



The army nurse

Mariella Scerri, MA

Teacher of English, PhD Candidate, University of Leicester

Corresponding Author:

Ms Mariella Scerri

18 York, N. Caruana Dingli Street, Mellieha MLH 1709, Malta

Email: mariellascerri at hotmail dot com

Received: 05-APR-2020

Accepted: 25-MAY-2020

Published: 05-JUNE-2020

Abstract

Storied accounts of nurses' representations on the battlefield become vital records of personal or communal histories that otherwise may not be voiced or even acknowledged. What we have today is a fairly accurate account of the harsh realities nurses endured at the battlefield and how these horrific situations shaped them as nurses who would act as role models in the brink of death. While women's writing about war has received much critical attention that has established its authenticity as witness to war, scant attention has been paid to how women see the trauma of nursing at the frontline and how it influences the narrative. The scope of this article is to understand the connections between nurses' narratives from the First World War and Vietnam. It tries to elicit common elements in how war is seen and consequently to the relationship between seeing and bearing witness to wars.

Key words: Army nursing; Gender; Health humanities; Literature; Nursing; War

“They wear their caps [...] to go back again.”

– Mary Borden [1]

Introduction

The testimony of care given by nurses during war is evidenced mainly in literature. Assuming that narrative provides a means to communicate memory, *‘autobiographies and memoirs can act as a laboratory for the workings of the mind’*. [2] It is in literature that we can examine both the workings of memory and the ways that authors use concepts of memory in their works to demonstrate memory's dynamic, changing nature, as well as its power as a tool for resistance. [2] War literature is an important genre, especially since women's histories and stories have

traditionally been silenced within cultures dominated by patriarchal norm. Thus in this context, storied accounts of nurses' representations on the battlefield, become vital records of personal or communal histories that otherwise may not be voiced or even acknowledged.

Authors tried to recapture the horror of war through their writings, some with a particular focus on the hardships, the struggles and traumatic scenarios nurses encountered. Fiction is an effective tool with which the past can be reviewed and re-evaluated, for the distancing and

Cite this article as: Scerri M. The army nurse. RHIME. 2020;7:127-35.

recalling achieved by story enables writer and reader alike to revise history with new awareness and a new sense of what it is humanely possible and significant. It can experiment with the form and content of history, and in so doing bring about a change in the nature of historical understanding.[3] History and narration of war are too intimately coupled to be viewed in isolation. In war courage, love, kindness, forgiveness and selfishness somehow manage *'to make their presence felt as the proverbial silver lining in the dark clouds that engulf war-ravaged skies.'*[4]

What we have today is a fairly accurate account of the harsh realities nurses endured at the battlefield and how these horrific situations shaped them as nurses who would act as role models to many soldiers on the brink of death. The entrenched notion that women were the 'angels of the house', guardians of the domestic and private life, was too powerful to be overturned by war.[4] Most of the published writings of nurses *'who nursed the wounded during the First and Second World Wars were influenced by the cultural tropes and accepted beliefs of their time'*. [4] Nonetheless, some writers deliberately questioned those tropes and beliefs. In caring for the wounded soldiers, nurses were the most immediate witnesses to the consequences of industrial warfare. Standing between *'the front lines and dealing daily with the worst injuries produced by war, they were ideally placed to witness the results of modes of combat'*. [5] They also showed the determination and selflessness of a noble profession.

The unseen text in women's war writing

While women's writing about war has received much critical attention that has established its authenticity as witness to war, scant attention has been paid to how women see the trauma of frontline combat nursing. Such seeing and not seeing naturally influences the narrative.

Moreover, women's writing from the Vietnam War has been excluded from most discussion of women and the war experiences in spite of several fine memoirs, short story collections, and an anthology of women's poetry that have been published over the past twenty years. [6] Critical discussion of combatant writing has noted connections between such writing from the First World War and Vietnam. Understanding the connections between nurses' narratives from these wars draws attention to the common elements in how war is seen and consequently to the relationship between seeing and bearing witness to wars. In demonstrating such commonality, discussions need to draw from First World War writings by British writers and on memoirs from Vietnam wars by Americans.

