*.

Equally naturally, they were not loved by the mass of experienced, really hard-working nurses who had little chance of (and in most cases no desire for) employment in the private hospitals run by titled dowagers. (Bowman 64, my italics)

The different attitudes and behaviour exhibited by the two groups of nurses, as depicted in *We That Were Young*, could have derived from their being differently motivated with regard to their duties. Watson points out that the two groups of nurses would have had differing conceptions of the ideal patient. According to Watson, although the VAD nurses had no formal medical training, they were often called upon to assist the doctors because there were no trained nurses available. And this kind of work, says Watson, was precisely the kind of thing many VADs were willing to perform: “They wanted what they saw as ‘real’ wartime nursing: surgical rather than medical, as wounded soldiers were emotionally

closer to the war effort than those who were merely ill". The medically trained nurses, on the other hand, considered medical nursing more professional and "real" than surgical work (92). They were keen to further establish the credentials of their profession, whereas VAD nurses were understood to be performing their role more for patriotic reasons.

During the Great War, the nurse came to represent an ideal woman of the time. Meg Albrinck argues that "the patriotic mother" and "the dutiful nurse" are two primary figures that various sources—including propagandists, policymakers, and poets—used in order to try "to construct 'official' and acceptable gendered behaviours" in response to cultural anxieties—such as a fear of lesbianism—provoked by the appearance of significant numbers of women in uniform(273-274). Albrinck also explains that these two figures are useful to the extent that they adapt women's peacetime traits to wartime circumstances (274). The so-called "Angels in the House"—an ideal Victorian lady, derived from Coventry Patmore's poetry—survived at the time of war. The angel is both at the front and in the house in the role of nurse.

In that sense it is no wonder that some women's military organizations have the name of "nursing", although the work they carried out did not actually entail much nursing. One example is the First Aid Nursing Yeomanry, or FANY. The FANY was well known for consisting mostly of upper-middle-class women, which matched their main job of driving ambulances. There was no chance of a working- or the lower-middle-class woman driving a motor vehicle at the time. The FANY actually formed before the outbreak of the war, in 1909. Its members were known as "sporting" women, for they were required to be good at driving and also to have a good knowledge of mechanics. Although they worked mostly behind the wheel, some, such as Grace McDougall, referred to themselves as nurses. McDougall was the very first member of FANY and published *A Nurse at the War*, which narrates her own experiences at the front. As a driver she repeatedly went into the trenches to rescue wounded soldiers, thereby helping to create the image of the nurse during wartime as the ideal, self-sacrificing, patriotic woman, although actual nursing was not the main activity of FANY members.

The role of the FANY is relatively insignificant, however, if compared with the VAD. Thekla Bowser's *Britain's Civilian Volunteers, the Authorized Story of British Voluntary*



*Aid Detachment Work in the Great War* (1917) describes how the VAD was thought of by British people at the time. It is significant that the book was published in 1917, a year after the battle of the Somme, one of the largest of the First World War, in which more than a million men were killed and wounded on both sides. The social impact of the battle was enormous, as the losses gave rise to a great demand for new volunteers—of either gender—to participate in the war effort. In this sense it is very likely that the book played a propagandistic role for the recruit of VADs, which makes Bowser's explanations more interesting. Since the British army relied on voluntary recruitment until January 1916, when the army introduced conscription, the loss of so many volunteers was a serious problem. With an increasingly pressing need for more efficient management and allocation of military and other resources, the demand for VADs also grew. According to Bowser, although the VADs were a supplement to the Territorial Medical Service (7), their members had not necessarily received (co-)medical training. Rather, they were understood to "be trained particularly in the art of improvisation, because their work would be pre-eminently that of coping with emergencies" (8). What they actually did were tasks such as cleaning hospitals, helping nurses and doctors, and driving ambulances.

In Bowser's illustration of the VAD there is a typically contradictory figure which we often see in the later fictions. At the beginning of the book, she makes excuses for her generalization regarding the VAD. "All that [she writes] must be taken simply as being 'typical,'" because "every V.A.D. effort would mean occupying a miniature British Museum Library" (6). There were indeed thousands of the detachments throughout the British Isles as well as the British Empire such as Egypt, India and Malta (7, 13). The following accounts by Bowser appear to be precursors to current misconceptions about VAD members. "Many people seem to think that a V.A.D. member must be a woman." However, "the numbers of men's V. A. Detachments run very close to the numbers of women's V. A. Detachments" (5-6). Nonetheless, Bowser emphasizes the VAD's gender in the following. The passage explains about the VAD members from their father's point of view:

[the] ordinary citizen knows that his daughter has worked, as she never worked

in their life before, in this or that Hospital or at a Best Station perhaps, and that she has faced hardships and even dangers abroad with indomitable pluck. (5-6)

Bowser herself also appears to assume that the members were women. Her description could be understood simply as careless or misleading, but it reveals her unconscious desire to picture a VAD member as female, young, white and British: the VAD were turned into racialized and gendered daughters. This “mis”recognition was already spread in 1917.