On a general level, the striking similarity in the narratives of these two wars seems to arise from the compulsion to bear witness to the trauma of combat nursing. More specifically, British writers from the First World War and American writers from the Vietnam War were both concerned with carrying, what feminist literary critic Jane Marcus has called 'a terrible knowledge' to a civilian population that seemed completely removed from an understanding of the war experience.[7] This sets them apart from their Second World War counterparts whose experience, at least in Britain, was shared by the civilian population. The context for the writings, wherein the woman's role as nurse to the injured men occasions her traumatic seeing, draws attention to the role of vision as a gendered activity. Establishing a claim to the legitimacy of their seeing and knowing war is also a necessary starting point for much women's writing from both the First World War and the Vietnam War.[7]

Significantly, the 1915 exchange of letters between the young Vera Brittain, discovering war through work as a

Voluntary Aid Detachment nurse in London, and her fiancé, Roland Leighton, who was serving on the Western Front, goes some way toward collapsing the idea that women on the home front did not experience or ‘see’ war.[8] One particular letter from Leighton provides a useful position from which to begin the discussion of traumatic seeing in the larger context of the debate surrounding vision and the ‘gendering of cultural discourses’.[8] Describing the decayed remains of German soldiers in a captured trench, Leighton ends his letter to Brittain with a bitter rejection of the heroic language that hides what he now sees as ‘real’ war.

The dug-outs have been nearly all blown in, the wire entanglements are a wreck, and in among this chaos of twisted iron and splintered timber and shapeless earth are the fleshless, blackened bones of simple men who poured out their red, sweet wine of youth unknowing. Let him who thinks that war is a glorious golden thing, who loves to roll forth stirring words of exhortation, invoking Honour and Praise and Valour and Love of Country, let him realise how grand and glorious a thing it is to have distilled all youth and Joy and Life into a foetid heap of hideous putrescence. Who is there who has known and seen, who can say that victory is worth the death of even one of these.[8]

Equating knowing with seeing and language itself with the power to conceal, Leighton underlines the distinction between his position as combatant who has seen and therefore knows war, and the civilian audience like Brittain, to whom he addresses his angry collapsing of heroic platitudes. In spite of the address ‘let him’, the gender distinction is clearly implied here, since as a woman she could never technically ‘see’ war, an exclusionary position Brittain was acutely conscious of in her relationship with male combatants in spite of her nursing experience in England, Malta and France. [9] Transcribing Leighton’s words into her

diary on September 14th 1915, Brittain did not perceive herself to be the author of these platitudes; she was relying on the authentic words of one who ‘has known and seen’.[9]

It is clear from Brittain’s writing here and elsewhere that she equates ‘seeing’ with ‘knowing’, and deliberately volunteered to nurse in France so she could close the gendered gap between herself and her male contemporaries. Her novel *Honourable Estate*, even more than her autobiography *Testament of Youth*, reveals a need to employ a kind of double vision that will allow her to see war through incompatible sets of images.[10] Taking a different approach and focus from her autobiography *Testament of Youth*, *Honourable Estate* blends family saga and political analysis while seeking to produce a narrative with the same scope and emotional impact. Writing in the thirties, Brittain is caught between an abhorrence of war and the need to impose values on the deaths of the men she loved. Brittain’s narrative in *Honourable Estate* privileges the male gaze, giving a detailed account of her brother’s description on the battlefield, hence accentuating the male construct of war.

When he first joined up I probably gave you the impression that everything was splendid [...] Well the real thing isn’t like that at all. If you had seen men with their faces blown in, or their bowels running out and kids of seventeen gone stark staring mad and gibbering for their mothers, you would know it isn’t [...] It’s all blood and bones and decaying bodies and chaps turned to skeletons with dysentery [...] But I’m not trying to tell you what war does to people’s bodies, even though it does tear their insides out and emasculate them and mutilate the most intimate parts of their persons for the public gaze. What’s even worse is what it does to your mind.[10]

The tone of the address, ‘If you had seen

[...] *you would know* returns us to Leighton's letter and its equation of knowing and seeing that excludes non-combatants.

Although *Honourable Estate* draws heavily on Brittain's own experiences, she is not constrained in her fiction by the autobiographical pact of *Testament of Youth* and her novel therefore reveals contradictory needs. She can control the war narrative as she could not in her own original experience. Thus she can use the narrative itself to take meaning away from and restore meaning to death in war.[11] Gilbert and Gubar define this gap as a '*classic case of dissonance between official, male-centred history and unofficial history*'. [11] They contend that the field of literary history is the most difficult for women to assail, as not only they must face the resistance of male writers safely entrenched in tradition, but they must also contend with what Gilbert and Gubar term the '*female affiliation complex*'. [11] That is, modern women writers have to resolve their relationship to their literary mothers and sisters as well as to their fathers and brothers.

Gilbert and Gubar take Freud's family model in '*Female Sexuality*' as their paradigm or the experience of the woman writer.[11] Although this provides three paths for the female artist – adoption of the father's tradition, claiming the mother's tradition, or a frigid rejection of both – the Freudian model proves problematic, as Gilbert and Gubar admit that Freud's analysis is itself determined in part by sex antagonism.[11] Moreover, the Freudian paradigm is limiting, as the woman artist's interaction with literary forebears is more complicated than the model allows. What clearly matters here is not that men and women unite differently out of different bodies, but that both sexes feel the need to distinguish their language from the other. As women writing from the margins, establishing a place where

traditionally they have been denied space, these women's writings are centrally concerned with the question of identity; the constructions of the female identity they bring with them to the war; their identities as nurses in a war zone, stressed to fragmentation by the daily trauma of their working environment and by their relationship with the wounded soldiers they nurse; and their identity as writers of the war story, usurping the place traditionally reserved for men and defying the identities prescribed for them by the military.[12]

Sidonie Smith and Julia Watson also find that women autobiographies perceive themselves to be speakers at the margins of discourse.[12] These war narratives show women who, for the most part, accepted the gendered identities that were prescribed for them by their place in time and space. Their perception of marginalisation arises out of their traumatic war experience as nurses, rather than because they are women per se. Even if they defied some prescribed gender norms by going to war, they did so in a role that was quintessentially female: the nurse.[12]

Lynda Van Devanter's and Sidonie Smith's accounts of their nursing duties in Vietnam, and Mary Borden's story during the First World War, demonstrate the confusing undermining of the identities as women and nurses they brought with them to the war.[7] Even outside their role as nurses, women were simultaneously denied and prescribed places – women's latrines were placed as far as a quarter of a mile from the nursing stations; the order to fasten a jacket and crawl under their low beds had forgotten that women's breasts did not allow them to fit. In the caring scenario, they had to be a wounded soldier's mother, wife or girlfriend.[13] Similarly, off duty, women were constantly expected to make themselves available for their male counterparts, if not as sexual

partners, at least as mother or sister surrogates, changing out of the combat fatigues and boots that camouflaged their sex, into dresses and high heels.[13] Nurses who broke out of such prescribed roles were refused official recognition. For instance, when one of the nurses in Van Devanter's *Home Before Morning* rescues a patient from a burning helicopter, after everyone else has ran away, her head nurse recommends her for a Bronze star with a 'V' for valour. The medal arrives; but without 'Valour' award 'because they didn't award things like that to nurses'.[6] 'Things like that', one assumes, were reserved for the official realm of combat, forbidden to women. In particular, perhaps:

'this act subverted the military male ideal of physical bravery and challenged the binaries set up in wartime, whereby women were the protected, men the protectors'.[13] In the military mind, a 'female nurse rescuing a male combatant was a clear reversal of the natural order of things, and therefore could not be acknowledged, let alone rewarded with a medal'.[13]

While women were marginalised by a military who needed them but did not want them at the same time, the identities of the women themselves became intimately bound up with the men they nursed, exposing the degree to which the fragmentation of their own identities is intimately tied to the fragmented bodies they nurse.[13] Griffith's poem '*The Statue*,' a vision of the proposed Vietnam Women's War Memorial, presents a literal and metaphoric image of this intimacy which shows in an extreme form the accounts of combatant nursing.

*... a young woman
Standing by the side of a green canvas litter.
Lying on the litter is a man
A young man, badly wounded
Her right hand clutching his.
Though I recall our hands were too busy to*

*do that,
Our hearts did it
Till they became numb.[14]*

'*The Statue*' captures the sexual anxiety surrounding the collapse of appropriate boundaries of selfhood and gender, which constantly disrupts the identity of nursing. The '*two connected themes of the poem, an idealistic vision of their role on the one hand and the guilt at being unable to completely fulfil such an idealisation on the other, present one aspect of the identity crisis inherent in such an intimacy*'.[14]

In the perverted context of the war, gender roles are both inverted and perverted; healing ministrations become acts of rape on helpless bodies:[15]

'We peel off his clothes, his coat and his trousers and boots [...] We stare at the obscene sight of his innocent wound'.