This mis-recognition took place not only in the book but in the patient-soldiers’ way of addressing the women around them in the hospital. We can see such an example in Enid Bagnold’s autobiographical fiction, *Diary without Dates* (1918), based on her experiences as a VAD nurse in a London hospital. At the beginning of the novel, she says “[how] wonderful to be called *Sister*! Every time the uncommon name is used towards me I feel the glow of an implied relationship, something which links me to the speaker”(5). Her joy at becoming a “sister” is genuine, but what might this word actually mean to her, (the addressed/listener) or to a soldier (the addresser)? “Sister” obviously might refer to a female sibling, a member of religious community, a female friend, or to a medical nurse—but it has a particular meaning as a form of address in the medical setting. In *Diary*, Bagnold shows how it varies according to the speaker. It seems the word is used in two different ways in the novel: first, the VAD nurses apply it to those of their colleagues who have had professional medical training. There was a strict rule among the nurses that only a senior nurse, who had undergone medical training, should be addressed as “Nurse”. The reason the VAD narrator was addressed in the same way therefore derives from the other use of the word: the fact that it was used by the patient-soldiers to address the women in their midst. Knowing the different usages of the word, Bagnold implicitly extends the meaning of “sisters” thus:

*The Sisters are my enemies...* I am alive, delirious, but not happy. I am at any one’s mercy; I have lost thirty friends in a day. The thirty-first is [a patient] in bed No.11....Now that I come to think of it, *it seems strange that the Sisters should be my enemies.* (my italics 79-80)

Although they work in the same hospitals, the VADs and the medical nurses are not sisters but “enemies”. The narrator is aware of the fragmented situations of VADs, and transmits this sense of difficulty. It is indeed “strange” that she should regard some of her colleagues as enemies, and arguably the impulse to do so does not come from within herself. It should not be attributed to her individual experience; rather, it should be contextualized in the historically over-determined usage of “sister” and “nurse”, for these two words are intertwined historically, but it is probably the case that neither sisters nor nurses knew how these words were produced, regardless of their personal experiences.

It is true that Bagnold makes no reference to feminism here, but that does not necessarily mean she was indifferent to sisterhood. Although she still seems unaware of feminism in the novel, to the extent that she refers to sisterhood the narrator stands at the door to sisterhood—consciously or unconsciously—which hopefully stretches as far as to entail a kind of feminism.

#### **4. Conclusion**

This paper has argued that there were two distinct representations of nurses before and during the interwar period in Britain. One referred to trained professionals, (medical nurses), the other to those who were untrained (nurses). Both categories were skilled, but in different ways. One had undergone formal medical training; the other had not, but could be called upon in times of need. The latter had a higher profile, due to the propaganda of the time, and is still referred to more frequently even in the current research.

The paper does not demand that greater emphasis should be placed on the tension between the two groups. Instead it suggests that the two groups might previously have been misidentified and that perhaps there needs to be more research on the subject of the medical nurses, whose voices have only rarely been heard. In so doing, the question that needs to be asked is why the differences between the two strands of nursing were emphasized in some writings, especially in the fictions of authors such as Rathbone. It is in those uncanny representations that we can trace, in Takemura’s terms, the neglected female figures who are still waiting to be examined.

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## Notes

- <sup>1</sup> This essay is a revised version of the paper presented at the Health and Illness in Culture Conference, held in Taipei Medical University, Taiwan in December 2012.
- <sup>2</sup> The best known conflict occurred between Emmeline and Christabel Pankhurst and Sylvia Pankhurst.
- <sup>3</sup> Margaret Higonnet and Patrice L. R. Higonnet together synthesized the opposing sides of the debate among researchers such as Sandra Gilber and Jane Marcus. Although the Great War stimulates self-perception of women, the changes in women's social and cultural status were ruined by unchanging ideological mechanisms limiting the transformation of gender lines.(33)
- <sup>4</sup> All the quotes from the Shintaro Kono in this essay were translated by Noriko Matsunaga.
- <sup>5</sup> All the quotes from the Kazuko Takemura in this essay were translated by Noriko Matsunaga.
- <sup>6</sup> The demand for the female labour did not start with the outbreak of the war. Female unemployment was 44.4% in September 1914, and 11 thousand women were registered as unemployed (Hayashida 11).
- <sup>7</sup> In the act, nurses are those who are registered by the General Nursing Council.

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