'Such violations of the closed and integral male body are abundant in war with its pollutions and penetrations, wounds and dislocations. The conditions of violence which set apart women and men also create the conditions of a promiscuous familiarity'

'with the wound, the mysterious interiors of the male are revealed, the mask of masculinity is penetrated'.

When this happens the clear boundaries between what is feminine and what is masculine become confused or even obliterated altogether. Nursing brings about a complete collapse of identity borders, both physical and psychological, and with it a collapse of one's own sense of self, perpetually besieged by the traumatic conditions that surround the nurse.

Smith, Van Devanter and Borden demonstrate the extent to which this intimate link between their identities as women and the men they nurse is central to their writings and to their perception of

themselves. In place of the real experience of nursing in a combat zone, culturally inscribed gender roles and expectations were imposed on the nurses in both these wars.[13] The First World War approximation of the images in the Vietnam era poem is the poster of *'The Greatest Mother in the World'*, the Marian figure cradling her dead or dying son, or the nurse caring for the wounded soldier. *'The Statue'*, written by a Vietnam combat nurse, shows the extent to which the women internalised these expectations. In World War One, the image of the Red Cross Nurse was raised to an icon that most nearly approximated the heroic image of the soldier.[14] Yet underlying such idealisation was moral unease surrounding the intimate relationship between the nurse and the wounded combatant.

The situation, for instance, that allows Borden literally to enter men's bodies makes for a paradoxical response: she can exult in her own power and yet, once she sees it is predicated upon the powerlessness of the men she nurses, she experiences extreme guilt not only about her participation in a situation that reduces men to this condition, but also about the inversion of conventional male and female roles.[1] When she confronts this collapse of a prescribed order, she can only retreat to a de-sexed, dehumanised automation. Thus, observing the fragments of bodies that surround her, Borden questions *'There are no men here, so why should I be a woman?'*[1] Her question negates the ideology that equates combat and the wounded combat with masculinity, with the result that she is left unable to identify herself as a woman. This is a place where the gender identities polarised by war break down, or are lost completely as a result of it. Men have become parts, the women, machines.

'She is no longer a woman. She is dead already [...] Blind, deaf, dead – she is strong, efficient, [...] a machine inhabited by a ghost

of a woman – soulless'. [1]

Lynda Van Devanter and Joan Furey found it necessary to address the public perception which is the source of this unease: *'women, if thought of at all, were usually thought of as saints or sinners'*. [14] Hence, both Van Devanter and Borden's image of the Red Cross nurse-mother makes clear that they were perceived paradoxically, as both nun and whore. Borden writes:

Her delicate body dressed in the white uniform of a hospital was exposed to the view of the officers and the regiment. A Red Cross was burned on her forehead [...] Her shadowy eyes said to the regiment, 'I come to the war to nurse you and comfort you.' Her red mouth said to the officers. 'I am here for you'. [1]

Behind Borden's objectification of herself in this image is the need to juxtapose the actual experience of nursing in a combat zone with the culturally inscribed gender roles and idealisation. Rather than deny the sexual element in the intimate relationship between female nurse and wounded male combatant, Borden examines the degree to which

'the nursing experience presented her with a crisis surrounding her own sexual identity as a woman that is far more complex than the public unease about nursing and sexual propriety'. [9]

While Borden's Red Cross Nurse preserves a calm distance between herself and those who objectify her, her account of her experience continually demonstrates the extent to which the physical act of nursing transgresses the boundaries that separate self from other, in particular, the female from the male. When wounded male combatants and female nurses meet within the hospital, there is both the collapse of appropriate separateness and a reversal of gendered norms, wherein the man's body

rather than the woman's is defined in terms of passive surrender to penetration and violation.[9]

The central tension in these autobiographies is a further assault on the female identity whereby the woman's traditional role as mourner for the dead warrior is incompatible with the soulless automation she must be as a nurse.[9] The conflict between these two roles leads to a further fragmentation and shattering of the self of the self, a shattered self. Van Devanter keeps telling herself *'If you lose control, they're going to die'*. There is no place here for those who *'can't take it'*. [14] For the nurse to weep is to reveal an unprofessional weakness and yet, throughout these narratives, these two roles struggle for supremacy. Fragments that both Borden on the Western Front in World War One and Van Devanter in Vietnam choose to place at the very centre of their respective narratives develop dramatic intensity by maintaining exactly that tension between the need for absolute control and the point at which the control snaps. The writers, with their texts, are in continual danger of collapse into fragmentation, what Borden describes as *'breaking to pieces'*. [1] Moreover, underlying both these narratives is the implication that to enact this prescribed female role and break down, is to awaken to the horror of the masculine arena of war. Such realisation becomes

'the point where both women recognise their denial of emotion, a stereotypically male response to military demands, which makes them complicit in the act of war'. [9]

Sharon Ouditt's observation on World War One nurses is equally applicable to Van Devanter's experience of Vietnam. In her book, *Fighting Forces*, she remarks that they found themselves, then, at an ideological junction between a traditional, idealised value system and a radical new order of experience: a complex and

ambiguous subject position that was frequently the source of breakdown.[15] Further, the trauma of the daily experience of nursing [...] destabilised for some women what had come to be their way of identifying themselves. The complexity and ambiguity of these women's experience was largely owing to the violent clash between the conservative ideologies that enabled them to get out to the war and the failure of those ideologies to mediate or account for the trauma that later beset them.[15]

This experience was not played out on just an ideological level, but the ideological level was directly affected by the intensely physical experience of nursing: seeing and treating appalling wounds with a *'realisation of how completely ineffectual the medical treatment was'*, medical staff *'suffering from sleep deprivation and exhaustion'* were constantly aware that, however *'much they gave of themselves, they were often powerless to save lives'*. [9]

While fragments demonstrate the interdependence of the nurse's identity with that of the fragmented body of the soldier, Van Devanter's autobiography also demonstrates a need to find a wholeness to combat that fragmentation. The structure of the narrative, wherein the *'fragmented experience of war nursing is controlled in a form that provides for closure and wholeness as the inevitable ending of the story, demonstrates an ongoing desire to defy the fragmentation'*. [9]

On the other hand, Mary Borden in her Preface to *The Forbidden Zone* rejects form and order as artifice. For her the modernist fragmented narrative represents her experience of the war: *'To those who find these impressions confused, I would say that they are fragments of a great confusion. Any attempt to reduce them to order would require artifice on my part and would falsify them'*. [1] Hers is also a perspective completely prescribed and confined by the

war itself. She allows no intrusion of a before or after. Conversely, Van Devanter, telling the Vietnam story, needs to place her experience in the context of their return home, since the return back to the ‘world is as much a motif of the Vietnam War as was the time spent in country’.[1]

For both these women, the war experience itself was one of marginalisation in an already marginalised zone; in the autobiographies the return home repeats and reinforces this marginalisation. The question that pursues Van Devanter on her return home is the question posed by loss: Why?[6]

The young man came back into the dream as he had so many nights before [...] There was a large hole where his belly and chest used to be. He had no arms and legs and his face was blown away. He whispered something that I couldn't hear [...] I put my head so near to the spot that had once been his lips that I got blood on my cheeks. The soldier kept whispering one word: Why?

When the war ends, the connection between the dead soldiers of her nightmares and Van Devanter's own burden of grief becomes clear. She must take on the mothers' role of mourning for all the sons they have lost: *'I dreamed that night about Vietnam [...] It was a new dream: Thousands of American mothers were walking in the streets of Saigon, carrying the bloody bodies of their dead sons. Above the wailing, screaming, and gnashing of teeth, one word was constantly repeated: Why?'* [6]

The woman who enters the ‘forbidden zone’ of the male arena of war reveals the ‘forbidden zone’ of the fragmented male body.[1] Such a revelation confirms the extent to which her war story is inseparable from the story of the men she nurses. The place she claims is with them, rather than separate from them. During her time as a combat nurse she ministers to them; on her return home she mourns

them. And the war story she tells is also their war story. Mary Borden dedicates *The Forbidden Zone* ‘to the poilus who passed through our hands during the 1907 war [...] They know, not only everything that is contained in it, but all the rest that can never be written’.[1] Her words claim a shared knowledge of war (and a shared silence) and imply her right to tell the collective war story. Linda Van Devanter and Joan Furey make a similar claim for the Vietnam generation of women in their Preface to *Visions*, asserting their right to the shared story: ‘*These women need to be heard. They know what war is.*’[14]

Conclusion

Christine Hallett notes that professional nursing during war is often seen through the gauze of romantic myth-making. In fact, the trained nurses of war were ‘less noble young helpmeets than a heterogeneous group of tough-minded women’.[16] Eager for formal social and political recognition, nurses in the raging wars of World War I, World War II and Vietnam, were also faced with grisly new medical challenges. As Hallett writes, ‘*they fought a multi-layered battle; for lives, for recognition and for equality.*’[16]

Understanding the tropes used to categorise the nurse in the pre-war actual experience is essential, throwing into sharp contrast the actual experience in the base hospitals, casualty-clearing stations, hospital ships and trains of the war. Florence Nightingale tackled a poor nursing image and pulled the profession out of the abyss of moral decadence and attempted to make it a responsible occupation. Although Nightingale made great strides, the practice of nursing in war was still largely seen as an invisible entity. Further, around the time of World War One, nurses symbolised character traits of purity and bravery deemed by the general public as untainted by war.

The wars, however, brought incredible

changes to nursing; a profession that would ease suffering, save lives and provide women with a new role in society. In the First World War, the volume of casualties from trench warfare drastically changed the role of nurses in the health care team. Most of the time, doctors were in surgery dealing with horrific injuries, and it was the nurses who performed triage for new patients, managed the

wards and the infections, and irrigated wounds. Up to this point in the nursing field, nurses were not in a position to make decisions on their own. Now, with ten, twenty or even eighty patients in their care at once, they made decisions they would not have done before. This slowly started to change the role of the nurse from a lowly job to an esteemed caring profession as we know it today.

References

1. Borden M. *The Forbidden Zone*. London: Heinemann; 1929.
 2. Nalbantian S. *Memory in Literature: From Rousseau to Neuroscience*. London: Palgrave Macmillan; 2003.
 3. Adhikari M. *History and Story: Unconventional History in Michael Ondaatje's The English Patient and James A. Michener's Tales of the South Pacific*. *History and Theory*. 2002;42:43-55.
 4. Peterson JM. *No angels in the house: The Victorian Myth and Paget Women*. *The American Historical Review* 1984;89.3:677-708.
 5. Hallett CE. *Nurse Writers of the Great War*. Manchester: Manchester University Press; 2016.
 6. Van Devanter L. *Home Before Morning: The Story of an Army Nurse in Vietnam*. New York: Warner Books;1983.
 7. Marcus J. *Corpus, Corps, Corpse: Writing the Body in/at War, in Arms and the Woman: Gender and Literary Representation*. Ed. by Helen M. Cooper. Chapel Hill: University of North Carolina Press;1989.
 8. Brittain V. *Chronicle of Youth: War Diary 1913 – 1917*, ed. by Alan Bishop. London: Fontana;1982.
 9. Acton C. *Diverting the Gaze: The Unseen Text in Women's War Writings*. *College Literature* 2004;31.2: 53-79.
 10. Brittain V. *Honourable Estate*. Reprint. London: Virago; 2000.
 11. Gilbert S, Gubar S. *No Man's Land: The Place of the Woman Writer in the Twentieth Century*. London: London University Press; 1988.
 12. Smith S, Watson J. *Reading Autobiography: A guide for Interpreting Life Narratives*. Minnesota: University of Minnesota Press; 2001.
 13. Enloe C. *Does Khaki Become You? The Militarization of Women's Lives*. London: Pandora; 1988.
 14. Van Devanter L, Furey J. *Visions of War, Dreams of Peace: Writings of Women in the Vietnam War*. New York: Warner Books; 1991.
 15. Ouditt S. *Fighting Forces, Writing Women Identity and Ideology in the First World War*. London: Routledge; 1994.
 16. Hallett CE. *Veiled Warriors: Allied Nurses of the First World War*. Oxford: Oxford University Press; 2014.
-